NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

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For some HCPCS codes the fee schedule source was determined by the New Mexico Medical Assistance Division. As explained in the Hospital Outpatient Payment Method Procedure Disclaimer & Agreement this table is not to be used as a guide to coverage of services by the Medicaid Program. All dental service codes in the range D0000 through D9999 are significant procedures for which multiple reduction applies. The reimbursement amount will be $0.00 for vaccination antigen HCPCS for which the Fee Schedule Source is "VFC Antigen" and the recipient is 18 years old or younger because the antigen is distributed for free for children by the New Mexico Department of Health Vaccines for Children (VFC) Program. Please be reminded that for services where the submitted charges on the line item are less than $1.01, the reimbursement will be $0.00 because the billing is considered to be 'token' billing'. Current OPPS APC status indicators are in the CMS Addendum B. The APC Medicare CLAB NM FEE identifies the HCPCS laboratory services that are excluded from the OPPS percentage multiplier. This multiplier is the provider specific institutional percent multiplied by the HCPCS pricing span value, currently set at 100% until June 30, 2016 and 97% effective July 1, 2016 for most hospitals except critical access hospitals. The HCPCS codes with Ambulatory Payment Classification do involve the OPPS percentage multiplier. Molecular pathology procedure codes in the range 81200 through 81479 may require diagnosis codes and/or clinical documentation relevant to the clinical utility for those laboratory tests. For the current maximum units please refer to the CMS Medically Unlikely Edits (MUEs). Some procedure codes are only payable for Alternative Benefit Plan (ABP) recipients. Please refer to the appropriate ABP resources on the HSD website. Only laboratory molecular pathology tests that involve clinical utility are reimbursed by New Mexico Medicaid and are subject to retrospective review. A test that has clinical utility means that the test results can be used to pursue effective treatment or provide other concrete clinical benefits for recipients who have a disease diagnosis relevant for the specific molecular pathology testing.

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
0001F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
0001U	Y	$720.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0002M	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
0002U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		2/1/2017
0003M	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
0003U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		2/1/2017
0004M	Y	$79.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0005F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
0005U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2024
0006M	Y	$150.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0007M	Y	$375.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0007U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2024
0008U	Y	$597.91	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024

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CODE	Tax	Rate	SOURCE	NOTE	VFC	START
0009U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2024
00100	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00102	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00103	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00104	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0010U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2024
0011M	Y	$760.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0011U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		8/1/2017
00120	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00124	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00126	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0012F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
0012M	Y	$760.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0012U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		8/1/2017
0013M	Y	$760.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0013U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		8/1/2017
00140	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00142	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00144	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00145	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00147	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00148	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0014F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
0014U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		8/1/2017
0015F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
0015M	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2020
00160	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00162	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00164	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0016M	Y	$3,489.63	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0016U	Y	$163.96	OPPS NM Fee Sched APC St Ind	Ambulatory Payment Classificat		11/1/2024

NEW MEXICO MEDICAID FEE FOR SERVICE
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CODE	Tax	Rate	SOURCE	NOTE	VFC	START
			A			
00170	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00172	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00174	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00176	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
0017M	Y	$2,510.21	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0017U	Y	$91.66	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0018M	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2021
0018U	Y	$3,002.09	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
00190	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00192	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
0019M	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		10/1/2023
0019U	Y	$3,675.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0020M	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2024
00210	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00211	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
00212	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00214	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
00215	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
00216	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00218	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0021U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2017
00220	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00222	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0022U	Y	$1,950.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0023U	Y	$248.51	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0024U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
0025U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
0026U	Y	$3,600.00	OPPS NM Fee Sched APC St Ind	Ambulatory Payment Classificat		11/1/2024

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CODE	Tax	Rate	SOURCE	NOTE	VFC	START
			A			
0027U	Y	$121.91	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0029U	Y	$742.27	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
00300	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0030U	Y	$134.13	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0031U	Y	$174.81	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
00320	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00322	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00326	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0032U	Y	$174.81	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0033U	Y	$349.62	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0034U	Y	$466.17	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
00350	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00352	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0035U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2018
0036U	Y	$4,780.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0037U	Y	$3,500.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0038U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2018
0039U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2018
00400	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00402	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00404	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00406	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0040U	Y	$409.90	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
00410	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0041U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2018
0042T	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010

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CODE	Tax	Rate	SOURCE	NOTE	VFC	START
0042U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2018
0043U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2018
0044U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2018
00450	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00454	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0045U	Y	$3,873.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0046U	Y	$407.43	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
00470	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00472	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00474	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
0047U	Y	$3,873.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0048U	Y	$2,919.60	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0049U	Y	$407.43	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
00500	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0050U	Y	$2,916.60	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0051U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2018
00520	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00522	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00524	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
00528	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00529	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0052U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2018
00530	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00532	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00534	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00537	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00539	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00540	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
00541	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010

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CODE	Tax	Rate	SOURCE	NOTE	VFC	START
00542	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
00546	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
00548	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0054T	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0054U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2018
00550	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0055T	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0055U	Y	$3,240.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
00560	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
00561	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
00562	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
00563	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00566	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00567	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
0056U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2018
00580	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
0058U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2018
0059U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2018
00600	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00604	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
0060U	Y	$759.05	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0061U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2018
00620	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00625	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00626	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0062U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2018
00630	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00632	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
00635	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0063U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2018
00640	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0064U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2018

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CODE	Tax	Rate	SOURCE	NOTE	VFC	START
0065U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2018
00670	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2019
0067U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2018
0068U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2024
0069U	Y	$380.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
00700	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00702	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0070U	Y	$676.37	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0071T	Y	$1,861.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
0071U	Y	$600.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
0072T	Y	$1,861.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
0072U	Y	$450.91	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
00730	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00731	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2018
00732	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2018
0073U	Y	$450.91	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
0074U	Y	$450.91	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
00750	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00752	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00754	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00756	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0075T	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
0075U	Y	$450.91	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
0076T	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
0076U	Y	$450.91	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
00770	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0077U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2018
0078U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2024

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CODE	Tax	Rate	SOURCE	NOTE	VFC	START
00790	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00792	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
00794	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
00796	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
00797	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0079U	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2024
00800	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00802	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
0080U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2019
00811	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2018
00812	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2018
00813	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2018
00820	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0082U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2019
00830	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00832	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00834	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00836	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0083U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2019
00840	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00842	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00844	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
00846	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
00848	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
0084U	Y	$720.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
00851	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00860	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00862	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00864	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
00865	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
00866	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
00868	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
0086U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2024
00870	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00872	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00873	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0087U	Y	$3,159.42	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
00880	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00882	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
0088U	Y	$3,159.42	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0089U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2024
00902	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00904	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
00906	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00908	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
0090U	Y	$1,950.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
00910	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00912	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00914	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00916	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00918	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0091U	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2019
00920	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00921	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00922	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00924	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00926	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00928	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0092U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2019
00930	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00932	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
00934	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
00936	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
00938	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0093U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2019
00940	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00942	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00944	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
00948	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0094U	Y	$7,582.20	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
00950	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
00952	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0095T	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
0095U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2019
0096U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2024
0098T	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
0100T	Y	$2,693.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
0101T	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
0101U	Y	$1,743.95	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0102T	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
0102U	Y	$1,303.95	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0103U	Y	$1,743.95	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0105U	Y	$950.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
0106T	Y	$52.35	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
0106U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2019
0107T	Y	$52.35	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
0107U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2019
0108T	Y	$131.69	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
0108U	Y	$0.00	OPPS NM Medicaid Price Review	APC Medicare CLAB NM FEE		10/1/2019
0109T	Y	$52.35	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
0109U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2024
0110T	Y	$52.35	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
0110U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2019

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
01112	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0111U	Y	$682.29	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
01120	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0112U	Y	$356.13	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
01130	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0113U	Y	$760.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
01140	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
0114U	Y	$1,938.01	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
01150	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
0115U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2019
01160	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0116U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2019
01170	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01173	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0117U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2019
0118U	Y	$2,753.25	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0119U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2019
01200	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01202	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0120U	Y	$2,510.21	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
01210	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01212	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
01214	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
01215	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0121U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2019
01220	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0122U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2019
01230	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01232	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
01234	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
0123U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2019
01250	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01260	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01270	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01272	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
01274	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
0129U	Y	$1,303.95	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0130U	Y	$584.90	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
0131U	Y	$710.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
01320	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0132U	Y	$741.64	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
0133U	Y	$690.29	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
01340	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0134U	Y	$748.39	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
0135U	Y	$700.56	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
01360	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0136U	Y	$407.43	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0137U	Y	$282.88	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
01380	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01382	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0138U	Y	$468.33	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
01390	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01392	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01400	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01402	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2019
01404	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
0140U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2024
0141U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2024
01420	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0142U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2024
01430	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01432	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01440	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01442	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
01444	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
01462	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01464	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01470	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01472	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01474	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01480	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01482	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01484	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01486	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
01490	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01500	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01502	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
01520	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01522	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0152U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2024
0153U	Y	$3,159.42	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
0154U	Y	$482.14	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0155U	Y	$274.83	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0156U	Y	$1,740.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0157U	Y	$282.88	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0158U	Y	$282.88	OPPS NM Fee Sched APC St Ind	APC Medicare CLAB NM FEE		11/1/2024

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
			A			
0159U	Y	$282.88	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
0160U	Y	$282.88	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
01610	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0161U	Y	$282.88	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
01620	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01622	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0162U	Y	$486.54	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
01630	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01634	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
01636	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
01638	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
0163U	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		4/1/2020
0164T	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
0164U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2020
01650	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01652	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
01654	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
01656	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
0165T	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
0165U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2020
0166U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2020
01670	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0167U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2020
01680	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0169U	Y	$466.17	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0170U	Y	$1,950.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
01710	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01712	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
01714	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01716	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0171U	Y	$1,519.06	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0172U	Y	$3,030.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
01730	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01732	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0173U	Y	$466.17	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
01740	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01742	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01744	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0174T	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0174U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2020
01756	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
01758	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0175T	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0175U	Y	$1,336.09	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
01760	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0176U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2020
01770	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01772	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0177U	Y	$274.83	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
01780	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01782	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0178U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2020
0179U	Y	$1,943.21	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0180U	Y	$274.83	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
01810	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0181U	Y	$185.20	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
01820	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01829	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0182U	Y	$301.35	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
01830	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01832	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0183U	Y	$185.20	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
01840	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01842	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01844	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0184T	Y	$1,643.62	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2012
0184U	Y	$185.20	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
01850	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01852	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0185U	Y	$185.20	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
01860	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0186U	Y	$185.20	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0187U	Y	$274.83	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0188U	Y	$274.82	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
0189U	Y	$274.83	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0190U	Y	$274.83	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
01916	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0191U	Y	$274.83	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
01920	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01922	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01924	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01925	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01926	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
0192U	Y	$274.83	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
01930	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01931	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01932	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01933	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01937	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2022
01938	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2022
01939	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2022
0193U	Y	$282.88	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
01940	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2022
01941	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2022
01942	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2022
0194U	Y	$185.20	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
01951	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01952	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01953	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01958	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0195U	Y	$375.25	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
01960	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01961	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01962	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01963	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01965	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01966	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01967	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01968	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01969	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0196U	Y	$185.20	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0197U	Y	$185.20	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
0198T	Y	$100.81	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
0198U	Y	$282.88	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
01990	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
01991	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01992	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01996	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
01999	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
0199U	Y	$274.83	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0200T	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
0200U	Y	$274.83	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0201T	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
0201U	Y	$185.20	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0202T	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
0202U	Y	$416.78	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2024
0203U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2024
0205U	Y	$47.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0206U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2020
0207T	Y	$52.04	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
0207U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2020
0208T	Y	$43.31	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
0209T	Y	$43.31	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
0209U	Y	$787.15	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0210T	Y	$43.31	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
0210U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2020
0211T	Y	$43.31	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
0211U	Y	$8,455.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0212T	Y	$117.90	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
0212U	Y	$5,475.20	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
0213T	Y	$485.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
0213U	Y	$2,709.95	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0214T	Y	$172.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
0214U	Y	$522.60	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0215T	Y	$172.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
0215U	Y	$2,574.65	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0216T	Y	$485.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
0216U	Y	$1,537.02	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0217T	Y	$172.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
0217U	Y	$2,198.35	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0218T	Y	$172.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
0218U	Y	$2,279.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0219T	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
0219U	Y	$725.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0220T	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
0220U	Y	$0.00	OPPS NM Medicaid Price Review	APC Medicare CLAB NM FEE		10/1/2020
0221T	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
0221U	Y	$274.83	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0222T	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
0222U	Y	$282.88	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0223U	Y	$416.78	OPPS NM Medicaid Covered	APC Medicare CLAB NM FEE		1/1/2022
0224U	Y	$51.43	OPPS NM Medicaid Covered	APC Medicare CLAB NM FEE		1/1/2023
0225U	Y	$436.29	OPPS NM Medicaid Covered	APC Medicare CLAB NM FEE		7/1/2023
0226U	Y	$42.28	OPPS NM Medicaid Covered	APC Medicare CLAB NM FEE		8/10/2020
0227U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2024
0228U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2021
0229U	Y	$384.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
0230U	Y	$301.35	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0231U	Y	$846.27	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0232T	Y	$131.69	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
0232U	Y	$274.83	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0233U	Y	$274.83	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0234T	Y	$6,250.23	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
0234U	Y	$527.87	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0235T	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
0235U	Y	$600.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0236T	Y	$6,250.23	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
0236U	N	$602.70	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0237T	Y	$6,250.23	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
0237U	Y	$584.90	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0238T	Y	$6,250.23	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2011
0238U	Y	$584.90	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0239U	Y	$3,500.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0240U	Y	$149.31	OPPS NM Medicaid Covered	APC Medicare CLAB NM FEE		7/1/2023
0241U	Y	$149.31	OPPS NM Medicaid Covered	APC Medicare CLAB NM FEE		7/1/2023
0242U	Y	$5,000.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0243U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2021
0244U	Y	$3,500.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0245U	Y	$1,266.07	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0246U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2021
0247U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2021
0248U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2021

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
0249U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2021
0250U	Y	$2,919.60	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0251U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2021
0252U	Y	$759.50	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0253T	Y	$1,645.71	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
0253U	Y	$3,159.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0254U	Y	$759.05	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0255U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2021
0256U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2021
0257U	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		10/1/2021
0258U	Y	$3,675.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0259U	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		10/1/2021
0260U	Y	$1,263.53	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0261U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2021
0262U	Y	$3,200.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0263T	Y	$2,120.09	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		7/1/2011
0263U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2021
0264T	Y	$2,120.09	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		7/1/2011
0264U	Y	$1,263.53	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0265T	Y	$2,120.09	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		7/1/2011
0265U	Y	$5,475.80	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0266T	Y	$18,707.16	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2019
0266U	Y	$3,200.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0267T	Y	$1,464.22	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		7/1/2011
0267U	Y	$6,739.33	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0268T	Y	$14,428.91	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		7/1/2011

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
0268U	Y	$608.17	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
0269T	Y	$2,946.39	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2015
0269U	Y	$608.17	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0270T	Y	$2,127.98	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2015
0270U	Y	$608.17	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0271T	Y	$2,127.98	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2015
0271U	Y	$608.17	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0272T	Y	$79.05	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		7/1/2011
0272U	Y	$608.17	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0273T	Y	$79.05	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		7/1/2011
0273U	Y	$607.17	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0274T	Y	$3,460.46	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		7/1/2011
0274U	Y	$608.17	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0275T	Y	$3,535.92	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		7/1/2011
0275U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2021
0276U	Y	$2,448.56	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0277U	Y	$608.17	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0278T	Y	$94.93	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
0278U	Y	$608.17	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0279U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2021
0280U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2021
0281U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2021
0282U	Y	$720.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0283U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2021
0284U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2021
0285U	Y	$443.31	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
0286U	Y	$134.13	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0287U	Y	$3,600.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0288U	Y	$3,873.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0289U	Y	$760.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0290U	Y	$760.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0291U	Y	$1,755.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0292U	Y	$1,755.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0293U	Y	$760.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0294U	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2024
0295U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
0296U	Y	$1,950.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0297U	Y	$2,919.60	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0298U	Y	$2,919.60	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0299U	Y	$1,863.22	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0300U	Y	$4,183.13	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0301U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2024
0302U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2024
0303U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
0304U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
0305U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
0306U	Y	$3,878.45	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0307U	Y	$794.49	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0308T	Y	$1,584.76	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2013
0308U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2022

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
0309U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2022
0310U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2022
0311U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2022
0312U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2022
0313U	Y	$3,600.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0314U	Y	$1,950.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0315U	Y	$8,500.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0316U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2022
0317U	Y	$2,030.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0318U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2022
0319U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2022
0320U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2022
0321U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2022
0322U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2022
0323U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2022
0326U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2024
0327U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2022
0328U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2022
0329T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		10/1/2013
0329U	Y	$3,437.98	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0330T	Y	$52.04	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
0330U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2022
0331T	Y	$292.06	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
0331U	Y	$1,863.22	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0332T	Y	$292.06	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
0333T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		10/1/2013
0333U	Y	$662.32	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0334U	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2024
0335T	Y	$1,866.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
0335U	Y	$5,224.60	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0336U	Y	$2,574.65	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0337U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		10/1/2022
0338T	Y	$2,389.74	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
0338U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		10/1/2022
0339T	Y	$2,389.74	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
0339U	Y	$760.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0340U	Y	$3,920.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
0341U	Y	$1,900.20	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0342T	Y	$2,843.54	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
0342U	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		10/1/2022
0343U	Y	$760.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0344U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		10/1/2022
0345T	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
0345U	Y	$1,336.09	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0346U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		10/1/2022
0347T	Y	$131.69	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
0347U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		10/1/2022
0348T	Y	$94.98	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
0348U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		10/1/2022
0349T	Y	$94.98	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
0349U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		10/1/2022
0350T	Y	$94.98	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
0350U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		10/1/2022

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
0351T	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
0351U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		10/1/2022
0352T	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2015
0352U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		10/1/2022
0353T	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
0354T	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2015
0355U	Y	$137.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0356U	Y	$1,800.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0358T	Y	$52.35	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
0358U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2023
0359U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2023
0360U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2023
0361U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2023
0362T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2019
0362U	Y	$3,600.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0363U	Y	$760.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0364U	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2024
0365U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2023
0366U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2023
0367U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2023
0368U	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2024
0369U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2024
0370U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2024
0371U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2024
0372U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2024

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
0373T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2019
0373U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2024
0374U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2024
0375U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2023
0376U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2023
0377U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2023
0378T	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2015
0378U	Y	$137.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0379T	Y	$52.04	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
0379U	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2024
0380U	Y	$416.78	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0381U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2023
0382U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2023
0383U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2023
0384U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2023
0385U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2023
0387U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2023
0388U	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2024
0389U	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2024
0390U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2023
0391U	Y	$3,600.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0392U	Y	$1,336.09	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0393U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2023
0394T	Y	$194.35	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2016
0394U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2023
0395T	Y	$696.21	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2016

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
0395U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2023
0396U	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2024
0397T	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016
0398T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2016
0398U	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2024
0399U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2023
0400U	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2024
0401U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2023
0402T	Y	$2,226.48	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2024
0402U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		10/1/2023
0403T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2016
0403U	Y	$760.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0404U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		10/1/2023
0405U	Y	$1,770.48	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0406U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		10/1/2023
0407U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		10/1/2023
0408T	Y	$21,930.03	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
0408U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		10/1/2023
0409T	Y	$21,930.03	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
0409U	Y	$2,919.60	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0410T	Y	$6,696.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
0410U	Y	$1,160.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0411T	Y	$6,696.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
0411U	Y	$1,336.09	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0412T	Y	$2,489.69	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2016
0412U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		10/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
0413T	Y	$2,489.69	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2016
0413U	Y	$1,263.53	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0414T	Y	$21,930.03	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
0414U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		10/1/2023
0415T	Y	$862.51	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
0415U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		10/1/2023
0416T	Y	$1,411.21	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
0417T	Y	$33.62	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016
0417U	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2024
0418T	Y	$33.62	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016
0418U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		10/1/2023
0419T	Y	$428.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
0419U	Y	$1,336.09	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0420T	Y	$428.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
0420U	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2024
0421T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2016
0421U	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2024
0422T	Y	$92.07	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016
0422U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0423U	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2024
0424U	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2024
0425U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0426U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0427U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0428U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0429U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0430U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0431U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0432U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0433U	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2024

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
0434U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0435U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0436U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0437T	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2016
0437U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0438U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0439T	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2016
0439U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2024
0440T	Y	$4,566.06	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2019
0440U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2024
0441T	Y	$4,566.06	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2019
0441U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2024
0442T	Y	$4,566.06	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2019
0442U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2024
0443T	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		7/1/2016
0443U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2024
0444T	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2016
0444U	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2024
0445T	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2016
0445U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2024
0446T	Y	$452.91	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2017
0446U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2024
0447T	Y	$153.05	OPPS Price Mcare APC St Ind Q2	Not Available		1/1/2017
0447U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2024
0448T	Y	$452.91	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2017
0448U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2024
0449T	Y	$3,417.32	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2017
0449U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2024
0450T	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2017
0450U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2024
0451U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2024
0452U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2024
0453U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2024

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
0454U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2024
0455U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2024
0456U	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2024
0457U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2024
0458U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2024
0459U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2024
0460U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2024
0461U	Y	$0.00	OPPS NM Medicaid Price Review	APC Medicare CLAB NM FEE		11/1/2024
0462U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2024
0463U	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2024
0464T	Y	$127.05	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2017
0464U	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2024
0465U	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2024
0466U	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2024
0467U	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2024
0468U	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2024
0469T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2017
0469U	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2024
0470U	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2024
0471U	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2024
0472T	Y	$280.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2019
0472U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2024
0473T	Y	$117.54	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2019
0473U	Y	$4,500.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
0474T	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		7/1/2017
0474U	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2024
0475U	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2024
0476U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
0477U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
0478U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
0479T	Y	$310.78	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2018
0479U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
0480T	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2018
0480U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
0481T	Y	$329.99	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2018
0481U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
0482U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
0483T	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2018
0483U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
0484T	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2018
0484U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
0485T	Y	$31.80	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2018
0485U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
0486T	Y	$31.80	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2018
0486U	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2024
0487U	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2024
0488T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2018
0488U	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2024
0489T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2018
0489U	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2024
0490T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2018
0490U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
0491U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
0492U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
0493U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
0494T	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2018
0494U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
0495T	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2018
0495U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
0496T	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2018
0496U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
0497U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
0498U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
0499U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
0500F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
0500T	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2018
0500U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
0501F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
0501U	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		10/1/2024
0502F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
0502U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
0503F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
0503U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
0504U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
0505F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2012
0505T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2018
0505U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
0506T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2018
0506U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
0507F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2012
0507T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2018
0507U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
0508U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
0509F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
0509T	Y	$135.95	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2019
0509U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
0510T	Y	$2,623.34	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2019
0510U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
0511T	Y	$5,699.59	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2019
0511U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
0512T	Y	$314.08	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2019
0512U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
0513F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
0513T	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2019
0513U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
0514F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2012
0514U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
0515T	Y	$21,996.46	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2019

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
0515U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
0516F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
0516T	Y	$7,404.11	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2019
0516U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
0517F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
0517T	Y	$7,404.11	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2019
0517U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
0518F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
0518T	Y	$3,130.53	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2019
0518U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
0519F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
0519T	Y	$3,130.53	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2019
0519U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
0520F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
0520T	Y	$21,996.46	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2019
0520U	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
0521F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
0521T	Y	$17.17	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2019
0521U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
0522T	Y	$37.16	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2019
0522U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
0523T	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2019
0523U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
0524T	Y	$2,641.52	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2019
0524U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
0525F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
0525T	Y	$9,879.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2019
0525U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
0526F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
0526T	Y	$7,404.11	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2019

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
0526U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
0527T	Y	$7,404.11	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2019
0527U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
0528F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2013
0528T	Y	$37.16	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2019
0528U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
0529F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
0529T	Y	$37.16	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2019
0529U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
0530T	Y	$3,130.53	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2019
0530U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
0531T	Y	$3,130.53	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2019
0531U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2025
0532T	Y	$3,130.53	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2019
0532U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2025
0533U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2025
0534U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2025
0535F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
0535U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2025
0536U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2025
0537T	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2019
0537U	Y	$1,495.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2025
0538T	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2019
0538U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2025
0539T	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2019

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
0539U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2025
0540F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
0540T	Y	$288.38	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2019
0540U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2025
0541T	Y	$252.31	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		7/1/2019
0541U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2025
0542T	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		7/1/2019
0542U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2025
0543T	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		7/1/2019
0543U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2025
0544T	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		7/1/2019
0544U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2025
0545F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
0545T	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		7/1/2019
0545U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2025
0546T	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2019
0546U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2025
0547T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2019
0547U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2025
0548U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2025
0549U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2025
0550F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2012
0550U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2025
0551F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2012
0551U	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
0552T	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		7/1/2019
0553T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2019
0554T	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		7/1/2019
0555F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2012
0555T	Y	$17.17	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		7/1/2019
0556F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
0556T	Y	$230.56	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		7/1/2019
0557F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
0557T	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		7/1/2019
0558T	Y	$62.30	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		7/1/2019
0559T	Y	$55.90	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		7/1/2019
0560T	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2019
0561T	Y	$55.90	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		7/1/2019
0562T	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2019
0563T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2020
0564T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2020
0565T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2020
0566T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2020
0567T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
0568T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
0569T	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2020
0570T	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2020
0571T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2020
0572T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2020
0573T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2020
0574T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2020
0575F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
0575T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2020
0576T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2020
0577T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2020
0578T	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
0579T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2020
0580F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
0580T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2020
0581F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
0581T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
0582F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
0582T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
0583F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
0583T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
0584F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
0584T	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2020
0585T	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2020
0586T	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2020
0587T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2020
0588T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2020
0589T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2020
0590T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2020
0591T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
0592T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
0593T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
0594T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2020
0596T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2020
0597T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2020
0598T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2020
0599T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2020
0600T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2020
0601T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2020
0602T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2020
0603T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2020
0604T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2020
0605T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2020
0606T	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		7/1/2020
0607T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2020
0608T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2020
0609T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2020

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
0610T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2020
0611T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2020
0612T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2020
0613T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2020
0614T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2020
0615T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2020
0616T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2020
0617T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2020
0618T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2020
0619T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2020
0620T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2021
0621T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2021
0622T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2021
0623T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2021
0624T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2021
0625T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2021
0626T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2021
0627T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2021
0628T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2021
0629T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2021
0630T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2021
0631T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2021
0632T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2021
0633T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2021
0634T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2021
0635T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2021
0636T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2021
0637T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2021
0638T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2021
0639T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2021
0640T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2021
0643T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2021
0644T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2021

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
0645T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2021
0646T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2021
0647T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2021
0648T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2021
0649T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2021
0650T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2021
0651T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2021
0652T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2021
0653T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2021
0654T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2021
0655T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2021
0656T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2021
0657T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2021
0658T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2021
0659T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2021
0660T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2021
0661T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2021
0662T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2021
0663T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2021
0664T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2021
0665T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2021
0666T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2021
0667T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2021
0668T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2021
0669T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2021
0670T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2021
0671T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
0672T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2022
0673T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
0674T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2022
0675T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2022
0676T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2022
0677T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2022

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
0678T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2022
0679T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2022
0680T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2022
0681T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2022
0682T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2022
0683T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2022
0684T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2022
0685T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2022
0686T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
0687T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2022
0688T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2022
0689T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
0690T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
0691T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2022
0692T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
0693T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
0694T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
0695T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
0696T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
0697T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
0698T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
0699T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
0700T	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
0701T	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
0704T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2022
0705T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2022
0706T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2022
0707T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
0708T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2022
0709T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2022
0710T	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
0711T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
0712T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
0713T	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
0714T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2022
0716T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2022
0717T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2022
0718T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2022
0719T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2022
0720T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2022
0721T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2022
0722T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2022
0723T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2022
0724T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2022
0725T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2022
0726T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2022
0727T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2022
0728T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2022
0729T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2022
0730T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2022
0731T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2022
0732T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2022
0733T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2022
0734T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2022
0735T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2022
0736T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2022
0737T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2022
0738T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
0739T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
0740T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
0741T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
0742T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
0743T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
0744T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
0745T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
0746T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
0747T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
0748T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
0749T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
0750T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
0751T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
0752T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
0753T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
0754T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
0755T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
0756T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
0757T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
0758T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
0759T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
0760T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
0761T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
0762T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
0763T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
0764T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
0765T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
0766T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
0767T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
0770T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
0771T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
0772T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
0773T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
0774T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
0776T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
0777T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
0778T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
0779T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
0780T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
0781T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
0782T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
0783T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
0784T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0785T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0786T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0787T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0788T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0789T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0790T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0791T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2023
0792T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2023
0793T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2023
0794T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2023
0795T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2023
0796T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2023
0797T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2023
0798T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2023
0799T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2023
0800T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2023
0801T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2023
0802T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2023
0803T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2023
0804T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2023
0805T	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		7/1/2023
0806T	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		7/1/2023
0807T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2023
0808T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2023
0810T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2023
0811T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0812T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0813T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0814T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0815T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0816T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
0817T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0818T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0819T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0820T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0821T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0822T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0823T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0824T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0825T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0826T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0827T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0828T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0829T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0830T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0831T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0832T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0833T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0834T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0835T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0836T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0837T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0838T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0839T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0840T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0841T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0842T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0843T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0844T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0845T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0846T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0847T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0848T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0849T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
0850T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0851T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0852T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0853T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0854T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0855T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0856T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0857T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0858T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0859T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0860T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0861T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0862T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0863T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0864T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0865T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0866T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
0867T	Y	$4,930.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		7/1/2024
0868T	Y	$510.68	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		7/1/2024
0869T	Y	$3,084.03	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		7/1/2024
0870T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2024
0871T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2024
0872T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2024
0873T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2024
0874T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2024
0875T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2024
0876T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2024
0877T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2024
0878T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2024
0879T	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2024
0880T	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		7/1/2024
0881T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2024
0882T	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2024

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
0883T	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2024
0884T	Y	$3,648.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		7/1/2024
0885T	Y	$2,675.24	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		7/1/2024
0886T	Y	$2,675.24	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		7/1/2024
0887T	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2024
0888T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2024
0889T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2024
0890T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2024
0891T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2024
0892T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2024
0893T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2024
0894T	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		7/1/2024
0895T	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		7/1/2024
0896T	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		7/1/2024
0897T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2024
0898T	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2024
0899T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2024
0900T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2024
0901T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2025
0902T	Y	$128.90	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2025
0903T	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
0904T	Y	$59.40	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2025
0905T	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
0906T	Y	$198.70	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2025
0907T	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2025
0908T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2025
0909T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2025
0910T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2025
0911T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2025
0912T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2025
0913T	Y	$5,701.52	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2025
0914T	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2025
0915T	Y	$32,061.58	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
0916T	Y	$22,446.19	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2025
0917T	Y	$8,275.58	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2025
0918T	Y	$8,275.58	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2025
0919T	Y	$3,639.30	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2025
0920T	Y	$3,639.30	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2025
0921T	Y	$3,639.30	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2025
0922T	Y	$3,639.30	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2025
0923T	Y	$22,446.19	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2025
0924T	Y	$618.26	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2025
0925T	Y	$1,829.23	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2025
0926T	Y	$37.29	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2025
0927T	Y	$37.29	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2025
0928T	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
0929T	N	$37.29	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2025
0930T	Y	$1,213.99	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2025
0931T	Y	$1,213.99	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2025
0932T	Y	$299.91	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2025
0933T	Y	$3,216.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2025
0934T	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
0935T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2025
0936T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2025
0937T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2025
0938T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2025
0939T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2025
0940T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2025
0941T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2025
0942T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2025
0943T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2025
0944T	Y	$241.72	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2025
0945T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2025
0946T	Y	$106.34	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2025
0947T	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2025
10004	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2019

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
10005	Y	$579.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2019
10006	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2019
10007	Y	$579.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2019
10008	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2019
10009	Y	$579.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2019
1000F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
10010	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2019
10011	Y	$579.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2019
10012	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2019
10021	Y	$101.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
1002F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2012
10030	Y	$148.09	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
10035	Y	$480.64	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
10036	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016
1003F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
10040	Y	$98.46	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
1004F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
1005F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2012
10060	Y	$98.12	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
10061	Y	$98.12	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
1006F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
1007F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
10080	Y	$98.12	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
10081	Y	$850.78	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
1008F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
1010F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
1011F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
10120	Y	$188.62	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
10121	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
1012F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
10140	Y	$850.78	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
1015F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
10160	Y	$98.12	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
10180	Y	$1,308.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
1018F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
1019F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
1022F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
1026F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
1030F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
1031F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
1032F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
1033F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
1034F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
1035F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
1036F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
1038F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
1039F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
1040F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
1050F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
1052F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
1055F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
1060F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
1061F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
1065F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
1066F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
1070F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
1071F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
1090F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
1091F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
11000	Y	$103.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
11001	Y	$59.24	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11004	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
11005	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
11006	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
11008	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
1100F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
11010	Y	$294.06	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11011	Y	$294.06	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11012	Y	$294.06	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
1101F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
11042	Y	$188.62	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
11043	Y	$188.62	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
11044	Y	$552.92	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
11045	Y	$184.14	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
11046	Y	$184.14	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
11047	Y	$572.47	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
11055	Y	$98.46	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
11056	Y	$59.24	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
11057	Y	$59.24	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
11102	Y	$176.45	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2019
11103	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2019
11104	Y	$176.45	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2019
11105	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2019
11106	Y	$314.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2019
11107	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2019
1110F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
1111F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
1116F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
1118F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
1119F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
11200	Y	$98.46	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
11201	Y	$59.24	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
1121F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
1123F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
1124F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
1125F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
1126F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
1127F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2012
1128F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2012

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
11300	Y	$59.24	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11301	Y	$59.24	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11302	Y	$59.24	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11303	Y	$103.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11305	Y	$98.46	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
11306	Y	$59.24	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11307	Y	$59.24	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11308	Y	$59.24	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
1130F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
11310	Y	$59.24	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11311	Y	$59.24	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11312	Y	$59.24	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11313	Y	$59.24	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
1134F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
1135F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
1136F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
1137F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
11400	Y	$294.06	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11401	Y	$294.06	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11402	Y	$294.06	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11403	Y	$552.92	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11404	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11406	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11420	Y	$552.92	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11421	Y	$552.92	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11422	Y	$552.92	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11423	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11424	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11426	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11440	Y	$294.06	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11441	Y	$294.06	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11442	Y	$552.92	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11443	Y	$552.92	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
11444	Y	$552.92	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11446	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11450	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11451	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11462	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11463	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11470	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11471	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
1150F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
1151F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
1152F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
1153F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
1157F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
1158F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
1159F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
11600	Y	$552.92	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11601	Y	$294.06	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11602	Y	$294.06	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11603	Y	$552.92	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11604	Y	$552.92	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11606	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
1160F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
11620	Y	$552.92	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11621	Y	$294.06	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11622	Y	$552.92	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11623	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11624	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11626	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11640	Y	$552.92	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11641	Y	$552.92	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11642	Y	$552.92	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11643	Y	$552.92	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11644	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
11646	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
1170F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
11719	Y	$52.35	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
11720	Y	$52.35	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
11721	Y	$52.35	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
11730	Y	$59.24	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
11732	Y	$59.24	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11740	Y	$52.35	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
11750	Y	$294.06	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11755	Y	$294.06	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
1175F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
11760	Y	$91.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11762	Y	$1,082.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11765	Y	$59.24	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11770	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
11771	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
11772	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
1180F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
1181F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
1182F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2012
1183F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2012
11900	Y	$98.46	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
11901	Y	$98.46	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
11920	Y	$212.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
11921	Y	$212.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
11922	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
11950	Y	$91.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
11951	Y	$91.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
11952	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
11954	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
11960	Y	$1,613.14	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
11970	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
11971	Y	$1,823.59	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
11976	Y	$378.41	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
11980	Y	$131.69	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
11981	Y	$264.70	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2020
11982	Y	$263.38	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2020
11983	Y	$263.38	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2020
12001	Y	$98.46	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
12002	Y	$98.46	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
12004	Y	$98.46	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
12005	Y	$91.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
12006	Y	$91.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
12007	Y	$91.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
1200F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
12011	Y	$98.46	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
12013	Y	$98.46	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
12014	Y	$98.46	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
12015	Y	$91.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
12016	Y	$91.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
12017	Y	$91.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
12018	Y	$91.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
12020	Y	$299.19	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
12021	Y	$212.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
12031	Y	$91.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
12032	Y	$212.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
12034	Y	$91.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
12035	Y	$91.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
12036	Y	$212.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
12037	Y	$212.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
12041	Y	$91.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
12042	Y	$91.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
12044	Y	$91.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
12045	Y	$212.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
12046	Y	$212.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
12047	Y	$212.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
12051	Y	$91.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
12052	Y	$91.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
12053	Y	$91.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
12054	Y	$91.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
12055	Y	$212.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
12056	Y	$212.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
12057	Y	$212.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
1205F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
1220F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
13100	Y	$299.19	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
13101	Y	$299.19	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
13102	Y	$299.19	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
13120	Y	$212.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
13121	Y	$212.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
13122	Y	$91.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
13131	Y	$212.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
13132	Y	$299.19	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
13133	Y	$212.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
13151	Y	$299.19	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
13152	Y	$299.19	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
13153	Y	$212.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
13160	Y	$1,613.14	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
14000	Y	$1,082.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
14001	Y	$1,082.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
1400F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
14020	Y	$1,082.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
14021	Y	$1,082.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
14040	Y	$1,082.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
14041	Y	$1,082.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
14060	Y	$1,082.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
14061	Y	$1,082.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
14301	Y	$1,613.14	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
14302	Y	$1,613.14	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
14350	Y	$1,613.14	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
1450F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2012
1451F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2012
1460F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
1461F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
1490F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
1491F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
1493F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
1494F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
15002	Y	$299.19	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15003	Y	$299.19	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
15004	Y	$299.19	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15005	Y	$299.19	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
1500F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
15011	Y	$1,829.23	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2025
15012	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2025
15013	Y	$7,250.50	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2025
15014	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2025
15015	Y	$1,829.23	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2025
15016	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2025
15017	Y	$1,829.23	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2025
15018	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2025
1501F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
1502F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
1503F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
15040	Y	$212.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
1504F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
15050	Y	$299.19	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
1505F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
15100	Y	$1,613.14	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15101	Y	$1,613.14	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
15110	Y	$299.19	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15111	Y	$299.19	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
15115	Y	$299.19	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15116	Y	$299.19	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
15120	Y	$1,613.14	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15121	Y	$1,613.14	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
15130	Y	$1,082.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15131	Y	$1,082.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
15135	Y	$1,082.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15136	Y	$1,082.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
15150	Y	$299.19	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15151	Y	$299.19	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
15152	Y	$299.19	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
15155	Y	$299.19	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15156	Y	$299.19	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
15157	Y	$299.19	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
15200	Y	$1,082.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15201	Y	$1,082.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
15220	Y	$1,082.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15221	Y	$299.19	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
15240	Y	$1,082.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15241	Y	$299.19	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
15260	Y	$1,082.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15261	Y	$1,082.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
15271	Y	$219.31	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
15272	Y	$80.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
15273	Y	$334.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
15274	Y	$219.31	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
15275	Y	$219.31	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
15276	Y	$80.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
15277	Y	$334.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2012
15278	Y	$219.31	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
15570	Y	$1,613.14	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
15572	Y	$1,613.14	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15574	Y	$1,613.14	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
15576	Y	$1,613.14	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15600	Y	$1,613.14	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15610	Y	$1,613.14	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15620	Y	$1,613.14	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15630	Y	$1,613.14	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15650	Y	$1,613.14	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15730	Y	$2,710.30	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2018
15731	Y	$1,613.14	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15733	Y	$2,710.30	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2018
15734	Y	$1,613.14	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
15736	Y	$1,613.14	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
15738	Y	$1,613.14	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
15740	Y	$1,082.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15750	Y	$1,613.14	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15756	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
15757	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
15758	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
15760	Y	$1,613.14	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15769	Y	$2,977.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2020
15770	Y	$1,613.14	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15771	Y	$2,977.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2020
15772	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2020
15773	Y	$1,622.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2020
15774	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2020
15775	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
15776	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
15777	Y	$1,127.75	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
15778	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2023
15780	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
15781	Y	$294.06	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
15782	Y	$294.06	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
15783	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2015
15786	Y	$98.46	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
15787	Y	$59.24	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
15788	Y	$98.46	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
15789	Y	$103.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15792	Y	$98.46	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
15793	Y	$98.46	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
15819	Y	$212.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15820	Y	$1,737.53	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		10/1/2024
15821	Y	$1,737.53	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		10/1/2024
15822	Y	$1,737.53	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		10/1/2024
15823	Y	$1,737.53	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		10/1/2024
15824	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
15825	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
15826	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
15828	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
15829	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
15830	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15832	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2014
15833	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2014
15834	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
15835	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
15836	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2014
15837	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2014
15838	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
15839	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
15840	Y	$1,613.14	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15841	Y	$1,613.14	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15842	Y	$1,613.14	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15845	Y	$1,613.14	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15847	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2014
15851	Y	$188.62	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15852	Y	$131.69	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
15853	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2023
15854	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
15860	Y	$131.69	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
15876	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
15877	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
15878	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2014
15879	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2014
15920	Y	$294.06	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15922	Y	$1,613.14	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15931	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15933	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15934	Y	$1,613.14	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15935	Y	$1,613.14	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15936	Y	$1,082.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15937	Y	$1,613.14	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15940	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15941	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15944	Y	$1,613.14	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15945	Y	$1,613.14	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15946	Y	$1,613.14	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15950	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15951	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15952	Y	$1,082.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15953	Y	$1,082.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15956	Y	$1,082.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15958	Y	$1,082.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
15999	Y	$294.06	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
16000	Y	$98.46	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
16020	Y	$103.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
16025	Y	$103.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
16030	Y	$103.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
16035	Y	$103.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
16036	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
17000	Y	$59.24	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
17003	Y	$29.90	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
17004	Y	$188.62	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
17106	Y	$188.62	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
17107	Y	$188.62	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
17108	Y	$188.62	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
17110	Y	$98.46	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
17111	Y	$103.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
17250	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2017
17260	Y	$103.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
17261	Y	$103.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
17262	Y	$103.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
17263	Y	$103.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
17264	Y	$103.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
17266	Y	$188.62	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
17270	Y	$103.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
17271	Y	$103.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
17272	Y	$103.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
17273	Y	$188.62	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
17274	Y	$188.62	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
17276	Y	$188.62	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
17280	Y	$103.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
17281	Y	$188.62	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
17282	Y	$188.62	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
17283	Y	$188.62	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
17284	Y	$188.62	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
17286	Y	$188.62	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
17311	Y	$332.56	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
17312	Y	$332.56	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
17313	Y	$332.56	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
17314	Y	$332.56	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
17315	Y	$332.56	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
17340	Y	$52.35	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
17360	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
17380	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
17999	Y	$98.46	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
19000	Y	$310.01	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
19001	Y	$101.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
19020	Y	$1,308.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
19030	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
19081	Y	$651.20	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
19082	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
19083	Y	$651.20	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
19084	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
19085	Y	$651.20	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
19086	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
19100	Y	$310.01	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
19101	Y	$1,668.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
19105	Y	$2,302.95	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
19110	Y	$1,668.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
19112	Y	$1,668.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
19120	Y	$1,668.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
19125	Y	$1,668.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
19126	Y	$1,668.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
19281	Y	$131.69	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
19282	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
19283	Y	$131.69	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
19284	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
19285	Y	$131.69	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
19286	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
19287	Y	$131.69	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
19288	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
19294	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2018
19296	Y	$3,924.90	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
19297	Y	$3,924.90	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
19298	Y	$3,924.90	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
19300	Y	$1,668.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
19301	Y	$1,668.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
19302	Y	$2,831.03	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
19303	Y	$2,302.95	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
19305	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
19306	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
19307	Y	$2,831.03	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
19316	Y	$2,302.95	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
19318	Y	$2,831.03	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
19325	Y	$3,924.90	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
19328	Y	$3,011.59	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2015
19330	Y	$3,011.59	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2015
19340	Y	$2,831.03	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
19342	Y	$3,924.90	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
19350	Y	$1,668.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
19355	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
19357	Y	$3,924.90	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
19361	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
19364	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
19367	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
19368	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
19369	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
19370	Y	$2,302.95	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
19371	Y	$2,302.95	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
19380	Y	$2,831.03	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
19396	Y	$2,302.95	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
19499	Y	$1,668.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
2000F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
2001F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
2002F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
2004F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
20100	Y	$513.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
20101	Y	$1,613.14	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
20102	Y	$1,613.14	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
20103	Y	$850.78	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
2010F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
2014F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
20150	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
2015F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
2016F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
2018F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
2019F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
20200	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
20205	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
20206	Y	$526.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
2020F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
2021F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
20220	Y	$552.92	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
20225	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
2022F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
2023F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		10/1/2019
20240	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
20245	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
2024F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
20250	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
20251	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
2025F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		10/1/2019
2026F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
2027F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
2028F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
2029F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
2030F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
2031F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
2033F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		10/1/2019
2035F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
2040F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
2044F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
20500	Y	$513.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
20501	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
2050F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
20520	Y	$294.06	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
20525	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
20526	Y	$172.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
20527	Y	$175.92	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
20550	Y	$172.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
20551	Y	$172.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
20552	Y	$172.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
20553	Y	$172.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
20555	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
20560	Y	$22.99	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/21/2020
20561	Y	$22.99	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/21/2020
20600	Y	$172.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
20604	Y	$211.13	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
20605	Y	$172.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
20606	Y	$211.13	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
2060F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
20610	Y	$172.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
20611	Y	$211.13	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
20612	Y	$172.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
20615	Y	$310.01	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
20650	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
20660	Y	$712.98	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2015
20661	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
20662	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
20663	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
20664	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
20665	Y	$131.69	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
20670	Y	$1,240.89	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2016
20680	Y	$1,823.59	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2016
20690	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
20692	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
20693	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
20694	Y	$1,483.94	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2014
20696	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
20697	Y	$1,240.01	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
20700	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2020
20701	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2020
20702	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2020
20703	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2020
20704	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2020
20705	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2020
20802	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
20805	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
20808	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
20816	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
20822	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
20824	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
20827	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
20838	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
20900	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
20902	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
20910	Y	$1,613.14	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
20912	Y	$1,613.14	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
20920	Y	$1,082.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
20922	Y	$1,082.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
20924	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
20930	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2012
20931	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2012
20932	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2019
20933	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2019
20934	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2019
20936	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
20937	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
20938	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
20939	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2018
20950	Y	$98.12	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
20955	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
20956	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
20957	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
20962	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
20969	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
20970	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
20972	Y	$3,540.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
20973	Y	$3,540.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
20974	Y	$45.11	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		10/1/2011
20975	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
20979	Y	$52.35	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
20982	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
20983	Y	$3,761.53	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
20985	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
20999	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21010	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21011	Y	$552.92	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21012	Y	$552.92	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21013	Y	$552.92	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21014	Y	$552.92	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21015	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21016	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21025	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21026	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21029	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21030	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21031	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
21032	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21034	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21040	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
21044	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21045	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
21046	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21047	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21048	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21049	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21050	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21060	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21070	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21073	Y	$513.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21076	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21077	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21079	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21080	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21081	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21082	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21083	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21084	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21085	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21086	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21087	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21088	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21089	Y	$77.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21100	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21110	Y	$646.41	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2015
21116	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
21120	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21121	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21122	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21123	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21125	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21127	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21137	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
21138	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21139	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21141	Y	$5,579.71	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2023
21142	Y	$5,579.71	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2023
21143	Y	$5,579.71	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2023
21145	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
21146	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
21147	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
21150	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21151	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
21154	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
21155	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
21159	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
21160	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
21172	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21175	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21179	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
21180	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
21181	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21182	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
21183	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
21184	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
21188	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
21193	Y	$3,012.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2011
21194	Y	$5,579.71	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2023
21195	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21196	Y	$5,579.71	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2023
21198	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21199	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21206	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21208	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21209	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21210	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
21215	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21230	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21235	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21240	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21242	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21243	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21244	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21245	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21246	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21247	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
21248	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21249	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21255	Y	$5,579.71	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2023
21256	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21260	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21261	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21263	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21267	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21268	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
21270	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21275	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21280	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21282	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21295	Y	$513.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21296	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21299	Y	$77.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21315	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21320	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21325	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21330	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21335	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21336	Y	$1,742.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21337	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
21338	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21339	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21340	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21343	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
21344	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
21345	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21346	Y	$1,677.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2012
21347	Y	$5,579.71	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2023
21348	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
21355	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21356	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21360	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21365	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21366	Y	$5,579.71	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2023
21385	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21386	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21387	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21390	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21395	Y	$3,012.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21400	Y	$513.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21401	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21406	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21407	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21408	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21421	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21422	Y	$5,579.71	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2023
21423	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
21431	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
21432	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
21433	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
21435	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
21436	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
21440	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
21445	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21450	Y	$230.87	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21451	Y	$513.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21452	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21453	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21454	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21461	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21462	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21465	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21470	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21480	Y	$77.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21485	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21490	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21497	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21499	Y	$77.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21501	Y	$1,308.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21502	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21510	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
21550	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21552	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21554	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21555	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21556	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21557	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21558	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21600	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21601	Y	$2,318.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2020
21602	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2020
21603	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2020
21610	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21615	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
21616	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
21620	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
21627	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
21630	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
21632	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
21685	Y	$513.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21700	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21705	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
21720	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21725	Y	$98.12	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21740	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
21742	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21743	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21750	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
21811	Y	$2,041.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
21812	Y	$2,041.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
21813	Y	$2,041.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
21820	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21825	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
21899	Y	$77.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21920	Y	$552.92	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21925	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21930	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21931	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21932	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21933	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
21935	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
21936	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
22010	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22015	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22100	Y	$3,318.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
22101	Y	$3,318.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
22102	Y	$3,318.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
22103	Y	$3,318.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
22110	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
22112	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22114	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22116	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22206	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22207	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22208	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2016
22210	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22212	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22214	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22216	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22220	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22222	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
22224	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22226	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2016
22310	Y	$323.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
22315	Y	$1,240.01	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
22318	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22319	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22325	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22326	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22327	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22328	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22505	Y	$1,030.79	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
22510	Y	$2,601.11	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
22511	Y	$2,601.11	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
22512	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
22513	Y	$6,320.32	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
22514	Y	$6,320.32	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
22515	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
22526	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
22527	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
22532	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22533	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
22534	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22548	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22551	Y	$3,427.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
22552	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2011
22554	Y	$3,427.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2012
22556	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22558	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22585	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22586	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
22590	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22595	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22600	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22610	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22612	Y	$3,318.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
22614	Y	$3,318.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
22630	Y	$17,756.28	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2023
22632	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22633	Y	$11,900.71	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2020
22634	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2020
22800	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22802	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22804	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22808	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22810	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22812	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22818	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22819	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22830	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22836	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2024
22837	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2024
22838	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2024
22840	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22841	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
22842	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22843	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22844	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22845	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22846	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22847	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22848	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22849	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22850	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22852	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22853	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2017
22854	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2017
22855	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22856	Y	$3,552.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
22857	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22858	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
22859	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2017
22860	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2023
22861	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
22862	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22864	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
22865	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
22867	Y	$10,690.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2018
22868	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2017
22869	Y	$14,697.92	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2017
22870	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2017
22899	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
22900	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
22901	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
22902	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
22903	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
22904	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
22905	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
22999	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23000	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23020	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23030	Y	$1,308.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
23031	Y	$1,308.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
23035	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
23040	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23044	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23065	Y	$552.92	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
23066	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
23071	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23073	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23075	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
23076	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
23077	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23078	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
23100	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23101	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
23105	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23106	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23107	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23120	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23125	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23130	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23140	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
23145	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
23146	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
23150	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
23155	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
23156	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
23170	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
23172	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
23174	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
23180	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
23182	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
23184	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
23190	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
23195	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
23200	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
23210	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
23220	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
23330	Y	$552.92	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
23333	Y	$594.47	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23334	Y	$1,610.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23335	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
23350	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
23395	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
23397	Y	$5,975.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
23400	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
23405	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
23406	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23410	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23412	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23415	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23420	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23430	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23440	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23450	Y	$5,975.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23455	Y	$5,975.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23460	Y	$5,975.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23462	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23465	Y	$5,975.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23466	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23470	Y	$8,005.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23472	Y	$17,756.28	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2023
23473	Y	$9,075.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
23474	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
23480	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23485	Y	$5,975.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23490	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23491	Y	$5,975.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23500	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23505	Y	$1,240.01	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23515	Y	$4,413.42	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23520	Y	$323.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23525	Y	$323.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23530	Y	$3,064.80	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23532	Y	$1,742.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23540	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23545	Y	$323.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23550	Y	$3,064.80	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23552	Y	$3,064.80	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23570	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23575	Y	$323.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23585	Y	$4,413.42	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23600	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23605	Y	$1,240.01	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23615	Y	$4,413.42	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23616	Y	$4,413.42	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23620	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23625	Y	$1,240.01	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23630	Y	$4,413.42	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23650	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23655	Y	$1,030.79	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23660	Y	$3,064.80	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23665	Y	$323.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23670	Y	$4,413.42	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23675	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23680	Y	$3,064.80	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
23700	Y	$1,030.79	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23800	Y	$5,975.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23802	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23900	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
23920	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
23921	Y	$1,082.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23929	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
23930	Y	$1,308.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
23931	Y	$1,308.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
23935	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
24000	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24006	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24065	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
24066	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
24071	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24073	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24075	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
24076	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
24077	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
24079	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24100	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24101	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24102	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24105	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24110	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
24115	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24116	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
24120	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24125	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
24126	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
24130	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24134	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
24136	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
24138	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24140	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24145	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24147	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24149	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24150	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
24152	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
24155	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24160	Y	$2,141.60	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2014
24164	Y	$2,141.60	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2014
24200	Y	$294.06	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
24201	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
24220	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
24300	Y	$1,030.79	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24301	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
24305	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
24310	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
24320	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
24330	Y	$5,975.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24331	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24332	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24340	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24341	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
24342	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
24343	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24344	Y	$5,975.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24345	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24346	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24357	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
24358	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
24359	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
24360	Y	$2,688.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24361	Y	$8,005.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
24362	Y	$3,915.20	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24363	Y	$8,005.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24365	Y	$2,688.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24366	Y	$8,005.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24370	Y	$9,075.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24371	Y	$9,075.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24400	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24410	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24420	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24430	Y	$5,975.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24435	Y	$5,975.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24470	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24495	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24498	Y	$5,975.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24500	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24505	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24515	Y	$4,413.42	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24516	Y	$4,413.42	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24530	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24535	Y	$323.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24538	Y	$1,742.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24545	Y	$4,413.42	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24546	Y	$4,413.42	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24560	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24565	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24566	Y	$1,742.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24575	Y	$4,413.42	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24576	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24577	Y	$323.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24579	Y	$4,413.42	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24582	Y	$1,742.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24586	Y	$4,413.42	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24587	Y	$4,413.42	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
24600	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24605	Y	$1,030.79	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24615	Y	$4,413.42	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24620	Y	$1,240.01	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24635	Y	$4,413.42	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24640	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24650	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24655	Y	$323.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24665	Y	$3,064.80	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24666	Y	$4,413.42	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24670	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24675	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24685	Y	$3,064.80	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24800	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24802	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24900	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
24920	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
24925	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24930	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
24931	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
24935	Y	$5,975.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
24940	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
24999	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25000	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
25001	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25020	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25023	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25024	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25025	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25028	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25031	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
25035	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
25040	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
25065	Y	$552.92	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
25066	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
25071	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25073	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25075	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25076	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
25077	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
25078	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25085	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25100	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25101	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25105	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25107	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25109	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25110	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
25111	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25112	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25115	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25116	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25118	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25119	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25120	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25125	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
25126	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
25130	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25135	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25136	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25145	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
25150	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
25151	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
25170	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
25210	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
25215	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
25230	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25240	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25246	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
25248	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
25250	Y	$2,141.60	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2014
25251	Y	$2,141.60	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2014
25259	Y	$1,240.01	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25260	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25263	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25265	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25270	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25272	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25274	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25275	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
25280	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25290	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25295	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
25300	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25301	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25310	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
25312	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
25315	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25316	Y	$5,975.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25320	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25332	Y	$2,688.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25335	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25337	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25350	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25355	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25360	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25365	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25370	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25375	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
25390	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25391	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25392	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25393	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25394	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25400	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25405	Y	$5,975.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25415	Y	$5,975.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25420	Y	$5,975.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25425	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25426	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25430	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25431	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
25440	Y	$5,975.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25441	Y	$8,005.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25442	Y	$8,005.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25443	Y	$3,915.20	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25444	Y	$3,915.20	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25445	Y	$3,915.20	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25446	Y	$8,005.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25447	Y	$2,688.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25448	Y	$3,244.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2025
25449	Y	$2,688.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25450	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25455	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25490	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25491	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25492	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25500	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25505	Y	$323.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25515	Y	$3,064.80	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25520	Y	$323.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25525	Y	$3,064.80	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
25526	Y	$3,064.80	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25530	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25535	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25545	Y	$3,064.80	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25560	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25565	Y	$323.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25574	Y	$4,413.42	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25575	Y	$4,413.42	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25600	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25605	Y	$323.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25606	Y	$1,742.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25607	Y	$4,413.42	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25608	Y	$4,413.42	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25609	Y	$4,413.42	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25622	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25624	Y	$323.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25628	Y	$3,064.80	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25630	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25635	Y	$323.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25645	Y	$3,064.80	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
25650	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25651	Y	$1,742.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25652	Y	$3,064.80	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25660	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25670	Y	$1,742.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25671	Y	$1,742.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25675	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25676	Y	$1,742.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25680	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25685	Y	$1,742.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25690	Y	$1,240.01	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25695	Y	$1,742.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25800	Y	$5,975.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
25805	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25810	Y	$5,975.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25820	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25825	Y	$5,975.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25830	Y	$5,975.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25900	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
25905	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
25907	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25909	Y	$1,548.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25915	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
25920	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
25922	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25924	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
25927	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
25929	Y	$1,082.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25931	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
25999	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
26010	Y	$98.12	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
26011	Y	$850.78	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
26020	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26025	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26030	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26034	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
26035	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
26037	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26040	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26045	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26055	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26060	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26070	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
26075	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26080	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26100	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
26105	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
26110	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
26111	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26113	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26115	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26116	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
26117	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
26118	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26121	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26123	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26125	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26130	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26135	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26140	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26145	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26160	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26170	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26180	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26185	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
26200	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
26205	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
26210	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
26215	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
26230	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
26235	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
26236	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
26250	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
26260	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
26262	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
26320	Y	$1,179.44	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2014
26340	Y	$323.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
26341	Y	$342.91	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26350	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
26352	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26356	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26357	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
26358	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
26370	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26372	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26373	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26390	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
26392	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
26410	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26412	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26415	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26416	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
26418	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26420	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26426	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26428	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
26432	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
26433	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
26434	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
26437	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26440	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26442	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26445	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26449	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26450	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26455	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26460	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26471	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26474	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26476	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26477	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26478	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
26479	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26480	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26483	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26485	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26489	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26490	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26492	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26494	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
26496	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
26497	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
26498	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26499	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26500	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26502	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26508	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26510	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26516	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26517	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26518	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26520	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26525	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26530	Y	$2,688.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26531	Y	$3,915.20	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26535	Y	$2,688.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26536	Y	$3,915.20	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26540	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26541	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26542	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26545	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26546	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26548	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
26550	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26551	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
26553	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
26554	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
26555	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
26556	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
26560	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
26561	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
26562	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
26565	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26567	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26568	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26580	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26587	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26590	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26591	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26593	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26596	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26600	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
26605	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
26607	Y	$1,240.01	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26608	Y	$1,742.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26615	Y	$3,064.80	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26641	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26645	Y	$323.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26650	Y	$1,742.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26665	Y	$3,064.80	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26670	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
26675	Y	$323.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
26676	Y	$1,742.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26685	Y	$1,742.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26686	Y	$4,413.42	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26700	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
26705	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
26706	Y	$1,240.01	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
26715	Y	$1,742.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26720	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
26725	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
26727	Y	$1,742.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26735	Y	$1,742.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26740	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
26742	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
26746	Y	$1,742.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
26750	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
26755	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
26756	Y	$1,742.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26765	Y	$1,742.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26770	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
26775	Y	$1,030.79	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
26776	Y	$1,742.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26785	Y	$1,742.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26820	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26841	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26842	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26843	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26844	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26850	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26852	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26860	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
26861	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26862	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
26863	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26910	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26951	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26952	Y	$1,148.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
26989	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
26990	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
26991	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
26992	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
27000	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27001	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
27003	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
27005	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27006	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27025	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27027	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
27030	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27033	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27035	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27036	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27040	Y	$552.92	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
27041	Y	$552.92	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
27043	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27045	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27047	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27048	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
27049	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
27050	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27052	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27054	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27057	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27059	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27060	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27062	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27065	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27066	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27067	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27070	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27071	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27075	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
27076	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
27077	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27078	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27080	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
27086	Y	$552.92	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
27087	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
27090	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27091	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27093	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
27095	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
27096	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
27097	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27098	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27100	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27105	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27110	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27111	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27120	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27122	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27125	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27130	Y	$11,900.71	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2020
27132	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27134	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27137	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27138	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27140	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27146	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27147	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27151	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27156	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27158	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
27161	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27165	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27170	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
27175	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27176	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27177	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27178	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27179	Y	$5,975.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27181	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27185	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27187	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27197	Y	$199.75	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2017
27198	Y	$199.75	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2017
27200	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
27202	Y	$3,064.80	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
27215	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
27216	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
27217	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
27218	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
27220	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27222	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27226	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27227	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27228	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27230	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27232	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27235	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27236	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27238	Y	$323.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27240	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27244	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27245	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27246	Y	$323.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27248	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27250	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27252	Y	$1,030.79	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
27253	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27254	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27256	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27257	Y	$1,030.79	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27258	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27259	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27265	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27266	Y	$1,030.79	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27267	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27268	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27269	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27275	Y	$1,030.79	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
27278	Y	$17,756.28	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2024
27279	Y	$10,220.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
27280	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27282	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
27284	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27286	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27290	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
27295	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27299	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
27301	Y	$1,308.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27303	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
27305	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27306	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27307	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27310	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27323	Y	$552.92	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
27324	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27325	Y	$1,261.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
27326	Y	$1,261.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
27327	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27328	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
27329	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
27330	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27331	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27332	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27333	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27334	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27335	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27337	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27339	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27340	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27345	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27347	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27350	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27355	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27356	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27357	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27358	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
27360	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27364	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
27365	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27369	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2019
27372	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27380	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
27381	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
27385	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
27386	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
27390	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27391	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
27392	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
27393	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27394	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
27395	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
27396	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
27397	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27400	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27403	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27405	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
27407	Y	$5,975.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
27409	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27412	Y	$5,975.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27415	Y	$5,975.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27416	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27418	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27420	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27422	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27424	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27425	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27427	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27428	Y	$5,975.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27429	Y	$5,975.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27430	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27435	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27437	Y	$2,688.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27438	Y	$3,915.20	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27440	Y	$2,688.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27441	Y	$2,688.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27442	Y	$2,688.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27443	Y	$2,688.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27445	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27446	Y	$8,005.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27447	Y	$9,819.23	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2018
27448	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27450	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27454	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27455	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27457	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
27465	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27466	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27468	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27470	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27472	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27475	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27477	Y	$2,395.59	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
27479	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27485	Y	$2,395.59	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
27486	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27487	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27488	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27495	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27496	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27497	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27498	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27499	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27500	Y	$323.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27501	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27502	Y	$1,240.01	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27503	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27506	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27507	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27508	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27509	Y	$1,742.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27510	Y	$323.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27511	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27513	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27514	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27516	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27517	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27519	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27520	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
27524	Y	$3,064.80	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27530	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27532	Y	$1,240.01	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27535	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27536	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27538	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27540	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27550	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27552	Y	$1,030.79	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27556	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27557	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27558	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27560	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27562	Y	$1,030.79	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27566	Y	$3,064.80	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27570	Y	$1,030.79	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27580	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27590	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27591	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27592	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27594	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27596	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27598	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27599	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
27600	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27601	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27602	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27603	Y	$1,308.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27604	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
27605	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27606	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27607	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
27610	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
27612	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27613	Y	$552.92	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
27614	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27615	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
27616	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27618	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27619	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27620	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27625	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27626	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27630	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
27632	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27634	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27635	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27637	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27638	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27640	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27641	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27645	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
27646	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
27647	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27648	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
27650	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27652	Y	$5,975.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27654	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27656	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
27658	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
27659	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
27664	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
27665	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
27675	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27676	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27680	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
27681	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27685	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
27686	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
27687	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27690	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
27691	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
27692	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27695	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27696	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27698	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
27700	Y	$2,688.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27702	Y	$17,756.28	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2023
27703	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27704	Y	$1,483.94	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2014
27705	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27707	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27709	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27712	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27715	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27720	Y	$3,064.80	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27722	Y	$4,413.42	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27724	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27725	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27726	Y	$3,064.80	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27727	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27730	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27732	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27734	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27740	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27742	Y	$3,139.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27745	Y	$5,975.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27750	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27752	Y	$1,240.01	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
27756	Y	$1,742.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27758	Y	$3,064.80	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27759	Y	$4,413.42	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27760	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27762	Y	$1,240.01	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27766	Y	$3,064.80	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27767	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27768	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27769	Y	$3,064.80	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27780	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27781	Y	$1,240.01	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27784	Y	$3,064.80	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27786	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27788	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27792	Y	$3,064.80	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27808	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27810	Y	$323.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27814	Y	$3,064.80	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27816	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27818	Y	$323.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27822	Y	$3,064.80	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27823	Y	$4,413.42	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27824	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27825	Y	$1,240.01	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27826	Y	$3,064.80	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27827	Y	$4,413.42	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27828	Y	$4,413.42	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27829	Y	$3,064.80	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27830	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27831	Y	$1,240.01	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27832	Y	$3,064.80	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27840	Y	$323.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27842	Y	$1,030.79	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
27846	Y	$3,064.80	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27848	Y	$3,064.80	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27860	Y	$1,030.79	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27870	Y	$5,975.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27871	Y	$5,975.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27880	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27881	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27882	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27884	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27886	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27888	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
27889	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27892	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27893	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27894	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
27899	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
28001	Y	$850.78	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
28002	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
28003	Y	$1,483.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
28005	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
28008	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28010	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28011	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28020	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28022	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28024	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28035	Y	$1,261.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28039	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28041	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28043	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28045	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28046	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
28047	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
28050	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28052	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
28054	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
28055	Y	$1,261.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28060	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28062	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28070	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28072	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28080	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28086	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
28088	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
28090	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
28092	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
28100	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28102	Y	$3,540.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28103	Y	$3,540.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28104	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
28106	Y	$3,540.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
28107	Y	$3,540.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
28108	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
28110	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28111	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28112	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28113	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28114	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28116	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28118	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28119	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28120	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
28122	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
28124	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
28126	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28130	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
28140	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28150	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28153	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28160	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28171	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
28173	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
28175	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
28190	Y	$552.92	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
28192	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
28193	Y	$552.92	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
28200	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28202	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
28208	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28210	Y	$3,540.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
28220	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28222	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28225	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28226	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28230	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28232	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28234	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28238	Y	$3,540.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28240	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28250	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28260	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28261	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28262	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28264	Y	$3,540.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28270	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28272	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28280	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28285	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
28286	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
28288	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28289	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28291	Y	$2,437.31	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2017
28292	Y	$2,126.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28295	Y	$2,437.31	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2017
28296	Y	$2,126.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28297	Y	$2,126.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28298	Y	$2,126.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28299	Y	$2,126.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28300	Y	$3,540.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28302	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28304	Y	$3,540.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28305	Y	$3,540.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28306	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28307	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28308	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28309	Y	$3,540.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28310	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28312	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28313	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28315	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28320	Y	$3,540.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28322	Y	$3,540.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
28340	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
28341	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
28344	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28345	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28360	Y	$3,540.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28400	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28405	Y	$1,240.01	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28406	Y	$1,742.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28415	Y	$4,413.42	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28420	Y	$3,064.80	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
28430	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28435	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28436	Y	$1,742.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28445	Y	$3,064.80	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28446	Y	$3,540.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28450	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
28455	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
28456	Y	$1,742.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28465	Y	$3,064.80	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28470	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
28475	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
28476	Y	$1,742.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28485	Y	$3,064.80	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28490	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28495	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28496	Y	$1,742.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28505	Y	$1,742.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28510	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
28515	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
28525	Y	$1,742.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28530	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28531	Y	$1,742.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28540	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28545	Y	$1,742.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28546	Y	$1,742.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28555	Y	$3,064.80	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28570	Y	$323.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28575	Y	$1,240.01	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28576	Y	$1,742.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28585	Y	$1,742.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28600	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
28605	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
28606	Y	$1,742.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
28615	Y	$3,064.80	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28630	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
28635	Y	$1,030.79	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
28636	Y	$1,742.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28645	Y	$1,742.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28660	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
28665	Y	$1,030.79	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
28666	Y	$1,742.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28675	Y	$1,742.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28705	Y	$3,540.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28715	Y	$5,975.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28725	Y	$3,540.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28730	Y	$3,540.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28735	Y	$3,540.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28737	Y	$3,540.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28740	Y	$3,540.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28750	Y	$3,540.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28755	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28760	Y	$3,540.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28800	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
28805	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28810	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28820	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28825	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
28890	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
28899	Y	$111.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
29000	Y	$71.03	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
29010	Y	$158.11	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
29015	Y	$158.11	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
29035	Y	$158.11	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
29040	Y	$71.03	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
29044	Y	$158.11	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
29046	Y	$158.11	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
29049	Y	$71.03	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
29055	Y	$158.11	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
29058	Y	$71.03	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
29065	Y	$158.11	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
29075	Y	$158.11	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
29085	Y	$71.03	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
29086	Y	$71.03	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
29105	Y	$71.03	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
29125	Y	$131.69	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
29126	Y	$52.35	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
29130	Y	$52.35	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
29131	Y	$52.35	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
29200	Y	$71.03	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
29240	Y	$52.35	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
29260	Y	$52.35	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
29280	Y	$52.35	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
29305	Y	$158.11	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
29325	Y	$158.11	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
29345	Y	$158.11	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
29355	Y	$158.11	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
29358	Y	$158.11	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
29365	Y	$158.11	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
29405	Y	$158.11	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
29425	Y	$158.11	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
29435	Y	$158.11	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
29440	Y	$71.03	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
29445	Y	$158.11	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
29450	Y	$71.03	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
29505	Y	$71.03	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
29515	Y	$71.03	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
29520	Y	$52.35	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
29530	Y	$52.35	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
29540	Y	$71.03	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
29550	Y	$52.35	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
29580	Y	$71.03	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
29581	Y	$71.03	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
29584	Y	$75.94	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
29700	Y	$71.03	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
29705	Y	$71.03	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
29710	Y	$158.11	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
29720	Y	$71.03	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
29730	Y	$71.03	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
29740	Y	$71.03	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
29750	Y	$71.03	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
29799	Y	$71.03	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
29800	Y	$2,016.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29804	Y	$2,016.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29805	Y	$2,016.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29806	Y	$3,290.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29807	Y	$3,290.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29819	Y	$3,290.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29820	Y	$3,290.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29821	Y	$3,290.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29822	Y	$2,016.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29823	Y	$3,290.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29824	Y	$2,016.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29825	Y	$3,290.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29826	Y	$3,290.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
29827	Y	$3,290.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29828	Y	$3,290.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29830	Y	$2,016.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29834	Y	$2,016.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29835	Y	$2,016.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29836	Y	$2,016.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29837	Y	$2,016.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29838	Y	$2,016.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
29840	Y	$2,016.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29843	Y	$2,016.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29844	Y	$2,016.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29845	Y	$2,016.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29846	Y	$2,016.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29847	Y	$3,290.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29848	Y	$2,016.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29850	Y	$2,016.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29851	Y	$3,290.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29855	Y	$3,290.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29856	Y	$3,290.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29860	Y	$3,290.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29861	Y	$3,290.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29862	Y	$3,290.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29863	Y	$3,290.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29866	Y	$3,290.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29867	Y	$3,290.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29868	Y	$3,290.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29870	Y	$2,016.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29871	Y	$2,016.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29873	Y	$2,016.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29874	Y	$2,016.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29875	Y	$2,016.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29876	Y	$2,016.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29877	Y	$2,016.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29879	Y	$2,016.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29880	Y	$2,016.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29881	Y	$2,016.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29882	Y	$2,016.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29883	Y	$2,016.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29884	Y	$2,016.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29885	Y	$3,290.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29886	Y	$2,016.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
29887	Y	$2,016.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29888	Y	$5,975.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29889	Y	$5,975.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29891	Y	$3,290.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29892	Y	$5,975.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29893	Y	$1,472.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29894	Y	$2,016.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29895	Y	$2,016.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29897	Y	$2,016.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29898	Y	$2,016.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29899	Y	$3,290.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29900	Y	$2,016.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
29901	Y	$2,016.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
29902	Y	$2,016.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
29904	Y	$2,016.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29905	Y	$2,016.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29906	Y	$2,016.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29907	Y	$3,290.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29914	Y	$3,265.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29915	Y	$3,265.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29916	Y	$3,265.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
29999	Y	$2,016.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
30000	Y	$230.87	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
30020	Y	$230.87	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
3006F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
3008F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
30100	Y	$513.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
30110	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
30115	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
30117	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
30118	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
3011F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
30120	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
30124	Y	$513.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
30125	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
30130	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
30140	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
3014F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
30150	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
3015F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
30160	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
3016F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
3017F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
3018F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
3019F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2012
30200	Y	$513.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
3020F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2012
30210	Y	$513.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
3021F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
30220	Y	$513.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
3022F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
3023F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
3025F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
3027F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
3028F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
30300	Y	$131.69	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
30310	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
30320	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
3035F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
3037F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
3038F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
30400	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
3040F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
30410	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
30420	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
3042F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
30430	Y	$5,579.71	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		10/1/2024
30435	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
3044F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
30450	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
30460	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
30462	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
30465	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
30468	Y	$5,086.05	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2021
30469	Y	$5,339.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2023
3046F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
3048F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
3049F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
3050F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
3051F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		10/1/2019
30520	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
3052F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		10/1/2019
30540	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
30545	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
3055F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2012
30560	Y	$230.87	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
3056F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2012
30580	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
30600	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
3060F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
3061F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
30620	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
3062F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
30630	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
3066F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
3072F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
3073F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
3074F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
3075F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
3077F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
3078F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
3079F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
30801	Y	$513.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
30802	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
3080F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
3082F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2012
3083F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2012
3084F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2012
3085F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
3088F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
3089F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
30901	Y	$131.69	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
30903	Y	$77.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
30905	Y	$77.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
30906	Y	$77.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
3090F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
30915	Y	$1,791.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
3091F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
30920	Y	$1,791.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
3092F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
30930	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
3093F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
3095F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
3096F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
30999	Y	$77.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31000	Y	$230.87	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31002	Y	$513.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
3100F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
31020	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31030	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31032	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31040	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
31050	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
31051	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
31070	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
31075	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
31080	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
31081	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
31084	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
31085	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
31086	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
31087	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
31090	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
3110F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
3111F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
3112F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
3115F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2012
3117F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2012
3118F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2012
3119F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2012
31200	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
31201	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
31205	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
3120F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
31225	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
31230	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
31231	Y	$124.20	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31233	Y	$124.20	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
31235	Y	$1,459.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
31237	Y	$1,459.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
31238	Y	$1,459.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
31239	Y	$1,973.09	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
31240	Y	$1,459.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
31241	Y	$1,369.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2019
31242	Y	$5,579.71	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2024

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
31243	Y	$5,579.71	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2024
31253	Y	$4,863.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2018
31254	Y	$1,973.09	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
31255	Y	$1,973.09	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
31256	Y	$1,973.09	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
31257	Y	$4,863.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2018
31259	Y	$4,863.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2018
31267	Y	$1,973.09	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
3126F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
31276	Y	$1,973.09	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
31287	Y	$1,973.09	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
31288	Y	$1,973.09	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
31290	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
31291	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
31292	Y	$1,973.09	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
31293	Y	$1,973.09	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
31294	Y	$1,973.09	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
31295	Y	$2,085.97	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
31296	Y	$2,085.97	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
31297	Y	$2,085.97	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
31298	Y	$4,863.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2018
31299	Y	$77.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31300	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
3130F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
3132F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
31360	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
31365	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
31367	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
31368	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
31370	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
31375	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
31380	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
31382	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
31390	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
31395	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
31400	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
3140F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
3141F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
31420	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
3142F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
31500	Y	$129.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
31502	Y	$129.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
31505	Y	$53.97	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
3150F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
31510	Y	$1,459.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31511	Y	$124.20	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31512	Y	$1,459.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31513	Y	$124.20	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31515	Y	$1,459.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31520	Y	$124.20	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31525	Y	$1,459.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31526	Y	$1,459.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31527	Y	$1,973.09	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31528	Y	$1,459.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31529	Y	$1,459.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31530	Y	$1,459.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31531	Y	$1,459.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31535	Y	$1,459.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31536	Y	$1,459.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31540	Y	$1,459.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31541	Y	$1,459.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31545	Y	$1,973.09	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
31546	Y	$1,973.09	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
31551	Y	$4,129.20	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2017
31552	Y	$4,129.20	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2017
31553	Y	$4,129.20	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2017

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
31554	Y	$4,129.20	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2017
3155F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
31560	Y	$1,973.09	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31561	Y	$1,973.09	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31570	Y	$1,459.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31571	Y	$1,973.09	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31572	Y	$2,430.20	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2017
31573	Y	$1,269.25	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2017
31574	Y	$1,269.25	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2017
31575	Y	$124.20	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31576	Y	$1,459.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31577	Y	$297.39	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31578	Y	$1,973.09	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31579	Y	$297.39	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31580	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31584	Y	$5,579.71	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2023
31587	Y	$5,579.71	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2023
31590	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31591	Y	$4,129.20	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2017
31592	Y	$4,129.20	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2017
31599	Y	$232.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		10/1/2024
31600	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31601	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31603	Y	$513.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31605	Y	$513.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
3160F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
31610	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31611	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31612	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31613	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31614	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31615	Y	$513.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31622	Y	$699.05	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
31623	Y	$699.05	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31624	Y	$699.05	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31625	Y	$699.05	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31626	Y	$699.05	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
31627	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
31628	Y	$699.05	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31629	Y	$699.05	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31630	Y	$1,745.98	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
31631	Y	$1,745.98	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31632	Y	$699.05	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
31633	Y	$699.05	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
31634	Y	$707.80	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
31635	Y	$699.05	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31636	Y	$1,745.98	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31637	Y	$699.05	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
31638	Y	$1,745.98	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31640	Y	$1,745.98	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31641	Y	$1,745.98	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31643	Y	$699.05	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31645	Y	$699.05	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31646	Y	$699.05	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31647	Y	$1,486.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
31648	Y	$1,486.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
31649	Y	$722.03	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2014
31651	Y	$1,486.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
31652	Y	$1,991.92	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
31653	Y	$1,991.92	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
31654	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016
31660	Y	$1,486.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
31661	Y	$1,486.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
3170F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
31717	Y	$297.39	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31720	Y	$164.56	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
31725	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
31730	Y	$297.39	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31750	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31755	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31760	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
31766	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
31770	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
31775	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
31780	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
31781	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
31785	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31786	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
31800	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
31805	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
31820	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31825	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31830	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
31899	Y	$699.05	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
3200F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
32035	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
32036	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
32096	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
32097	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
32098	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
32100	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
3210F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
32110	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
32120	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
32124	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
32140	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
32141	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
32150	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
32151	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
3215F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
32160	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
3216F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
3218F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
32200	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
3220F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
32215	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
32220	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
32225	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
3230F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
32310	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
32320	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
32400	Y	$651.59	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
32408	Y	$1,407.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2021
32440	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
32442	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
32445	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
32480	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
32482	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
32484	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
32486	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
32488	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
32491	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
32501	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
32503	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
32504	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
32505	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
32506	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
32507	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
3250F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
32540	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
32550	Y	$2,053.20	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
32551	Y	$374.24	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
32552	Y	$389.80	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2014
32553	Y	$1,038.12	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
32554	Y	$389.80	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
32555	Y	$389.80	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
32556	Y	$389.80	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
32557	Y	$389.80	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
32560	Y	$374.24	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
32561	Y	$374.24	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
32562	Y	$374.24	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
32601	Y	$2,292.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
32604	Y	$2,292.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
32606	Y	$2,292.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
32607	Y	$2,321.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
32608	Y	$2,321.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
32609	Y	$2,321.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
3260F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
32650	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
32651	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
32652	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
32653	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
32654	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
32655	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
32656	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
32658	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
32659	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
3265F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
32661	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
32662	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
32663	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
32664	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
32665	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
32666	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
32667	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
32668	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
32669	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
3266F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
32670	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
32671	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
32672	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
32673	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
32674	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
3267F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
3268F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
3269F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
32701	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2014
3270F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
3271F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
3272F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
3273F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
3274F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
3278F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2012
3279F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2012
32800	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
3280F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2012
32810	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
32815	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
3281F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2012
32820	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
3284F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
32850	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
32851	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
32852	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
32853	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
32854	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
32855	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
32856	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
3285F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
3288F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
32900	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
32905	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
32906	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
3290F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
3291F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
3292F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
3293F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
32940	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
3294F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
32960	Y	$374.24	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
32994	Y	$4,488.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2018
32997	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
32998	Y	$3,462.09	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
32999	Y	$374.24	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
3300F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
33016	Y	$1,631.13	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2020
33017	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2020
33018	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2020
33019	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2020
3301F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
33020	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33025	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33030	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33031	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33050	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33120	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33130	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33140	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33141	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
3315F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
3316F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
3317F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
3318F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
3319F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
33202	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33203	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33206	Y	$8,013.40	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
33207	Y	$8,013.40	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
33208	Y	$9,582.59	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
3320F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
33210	Y	$3,298.59	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
33211	Y	$3,298.59	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
33212	Y	$6,616.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
33213	Y	$7,291.25	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
33214	Y	$9,582.59	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
33215	Y	$1,546.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
33216	Y	$3,298.59	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
33217	Y	$3,298.59	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
33218	Y	$1,546.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
3321F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2011
33220	Y	$1,546.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
33221	Y	$6,959.42	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
33222	Y	$1,082.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
33223	Y	$1,082.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
33224	Y	$13,759.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
33225	Y	$9,323.71	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2012
33226	Y	$1,546.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
33227	Y	$6,350.03	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
33228	Y	$6,959.42	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
33229	Y	$6,959.42	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
3322F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2011
33230	Y	$23,363.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
33231	Y	$23,363.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
33233	Y	$1,546.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
33234	Y	$2,346.32	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2015
33235	Y	$2,346.32	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2015
33236	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33237	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33238	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
3323F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
33240	Y	$21,962.82	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
33241	Y	$2,346.32	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2015
33243	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33244	Y	$2,346.32	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2015
33249	Y	$28,632.36	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2012
3324F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
33250	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33251	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33254	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33255	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33256	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33257	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33258	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33259	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
3325F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
33261	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33262	Y	$23,363.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
33263	Y	$23,363.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
33264	Y	$23,363.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
33265	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33266	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33267	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2022
33268	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2022
33269	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2022
33270	Y	$30,806.39	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
33271	Y	$6,542.78	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
33272	Y	$2,346.32	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
33273	Y	$2,346.32	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
33274	Y	$15,354.50	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2019
33275	Y	$2,641.52	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2019
33276	Y	$45,000.50	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2024
33277	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2024
33278	Y	$3,241.90	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2024
33279	Y	$3,241.90	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2024
33280	Y	$3,241.90	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2024
33281	Y	$3,241.90	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2024
33285	Y	$7,404.11	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2019
33286	Y	$579.34	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2019
33287	Y	$29,586.29	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2024
33288	Y	$12,978.95	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2024
33289	Y	$29,340.73	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2019
3328F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
33300	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33305	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
3330F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
33310	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33315	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
3331F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
33320	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33321	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33322	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33330	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33335	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33340	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2017
33361	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
33362	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
33363	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
33364	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
33365	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
33366	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
33367	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
33368	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
33369	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
33370	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2022
33390	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2017
33391	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2017
33404	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33405	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33406	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
3340F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
33410	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33411	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33412	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33413	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33414	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33415	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33416	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33417	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33418	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
33419	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
3341F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
33420	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33422	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33425	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33426	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33427	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
3342F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
33430	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
3343F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
33440	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2019
3344F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
3345F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
33460	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
33463	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33464	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33465	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33468	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33471	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33474	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33475	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33476	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33477	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2016
33478	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33496	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33500	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33501	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33502	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33503	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33504	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33505	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33506	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33507	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33508	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
33509	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2022
3350F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
33510	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33511	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33512	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33513	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33514	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33516	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33517	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33518	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33519	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
3351F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
33521	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
33522	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33523	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
3352F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
33530	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33533	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33534	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33535	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33536	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
3353F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
33542	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33545	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33548	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
3354F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
33572	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33600	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
33602	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
33606	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33608	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33610	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33611	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33612	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33615	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33617	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33619	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33620	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
33621	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
33622	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
33641	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33645	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33647	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33660	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33665	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
33670	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
33675	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33676	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
33677	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
33681	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33684	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33688	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33690	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33692	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33694	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33697	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33702	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
3370F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
33710	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33720	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33724	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33726	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
3372F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
33730	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33732	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33735	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33736	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33737	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33741	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2021
33745	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2021
33746	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2021
3374F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
33750	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33755	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33762	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33764	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33766	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33767	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33768	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
3376F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
33770	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33771	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33774	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33775	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33776	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33777	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33778	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33779	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33780	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33781	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33782	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
33783	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
33786	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33788	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
3378F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
33800	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33802	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33803	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
3380F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
33813	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33814	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33820	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33822	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33824	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
3382F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
33840	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33845	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
3384F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
33851	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33852	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33853	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33858	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2020

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
33859	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2020
33863	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33864	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33866	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2019
3386F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
33871	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2020
33875	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33877	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33880	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33881	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33883	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33884	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33886	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33889	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
3388F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
33891	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33894	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2022
33895	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2022
33897	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2022
33900	Y	$10,615.31	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2023
33901	Y	$10,615.31	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2023
33902	Y	$17,177.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2023
33903	Y	$10,615.31	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2023
33904	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2023
3390F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
33910	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33915	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33916	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33917	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33920	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33922	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33924	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33925	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
33926	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33927	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2018
33928	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2018
33929	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2018
33930	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33933	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33935	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33940	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33944	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33945	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33946	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
33947	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
33948	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
33949	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
3394F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
33951	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
33952	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
33953	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
33954	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
33955	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
33956	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
33957	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
33958	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
33959	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
3395F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
33962	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
33963	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
33964	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
33965	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
33966	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
33967	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33968	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33969	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
33970	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33971	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33973	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33974	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33975	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33976	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33977	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33978	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
33979	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
33980	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
33981	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
33982	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
33983	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
33984	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
33985	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
33986	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
33987	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
33988	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
33989	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
33990	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
33991	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
33992	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
33993	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
33995	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2021
33997	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2021
33999	Y	$374.24	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
34001	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
34051	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
34101	Y	$2,756.93	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
34111	Y	$2,756.93	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
34151	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
34201	Y	$2,756.93	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
34203	Y	$2,756.93	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
34401	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
34421	Y	$2,756.93	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
34451	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
34471	Y	$2,756.93	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
34490	Y	$2,756.93	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
34501	Y	$2,756.93	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
34502	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
3450F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
34510	Y	$2,756.93	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
3451F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
34520	Y	$2,756.93	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
3452F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
34530	Y	$2,756.93	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
3455F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
34701	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2018
34702	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2018
34703	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2018
34704	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2018
34705	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2018
34706	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2018
34707	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2018
34708	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2018
34709	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2018
3470F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
34710	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2018
34711	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2018
34712	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2018
34713	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2018
34714	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2018
34715	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2018
34716	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2018
34717	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2020
34718	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2020

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
3471F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
3472F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
3475F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
3476F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
34808	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
34812	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
34813	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
34820	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
34830	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
34831	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
34832	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
34833	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
34834	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
34839	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2015
34841	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
34842	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
34843	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
34844	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
34845	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
34846	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
34847	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
34848	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
3490F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
3491F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
3492F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
3493F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
3494F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
3495F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
3496F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
3497F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
3498F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
35001	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
35002	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
35005	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
3500F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
35011	Y	$3,147.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
35013	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
35021	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
35022	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
3502F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
3503F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
35045	Y	$2,075.64	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2012
35081	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35082	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35091	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35092	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35102	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35103	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
3510F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
35111	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35112	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
3511F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
35121	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35122	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
3512F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
35131	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
35132	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
3513F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
35141	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
35142	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
3514F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
35151	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
35152	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
3515F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
3517F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
35180	Y	$2,399.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
35182	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35184	Y	$2,399.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
35188	Y	$2,756.93	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
35189	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35190	Y	$2,399.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
35201	Y	$2,399.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
35206	Y	$2,399.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
35207	Y	$2,756.93	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
3520F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2012
35211	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35216	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35221	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35226	Y	$552.92	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
35231	Y	$2,399.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
35236	Y	$2,399.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
35241	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35246	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35251	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35256	Y	$2,399.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
35261	Y	$3,147.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
35266	Y	$3,147.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
35271	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35276	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35281	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35286	Y	$3,147.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
35301	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
35302	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
35303	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
35304	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
35305	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
35306	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35311	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
35321	Y	$2,399.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
35331	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35341	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
35351	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
35355	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
35361	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35363	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35371	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
35372	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
35390	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
35400	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35500	Y	$1,202.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
35501	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
35506	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35508	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35509	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
3550F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
35510	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35511	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35512	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35515	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35516	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35518	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
3551F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
35521	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
35522	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35523	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
35525	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35526	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
3552F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
35531	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35533	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35535	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
35536	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
35537	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35538	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35539	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35540	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35556	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
35558	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
3555F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
35560	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
35563	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
35565	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
35566	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
35570	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
35571	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35572	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
35583	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
35585	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35587	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35600	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35601	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
35606	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35612	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35616	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35621	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
35623	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
35626	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35631	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
35632	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
35633	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
35634	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
35636	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35637	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35638	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35642	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
35645	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35646	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35647	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35650	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35654	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35656	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
35661	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35663	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
35665	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
35666	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35671	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35681	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
35682	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35683	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35685	Y	$2,399.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
35686	Y	$2,399.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
35691	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
35693	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
35694	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
35695	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
35697	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35700	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35701	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
35702	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2020
35703	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2020
3570F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
3572F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
3573F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
35800	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35820	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35840	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35860	Y	$2,399.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
35870	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
35875	Y	$2,756.93	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
35876	Y	$2,756.93	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
35879	Y	$2,756.93	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
35881	Y	$2,756.93	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
35883	Y	$2,756.93	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
35884	Y	$2,756.93	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
35901	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35903	Y	$2,399.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
35905	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
35907	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
36000	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
36002	Y	$155.07	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
36005	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
36010	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
36011	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
36012	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
36013	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
36014	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
36015	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
36100	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
36140	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
36160	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
36200	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
36215	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
36216	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
36217	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
36218	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
36221	Y	$2,098.21	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2014
36222	Y	$2,098.21	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2014
36223	Y	$2,098.21	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2014
36224	Y	$3,431.50	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2014
36225	Y	$2,098.21	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2014
36226	Y	$3,431.50	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
36227	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
36228	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2013
36245	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
36246	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
36247	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
36248	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
36251	Y	$2,008.85	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2014
36252	Y	$2,008.85	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2014
36253	Y	$2,008.85	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2014
36254	Y	$2,008.85	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2014
36260	Y	$2,051.81	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
36261	Y	$1,546.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
36262	Y	$2,346.32	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2015
36299	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
36400	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
36405	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
36406	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
36410	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
36415	Y	$10.28	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
36416	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
36420	Y	$131.69	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
36425	Y	$131.69	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
36430	Y	$227.89	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
36440	Y	$227.89	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
36450	Y	$227.89	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
36455	Y	$227.89	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
36456	Y	$354.39	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2017
36460	Y	$227.89	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
36465	Y	$1,568.32	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2018
36466	Y	$1,568.32	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2018
36468	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
36470	Y	$59.24	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
36471	Y	$59.24	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
36473	Y	$2,359.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2017
36474	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2017
36475	Y	$3,035.24	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
36476	Y	$1,791.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
36478	Y	$1,791.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
36479	Y	$1,791.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
36481	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
36482	Y	$4,264.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2018
36483	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2018
36500	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
3650F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
36510	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
36511	Y	$804.99	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
36512	Y	$804.99	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
36513	Y	$804.99	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
36514	Y	$804.99	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
36516	Y	$2,246.01	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
36522	Y	$2,246.01	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
36555	Y	$752.66	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
36556	Y	$752.66	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
36557	Y	$1,707.69	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
36558	Y	$1,707.69	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
36560	Y	$2,051.81	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
36561	Y	$2,051.81	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
36563	Y	$2,051.81	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
36565	Y	$2,051.81	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
36566	Y	$2,051.81	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
36568	Y	$752.66	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
36569	Y	$752.66	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
36570	Y	$1,707.69	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
36571	Y	$1,707.69	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
36572	Y	$620.01	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2019

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
36573	Y	$1,093.63	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2019
36575	Y	$429.66	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
36576	Y	$752.66	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
36578	Y	$1,707.69	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
36580	Y	$752.66	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
36581	Y	$1,707.69	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
36582	Y	$2,051.81	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
36583	Y	$2,051.81	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
36584	Y	$752.66	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
36585	Y	$1,707.69	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
36589	Y	$487.87	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2015
36590	Y	$843.17	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2015
36591	Y	$41.33	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2014
36592	Y	$41.33	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		11/1/2010
36593	Y	$161.46	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
36595	Y	$1,707.69	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
36596	Y	$752.66	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
36597	Y	$752.66	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
36598	Y	$161.46	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
36600	Y	$18.02	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2011
36620	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
36625	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
36640	Y	$2,051.81	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
36660	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
36680	Y	$131.69	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
36800	Y	$2,088.13	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
36810	Y	$2,088.13	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
36815	Y	$2,088.13	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
36818	Y	$2,756.93	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
36819	Y	$2,756.93	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
36820	Y	$2,756.93	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
36821	Y	$2,756.93	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
36823	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
36825	Y	$2,756.93	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
36830	Y	$2,756.93	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
36831	Y	$2,756.93	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
36832	Y	$2,756.93	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
36833	Y	$2,756.93	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
36835	Y	$2,088.13	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
36836	Y	$17,177.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2023
36837	Y	$17,177.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2023
36838	Y	$2,756.93	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
36860	Y	$161.46	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
36861	Y	$2,088.13	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
36901	Y	$683.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2017
36902	Y	$4,823.16	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2017
36903	Y	$9,748.31	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2017
36904	Y	$4,823.16	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2017
36905	Y	$9,748.31	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2017
36906	Y	$14,775.90	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2017
36907	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2017
36908	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2017
36909	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2017
3700F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
37140	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
37145	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
37160	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
37180	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
37181	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
37182	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
37183	Y	$6,558.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
37184	Y	$2,756.93	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
37185	Y	$2,756.93	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
37186	Y	$2,756.93	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
37187	Y	$2,756.93	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
37188	Y	$2,756.93	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
37191	Y	$2,978.02	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
37192	Y	$2,044.32	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
37193	Y	$2,235.40	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
37195	Y	$161.46	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
37197	Y	$2,105.93	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
37200	Y	$2,051.81	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
3720F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
37211	Y	$743.02	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
37212	Y	$743.02	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
37213	Y	$1,658.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
37214	Y	$1,658.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
37215	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
37216	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
37217	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
37218	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
37220	Y	$3,699.50	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2011
37221	Y	$3,699.50	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2011
37222	Y	$3,699.50	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2011
37223	Y	$3,699.50	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2011
37224	Y	$3,699.50	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2011
37225	Y	$7,853.97	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2011
37226	Y	$7,853.97	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2011
37227	Y	$13,602.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2011
37228	Y	$3,699.50	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2011
37229	Y	$7,853.97	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2011
37230	Y	$7,853.97	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2011
37231	Y	$13,602.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2011
37232	Y	$3,699.50	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2011
37233	Y	$7,853.97	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2011
37234	Y	$3,699.50	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2011
37235	Y	$3,699.50	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2011
37236	Y	$8,458.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
37237	Y	$4,090.82	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
37238	Y	$8,458.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
37239	Y	$4,090.82	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
37241	Y	$8,201.90	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
37242	Y	$8,201.90	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
37243	Y	$8,201.90	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
37244	Y	$8,201.90	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
37246	Y	$4,823.16	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2017
37247	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2017
37248	Y	$4,823.16	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2017
37249	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2017
37252	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016
37253	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016
3725F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
37500	Y	$3,035.24	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
37501	Y	$1,791.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
3750F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
3751F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
3752F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
3753F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
3754F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
3755F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
37565	Y	$2,399.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
3756F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
3757F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
3758F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
3759F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
37600	Y	$2,399.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
37605	Y	$3,035.24	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
37606	Y	$1,791.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
37607	Y	$1,791.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
37609	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
3760F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
37615	Y	$1,791.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
37616	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
37617	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
37618	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
37619	Y	$2,978.02	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
3761F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
3762F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
3763F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
37650	Y	$1,791.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
37660	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
37700	Y	$1,791.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
37718	Y	$1,791.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
37722	Y	$3,035.24	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
37735	Y	$3,035.24	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
3775F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
37760	Y	$1,791.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
37761	Y	$1,791.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
37765	Y	$1,791.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
37766	Y	$1,791.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
3776F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
37780	Y	$1,791.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
37785	Y	$1,791.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
37788	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
37790	Y	$2,351.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
37799	Y	$862.51	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
38100	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
38101	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
38102	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
38115	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
38120	Y	$3,157.30	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
38129	Y	$2,565.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
38200	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
38204	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
38205	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
38206	Y	$804.99	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
38207	Y	$227.89	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
38208	Y	$227.89	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
38209	Y	$227.89	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
38210	Y	$390.10	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
38211	Y	$390.10	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
38212	Y	$390.10	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
38213	Y	$390.10	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
38214	Y	$390.10	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
38215	Y	$390.10	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
38220	Y	$208.95	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
38221	Y	$208.95	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
38222	Y	$1,347.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2018
38225	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2025
38226	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2025
38227	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2025
38228	Y	$331.69	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2025
38230	Y	$2,246.01	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
38232	Y	$2,196.61	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
38240	Y	$2,246.01	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
38241	Y	$2,246.01	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
38242	Y	$804.99	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
38243	Y	$898.56	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
38300	Y	$850.78	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
38305	Y	$1,308.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
38308	Y	$1,659.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
38380	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
38381	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
38382	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
38500	Y	$1,659.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
38505	Y	$526.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
38510	Y	$1,659.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
38520	Y	$1,659.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
38525	Y	$1,659.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
38530	Y	$1,659.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
38531	Y	$2,816.01	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2019
38542	Y	$3,286.45	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
38550	Y	$1,659.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
38555	Y	$1,659.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
38562	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
38564	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
38570	Y	$3,157.30	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
38571	Y	$4,917.82	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
38572	Y	$3,157.30	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
38573	Y	$7,594.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2018
38589	Y	$2,565.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
38700	Y	$1,659.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
38720	Y	$1,659.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
38724	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
38740	Y	$3,286.45	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
38745	Y	$3,286.45	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
38746	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
38747	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
38760	Y	$1,659.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
38765	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
38770	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
38780	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
38790	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
38792	Y	$180.76	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2014
38794	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
38900	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
38999	Y	$227.89	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
39000	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
39010	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
39200	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
39220	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
39401	Y	$3,152.92	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
39402	Y	$3,152.92	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
39499	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
39501	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
39503	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
39540	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
39541	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
39545	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
39560	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
39561	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
39599	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
4000F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
4001F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
4003F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2012
4004F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2011
4005F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
4008F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
4010F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
4011F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2012
4012F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
4013F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
4014F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
4015F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2012
4016F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
4017F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
4018F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
4019F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
4025F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
4030F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
4033F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
4035F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
4037F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
4040F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
4041F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
4042F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
4043F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
4044F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
4045F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
4046F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
4047F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
4048F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
40490	Y	$230.87	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
4049F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
40500	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
4050F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2012
40510	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
4051F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2012
40520	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
40525	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
40527	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
4052F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
40530	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
4053F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
4054F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
4055F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
4056F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
4058F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
4060F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
4062F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
4063F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
4064F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
40650	Y	$513.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
40652	Y	$513.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
40654	Y	$513.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
4065F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
4066F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
4067F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
4069F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2012
40700	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
40701	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
40702	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
4070F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
40720	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
4073F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2012
4075F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
40761	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
4077F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
40799	Y	$77.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
4079F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2012
40800	Y	$98.12	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
40801	Y	$513.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
40804	Y	$131.69	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
40805	Y	$513.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
40806	Y	$230.87	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
40808	Y	$230.87	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
40810	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
40812	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
40814	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
40816	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
40818	Y	$230.87	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
40819	Y	$513.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
40820	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
40830	Y	$230.87	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
40831	Y	$513.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
40840	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
40842	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
40843	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
40844	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
40845	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
4084F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
4086F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
40899	Y	$77.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
4090F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
4095F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
41000	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
41005	Y	$230.87	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
41006	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
41007	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
41008	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
41009	Y	$230.87	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
4100F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
41010	Y	$513.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
41015	Y	$230.87	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
41016	Y	$513.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
41017	Y	$513.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
41018	Y	$513.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
41019	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
41100	Y	$513.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
41105	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
41108	Y	$294.06	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
4110F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
41110	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
41112	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
41113	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
41114	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
41115	Y	$513.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
41116	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
41120	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
41130	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
41135	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
41140	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
41145	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
41150	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
41153	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
41155	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
4115F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
4120F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
4124F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
41250	Y	$77.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
41251	Y	$230.87	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
41252	Y	$513.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
4130F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
4131F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
4132F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
4133F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
4134F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
4135F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
4136F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
4140F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
4142F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
4144F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
4145F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
4148F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
4149F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
4150F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
41510	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
41512	Y	$513.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
4151F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
41520	Y	$513.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
41530	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
4153F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
4155F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
4157F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
4158F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
41599	Y	$77.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
4159F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
4163F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
4164F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
4165F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
4167F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
4168F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
4169F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
4171F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
4172F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
4174F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
4175F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
4176F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
4177F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
4178F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
4179F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
41800	Y	$98.12	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
41805	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
41806	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
4180F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
4181F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
41820	Y	$513.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
41821	Y	$513.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
41822	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
41823	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
41825	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
41826	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
41827	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
41828	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
4182F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
41830	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
41850	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
4185F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
4186F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
41870	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
41872	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
41874	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
4187F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
4188F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
41899	Y	$77.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
4189F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
4190F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
4191F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
4192F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
4193F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
4194F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
4195F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
4196F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
42000	Y	$230.87	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
4200F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
4201F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
42100	Y	$513.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42104	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42106	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42107	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
4210F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
42120	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42140	Y	$513.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42145	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42160	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
42180	Y	$230.87	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42182	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42200	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42205	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
4220F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
42210	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42215	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
4221F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
42220	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42225	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42226	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42227	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42235	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42260	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42280	Y	$230.87	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42281	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42299	Y	$77.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42300	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42305	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
4230F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
42310	Y	$230.87	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42320	Y	$230.87	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42330	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
42335	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42340	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
42400	Y	$526.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42405	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42408	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42409	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
4240F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
42410	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
42415	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
42420	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
42425	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
42426	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
4242F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
42440	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
42450	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
4245F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
4248F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
42500	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42505	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
42507	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42509	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
4250F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
42510	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42550	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
4255F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
4256F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
42600	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
4260F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
4261F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
42650	Y	$513.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
4265F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
42660	Y	$230.87	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42665	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
4266F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
4267F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
4268F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
42699	Y	$77.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
4269F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
42700	Y	$230.87	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
4270F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
4271F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
42720	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42725	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
4274F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2012
4276F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
4279F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
42800	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42804	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
42806	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42808	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
42809	Y	$131.69	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
4280F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
42810	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
42815	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
42820	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42821	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42825	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42826	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42830	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42831	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42835	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42836	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42842	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42844	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42845	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
42860	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42870	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42890	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42892	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42894	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
42900	Y	$513.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
4290F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
4293F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
42950	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42953	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
42955	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42960	Y	$77.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42961	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
42962	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42970	Y	$77.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42971	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
42972	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
42975	Y	$168.12	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2022

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
42999	Y	$77.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
4300F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
4301F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
43020	Y	$513.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43030	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43045	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
4305F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
4306F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
43100	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43101	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43107	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43108	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43112	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43113	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43116	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43117	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43118	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43121	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43122	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43123	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43124	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43130	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43135	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43180	Y	$1,945.43	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
43191	Y	$621.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
43192	Y	$939.64	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
43193	Y	$939.64	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
43194	Y	$939.64	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
43195	Y	$939.64	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
43196	Y	$939.64	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
43197	Y	$621.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
43198	Y	$621.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
43200	Y	$589.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
43201	Y	$589.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43202	Y	$589.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43204	Y	$589.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43205	Y	$589.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43206	Y	$876.01	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
4320F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
43210	Y	$3,613.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
43211	Y	$621.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
43212	Y	$2,199.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
43213	Y	$939.64	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
43214	Y	$939.64	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
43215	Y	$589.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43216	Y	$589.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43217	Y	$589.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43220	Y	$589.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43226	Y	$589.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43227	Y	$589.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
43229	Y	$1,826.09	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
4322F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
43231	Y	$589.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43232	Y	$589.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43233	Y	$939.64	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
43235	Y	$589.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43236	Y	$589.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43237	Y	$589.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43238	Y	$589.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43239	Y	$589.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43240	Y	$589.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43241	Y	$589.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43242	Y	$589.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43243	Y	$589.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43244	Y	$589.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43245	Y	$589.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
43246	Y	$589.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43247	Y	$589.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43248	Y	$589.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43249	Y	$589.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
4324F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
43250	Y	$589.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43251	Y	$589.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43252	Y	$876.01	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
43253	Y	$939.64	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
43254	Y	$621.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
43255	Y	$589.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43257	Y	$1,635.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43259	Y	$589.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
4325F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
43260	Y	$1,524.12	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43261	Y	$1,524.12	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43262	Y	$1,524.12	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43263	Y	$1,524.12	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
43264	Y	$1,524.12	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43265	Y	$1,524.12	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43266	Y	$2,199.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
4326F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
43270	Y	$939.64	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
43273	Y	$1,524.12	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
43274	Y	$1,793.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
43275	Y	$1,793.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
43276	Y	$1,793.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
43277	Y	$1,793.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
43278	Y	$1,793.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
43279	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
43280	Y	$4,917.82	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43281	Y	$4,818.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2012
43282	Y	$7,367.56	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2018

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
43283	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
43284	Y	$6,966.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2017
43285	Y	$4,197.36	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2017
43286	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2018
43287	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2018
43288	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2018
43289	Y	$2,565.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
4328F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
43290	Y	$1,741.59	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2023
43291	Y	$825.51	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2023
43300	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43305	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
4330F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		10/1/2013
43310	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43312	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43313	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43314	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43320	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43325	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43327	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
43328	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
43330	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43331	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43332	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
43333	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
43334	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
43335	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
43336	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
43337	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
43338	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
43340	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43341	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43351	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
43352	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43360	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43361	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43400	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43405	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
4340F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
43410	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43415	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43420	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43425	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43450	Y	$401.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43453	Y	$401.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43460	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43496	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43497	Y	$3,135.90	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2022
43499	Y	$589.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43500	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43501	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43502	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
4350F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2012
43510	Y	$589.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43520	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43605	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43610	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
43611	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
43620	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43621	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43622	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43631	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43632	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43633	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43634	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43635	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
43640	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43641	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43644	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
43645	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
43647	Y	$5,831.77	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
43648	Y	$3,015.76	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2015
43651	Y	$4,917.82	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43652	Y	$4,917.82	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43653	Y	$3,157.30	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43659	Y	$2,565.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
43752	Y	$81.72	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2011
43753	Y	$131.69	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
43754	Y	$131.69	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
43755	Y	$64.84	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
43756	Y	$159.47	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
43757	Y	$745.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
43761	Y	$589.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43762	Y	$231.42	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2019
43763	Y	$231.42	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2019
43770	Y	$9,807.76	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2023
43771	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
43772	Y	$2,661.14	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2018
43773	Y	$4,354.02	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2018
43774	Y	$2,661.14	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2018
43775	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		3/1/2011
43800	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43810	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43820	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43825	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43830	Y	$1,635.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43831	Y	$589.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43832	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43840	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
43842	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		3/1/2011
43843	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		3/1/2011
43845	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		3/1/2011
43846	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		3/1/2011
43847	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		3/1/2011
43848	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		3/1/2011
43860	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43865	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43870	Y	$589.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
43880	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43881	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43882	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
43886	Y	$1,613.14	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
43887	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		3/1/2011
43888	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		3/1/2011
43999	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		3/1/2011
44005	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
4400F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
44010	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44015	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44020	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44021	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44025	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44050	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44055	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44100	Y	$589.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
44110	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44111	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44120	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44121	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
44125	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44126	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44127	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
44128	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44130	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
44132	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44133	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44135	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44136	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44137	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44139	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44140	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44141	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44143	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44144	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44145	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44146	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44147	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44150	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44151	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44155	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44156	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44157	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44158	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44160	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44180	Y	$3,157.30	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
44186	Y	$3,157.30	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
44187	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44188	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44202	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44203	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44204	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44205	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44206	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
44207	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
44208	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
44210	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44211	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44212	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44213	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
44227	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44238	Y	$2,565.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
44300	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44310	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44312	Y	$1,613.14	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
44314	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44316	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44320	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44322	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44340	Y	$1,613.14	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
44345	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44346	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44360	Y	$663.97	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
44361	Y	$663.97	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
44363	Y	$663.97	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
44364	Y	$663.97	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
44365	Y	$663.97	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
44366	Y	$663.97	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
44369	Y	$663.97	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
44370	Y	$1,785.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
44372	Y	$663.97	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
44373	Y	$663.97	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
44376	Y	$663.97	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
44377	Y	$663.97	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
44378	Y	$663.97	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
44379	Y	$1,785.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
44380	Y	$663.97	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
44381	Y	$852.09	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
44382	Y	$663.97	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
44384	Y	$852.09	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
44385	Y	$613.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
44386	Y	$613.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
44388	Y	$613.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
44389	Y	$613.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
44390	Y	$613.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
44391	Y	$613.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
44392	Y	$613.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
44394	Y	$613.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
44401	Y	$789.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
44402	Y	$789.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
44403	Y	$789.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
44404	Y	$789.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
44405	Y	$789.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
44406	Y	$789.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
44407	Y	$789.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
44408	Y	$789.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
44500	Y	$429.66	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
4450F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2012
44602	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44603	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44604	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44605	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44615	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
44620	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44625	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44626	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44640	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44650	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44660	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44661	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44680	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44700	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
44701	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
44705	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2014
4470F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2012
44715	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44720	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44721	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44799	Y	$1,832.47	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
44800	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
4480F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2012
4481F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2012
44820	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
44850	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44899	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
44900	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44950	Y	$1,832.47	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
44955	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
44960	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
44970	Y	$3,157.30	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
44979	Y	$2,565.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
45000	Y	$951.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
45005	Y	$951.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
4500F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
45020	Y	$951.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
45100	Y	$1,615.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
45108	Y	$1,615.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
4510F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
45110	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
45111	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
45112	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
45113	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
45114	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
45116	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
45119	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
45120	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
45121	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
45123	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
45126	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
45130	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
45135	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
45136	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
45150	Y	$1,615.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
45160	Y	$1,615.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
45171	Y	$951.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
45172	Y	$1,615.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
45190	Y	$1,615.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
4525F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
4526F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
45300	Y	$389.25	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
45303	Y	$623.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
45305	Y	$623.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
45307	Y	$1,538.26	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
45308	Y	$623.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
45309	Y	$623.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
45315	Y	$623.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
45317	Y	$623.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
45320	Y	$1,538.26	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
45321	Y	$1,538.26	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
45327	Y	$1,785.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
45330	Y	$389.25	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
45331	Y	$389.25	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
45332	Y	$389.25	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
45333	Y	$623.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
45334	Y	$623.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
45335	Y	$389.25	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
45337	Y	$389.25	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
45338	Y	$623.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
45340	Y	$623.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
45341	Y	$623.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
45342	Y	$623.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
45346	Y	$827.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
45347	Y	$827.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
45349	Y	$827.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
45350	Y	$827.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
45378	Y	$613.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
45379	Y	$613.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
45380	Y	$613.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
45381	Y	$613.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
45382	Y	$613.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
45384	Y	$613.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
45385	Y	$613.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
45386	Y	$613.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
45388	Y	$789.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
45389	Y	$789.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
45390	Y	$789.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
45391	Y	$613.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
45392	Y	$613.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
45393	Y	$789.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
45395	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
45397	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
45398	Y	$789.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
45399	Y	$789.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
45400	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
45402	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
4540F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
4541F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
45499	Y	$2,565.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
45500	Y	$1,615.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
45505	Y	$2,169.21	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
4550F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
4551F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
45520	Y	$59.24	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
4552F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
4553F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
45540	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
45541	Y	$2,169.21	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
4554F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
45550	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
4555F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
45560	Y	$2,169.21	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
45562	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
45563	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
4556F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
4557F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
4558F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
4559F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
4560F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
4561F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
4562F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
4563F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
45800	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
45805	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
45820	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
45825	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
45900	Y	$361.63	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
45905	Y	$1,615.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
45910	Y	$1,615.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
45915	Y	$951.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
45990	Y	$1,615.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
45999	Y	$361.63	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46020	Y	$1,615.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
46030	Y	$361.63	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46040	Y	$1,615.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
46045	Y	$1,615.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46050	Y	$951.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46060	Y	$1,615.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46070	Y	$951.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46080	Y	$1,615.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46083	Y	$136.12	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46200	Y	$1,615.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46220	Y	$951.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
46221	Y	$361.63	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46230	Y	$1,615.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46250	Y	$1,615.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46255	Y	$1,615.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46257	Y	$1,615.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46258	Y	$1,615.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46260	Y	$1,615.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46261	Y	$1,615.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46262	Y	$1,615.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46270	Y	$1,615.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46275	Y	$1,615.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46280	Y	$1,615.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46285	Y	$1,615.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46288	Y	$1,615.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46320	Y	$1,615.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46500	Y	$951.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46505	Y	$1,615.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46600	Y	$131.69	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
46601	Y	$119.73	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
46604	Y	$623.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46606	Y	$389.25	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46607	Y	$827.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
46608	Y	$623.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46610	Y	$1,538.26	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46611	Y	$623.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
46612	Y	$1,538.26	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46614	Y	$389.25	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46615	Y	$1,538.26	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46700	Y	$1,615.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46705	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
46706	Y	$2,169.21	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
46707	Y	$2,169.21	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
46710	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
46712	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
46715	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
46716	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
46730	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
46735	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
46740	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
46742	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
46744	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
46746	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
46748	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
46750	Y	$2,169.21	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46751	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
46753	Y	$1,615.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46754	Y	$1,615.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46760	Y	$2,169.21	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46761	Y	$2,169.21	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46900	Y	$188.62	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46910	Y	$1,433.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46916	Y	$103.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46917	Y	$1,433.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46922	Y	$1,433.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46924	Y	$1,433.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46930	Y	$361.63	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46940	Y	$1,615.74	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46942	Y	$361.63	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
46945	Y	$951.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46946	Y	$951.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46947	Y	$2,169.21	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
46948	Y	$2,344.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2020
46999	Y	$361.63	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
47000	Y	$651.59	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
47001	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
47010	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47015	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47100	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47120	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
47122	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47125	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47130	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47133	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47135	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47140	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47141	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47142	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47143	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47144	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47145	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47146	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
47147	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
47300	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47350	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47360	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47361	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47362	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47370	Y	$7,409.52	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
47371	Y	$7,409.52	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
47379	Y	$2,565.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
47380	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
47381	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47382	Y	$3,462.09	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
47383	Y	$4,094.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
47399	Y	$310.01	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
47400	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47420	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47425	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47460	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47480	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47490	Y	$2,072.26	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
47531	Y	$351.71	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2016
47532	Y	$2,177.11	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2016
47533	Y	$2,177.11	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
47534	Y	$2,177.11	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
47535	Y	$2,177.11	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
47536	Y	$2,177.11	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
47537	Y	$482.83	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2016
47538	Y	$4,118.23	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
47539	Y	$4,118.23	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
47540	Y	$4,118.23	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
47541	Y	$2,177.11	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
47542	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016
47543	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016
47544	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016
47550	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47552	Y	$2,072.26	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
47553	Y	$2,072.26	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
47554	Y	$2,072.26	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
47555	Y	$2,072.26	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
47556	Y	$2,072.26	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
47562	Y	$3,157.30	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
47563	Y	$3,157.30	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
47564	Y	$3,157.30	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
47570	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47579	Y	$2,565.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
47600	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47605	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47610	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47612	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47620	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47700	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47701	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47711	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47712	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47715	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47720	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47721	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47740	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47741	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47760	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47765	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47780	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47785	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47800	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47801	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47802	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47900	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
47999	Y	$2,072.26	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
48000	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
48001	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
48020	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
48100	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
48102	Y	$651.59	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
48105	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
48120	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
48140	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
48145	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
48146	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
48148	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
48150	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
48152	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
48153	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
48154	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
48155	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
48160	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
48400	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
48500	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
48510	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
48520	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
48540	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
48545	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
48547	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
48548	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
48550	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
48551	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
48552	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
48554	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
48556	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
48999	Y	$310.01	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
49000	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
49002	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
49010	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
49013	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2020
49014	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2020
49020	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
49040	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
49060	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
49062	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
49082	Y	$370.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
49083	Y	$370.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
49084	Y	$370.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
49180	Y	$651.59	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
49185	Y	$941.98	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
49186	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2025
49187	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2025
49188	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2025
49189	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2025
49190	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2025
49203	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
49204	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
49205	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
49215	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
49250	Y	$1,832.47	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
49255	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
49320	Y	$2,565.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
49321	Y	$2,565.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
49322	Y	$2,565.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
49323	Y	$2,565.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
49324	Y	$2,565.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
49325	Y	$2,565.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
49326	Y	$2,565.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
49327	Y	$2,605.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
49329	Y	$2,565.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
49400	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
49402	Y	$1,832.47	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
49405	Y	$1,134.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
49406	Y	$1,134.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
49407	Y	$702.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
49411	Y	$1,038.12	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
49412	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
49418	Y	$2,089.65	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
49419	Y	$2,088.13	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
49421	Y	$2,053.20	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
49422	Y	$1,575.43	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2015
49423	Y	$1,032.01	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
49424	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
49425	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
49426	Y	$1,832.47	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
49427	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
49428	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
49429	Y	$1,575.43	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2015
49435	Y	$1,032.01	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
49436	Y	$1,032.01	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
49440	Y	$589.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
49441	Y	$589.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
49442	Y	$951.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
49446	Y	$589.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
49450	Y	$429.66	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
49451	Y	$429.66	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
49452	Y	$429.66	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
49460	Y	$429.66	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
49465	Y	$150.93	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
49491	Y	$2,154.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
49492	Y	$2,154.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
49495	Y	$2,154.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
49496	Y	$2,154.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
49500	Y	$2,154.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
49501	Y	$2,154.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
49505	Y	$2,154.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
49507	Y	$2,154.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
49520	Y	$2,154.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
49521	Y	$2,154.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
49525	Y	$2,154.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
49540	Y	$2,154.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
49550	Y	$2,154.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
49553	Y	$2,154.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
49555	Y	$2,154.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
49557	Y	$2,154.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
49591	Y	$3,541.93	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2023
49592	Y	$5,212.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2023
49593	Y	$3,541.93	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2023
49594	Y	$5,212.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2023
49595	Y	$3,541.93	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2023
49596	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2023
49600	Y	$2,154.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
49605	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
49606	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
49610	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
49611	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
49613	Y	$3,541.93	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2023
49614	Y	$5,212.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2023
49615	Y	$3,541.93	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2023
49616	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2023
49617	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2023
49618	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2023
49621	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2023
49622	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2023
49623	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2023
49650	Y	$3,157.30	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
49651	Y	$3,157.30	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
49659	Y	$2,565.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
49900	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
49904	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
49905	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
49906	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
49999	Y	$1,832.47	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
50010	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
50020	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
50040	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
50045	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
5005F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
50060	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
50065	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
50070	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
50075	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
50080	Y	$3,146.51	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
50081	Y	$3,146.51	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
50100	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
5010F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
50120	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
50125	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
50130	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
50135	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
5015F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
50200	Y	$651.59	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
50205	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
5020F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
50220	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
50225	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
50230	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
50234	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
50236	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
50240	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
50250	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
50280	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
50290	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
50300	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
50320	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
50323	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
50325	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
50327	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
50328	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
50329	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
50340	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
50360	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
50365	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
50370	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
50380	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
50382	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
50384	Y	$1,226.48	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2015
50385	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
50386	Y	$480.89	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2014
50387	Y	$1,032.01	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
50389	Y	$480.89	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2014
50390	Y	$651.59	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
50391	Y	$73.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
50396	Y	$136.12	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
50400	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
50405	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
50430	Y	$524.48	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2016
50431	Y	$524.48	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2016
50432	Y	$1,506.42	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
50433	Y	$1,506.42	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
50434	Y	$524.48	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
50435	Y	$524.48	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
50436	Y	$1,739.75	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2019
50437	Y	$2,926.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2019
50500	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
5050F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
50520	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
50525	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
50526	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
50540	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
50541	Y	$2,565.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
50542	Y	$7,409.52	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
50543	Y	$3,157.30	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
50544	Y	$2,565.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
50545	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
50546	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
50547	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
50548	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
50549	Y	$2,565.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
50551	Y	$480.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
50553	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
50555	Y	$480.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
50557	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
50561	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
50562	Y	$480.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
50570	Y	$480.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
50572	Y	$480.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
50574	Y	$480.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
50575	Y	$2,440.16	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
50576	Y	$1,148.22	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
50580	Y	$1,148.22	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
50590	Y	$2,788.09	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
50592	Y	$3,462.09	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
50593	Y	$3,462.09	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
50600	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
50605	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
50606	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016
5060F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
50610	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
50620	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
5062F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
50630	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
50650	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
50660	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
50684	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
50686	Y	$73.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
50688	Y	$1,032.01	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
50690	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
50693	Y	$2,243.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
50694	Y	$2,243.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
50695	Y	$2,243.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
50700	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
50705	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016
50706	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016
50715	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
50722	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
50725	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
50727	Y	$1,349.76	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
50728	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
50740	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
50750	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
50760	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
50770	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
50780	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
50782	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
50783	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
50785	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
50800	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
50810	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
50815	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
50820	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
50825	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
50830	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
50840	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
50845	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
50860	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
50900	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
50920	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
50930	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
50940	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
50945	Y	$3,157.30	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
50947	Y	$3,157.30	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
50948	Y	$3,157.30	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
50949	Y	$2,565.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
50951	Y	$480.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
50953	Y	$480.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
50955	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
50957	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
50961	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
50970	Y	$480.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
50972	Y	$480.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
50974	Y	$1,148.22	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
50976	Y	$1,148.22	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
50980	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
5100F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
51020	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
51030	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
51040	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
51045	Y	$480.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
51050	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
51060	Y	$2,440.16	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
51065	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
51080	Y	$1,308.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
51100	Y	$136.12	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
51101	Y	$73.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
51102	Y	$1,349.76	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
51500	Y	$2,154.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
51520	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
51525	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
51530	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
51535	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
51550	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
51555	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
51565	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
51570	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
51575	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
51580	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
51585	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
51590	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
51595	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
51596	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
51597	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
51600	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
51605	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
51610	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
51700	Y	$136.12	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
51701	Y	$131.69	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
51702	Y	$131.69	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
51703	Y	$73.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
51705	Y	$136.12	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
51710	Y	$429.66	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
51715	Y	$2,115.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
51720	Y	$203.66	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
51721	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2025
51725	Y	$203.66	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
51726	Y	$203.66	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
51727	Y	$203.66	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
51728	Y	$203.66	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
51729	Y	$203.66	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
51736	Y	$131.69	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
51741	Y	$73.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
51784	Y	$73.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
51785	Y	$136.12	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
51792	Y	$73.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
51797	Y	$136.12	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
51798	Y	$52.35	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
51800	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
51820	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
51840	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
51841	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
51845	Y	$3,032.56	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
51860	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
51865	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
51880	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
51900	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
51920	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
51925	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
51940	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
51960	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
51980	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
51990	Y	$3,157.30	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
51992	Y	$3,157.30	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
51999	Y	$2,565.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
52000	Y	$480.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
52001	Y	$1,148.22	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
52005	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
52007	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
5200F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
52010	Y	$480.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
52204	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
52214	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
52224	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
52234	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
52235	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
52240	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
52250	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
52260	Y	$1,148.22	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
52265	Y	$480.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
52270	Y	$1,148.22	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
52275	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
52276	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
52277	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
52281	Y	$1,148.22	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
52282	Y	$2,440.16	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
52283	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
52284	Y	$4,930.08	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2024
52285	Y	$1,148.22	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
52287	Y	$1,069.30	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
52290	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
52300	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
52301	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
52305	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
52310	Y	$1,148.22	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
52315	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
52317	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
52318	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
52320	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
52325	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
52327	Y	$2,440.16	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
52330	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
52332	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
52334	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
52341	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
52342	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
52343	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
52344	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
52345	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
52346	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
52351	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
52352	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
52353	Y	$2,440.16	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
52354	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
52355	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
52356	Y	$3,064.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
52400	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
52402	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
52441	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2015
52442	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2016
52450	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
52500	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
5250F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2012
52601	Y	$2,440.16	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
52630	Y	$2,440.16	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
52640	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
52647	Y	$3,146.51	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
52648	Y	$3,146.51	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
52649	Y	$3,146.51	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
52700	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
53000	Y	$1,370.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
53010	Y	$1,370.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
53020	Y	$1,370.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
53025	Y	$1,370.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
53040	Y	$1,370.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
53060	Y	$1,370.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
53080	Y	$1,370.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
53085	Y	$1,370.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
53200	Y	$1,370.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
53210	Y	$2,115.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
53215	Y	$1,370.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
53220	Y	$2,115.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
53230	Y	$2,115.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
53235	Y	$1,370.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
53240	Y	$2,115.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
53250	Y	$1,370.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
53260	Y	$1,370.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
53265	Y	$1,370.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
53270	Y	$1,370.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
53275	Y	$1,370.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
53400	Y	$2,115.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
53405	Y	$2,115.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
53410	Y	$2,115.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
53415	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
53420	Y	$2,115.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
53425	Y	$2,115.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
53430	Y	$2,115.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
53431	Y	$2,115.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
53440	Y	$6,611.63	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
53442	Y	$2,115.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
53444	Y	$6,611.63	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
53445	Y	$11,076.15	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
53446	Y	$2,508.59	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2015
53447	Y	$11,076.15	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
53448	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
53449	Y	$2,115.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
53450	Y	$2,115.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
53451	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2022
53452	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2022
53453	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2022
53454	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2022
53460	Y	$1,370.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
53500	Y	$2,115.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
53502	Y	$1,370.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
53505	Y	$2,115.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
53510	Y	$1,370.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
53515	Y	$2,115.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
53520	Y	$2,115.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
53600	Y	$203.66	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
53601	Y	$73.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
53605	Y	$1,148.22	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
53620	Y	$1,349.76	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
53621	Y	$136.12	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
53660	Y	$73.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
53661	Y	$73.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
53665	Y	$1,370.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
53850	Y	$3,146.51	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
53852	Y	$3,146.51	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
53854	Y	$1,739.75	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2019
53855	Y	$136.12	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
53860	Y	$1,354.09	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2011
53865	Y	$9,247.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2025
53866	Y	$243.21	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2025
53899	Y	$73.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54000	Y	$1,370.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54001	Y	$1,370.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54015	Y	$1,308.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54050	Y	$59.24	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54055	Y	$1,433.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54056	Y	$98.46	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
54057	Y	$1,433.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54060	Y	$1,433.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54065	Y	$1,433.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54100	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
54105	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54110	Y	$2,351.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54111	Y	$2,351.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54112	Y	$2,351.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54115	Y	$1,308.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54120	Y	$2,351.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
54125	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
54130	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
54135	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
54150	Y	$1,569.47	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54160	Y	$1,569.47	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54161	Y	$1,569.47	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54162	Y	$1,569.47	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54163	Y	$1,569.47	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54164	Y	$1,569.47	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54200	Y	$136.12	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54205	Y	$2,351.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54220	Y	$136.12	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54230	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
54231	Y	$1,349.76	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54235	Y	$136.12	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54240	Y	$73.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54250	Y	$136.12	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54300	Y	$2,351.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54304	Y	$2,351.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54308	Y	$2,351.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54312	Y	$2,351.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54316	Y	$2,351.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54318	Y	$2,351.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54322	Y	$2,351.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54324	Y	$2,351.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54326	Y	$2,351.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54328	Y	$2,351.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54332	Y	$2,351.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54336	Y	$2,351.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54340	Y	$2,351.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54344	Y	$2,351.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54348	Y	$2,351.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54352	Y	$2,351.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
54360	Y	$2,351.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54380	Y	$2,351.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54385	Y	$2,351.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54390	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
54400	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
54401	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
54405	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
54406	Y	$2,334.32	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2015
54408	Y	$2,351.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54410	Y	$11,076.15	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
54411	Y	$19,219.50	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2023
54415	Y	$2,334.32	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2015
54416	Y	$11,076.15	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
54417	Y	$12,230.83	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2023
54420	Y	$2,351.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54430	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
54435	Y	$2,351.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54437	Y	$1,506.42	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
54438	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2016
54440	Y	$2,351.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54450	Y	$203.66	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54500	Y	$1,044.81	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
54505	Y	$1,569.47	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54512	Y	$1,569.47	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
54520	Y	$1,569.47	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54522	Y	$1,569.47	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
54530	Y	$2,154.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
54535	Y	$2,351.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54550	Y	$2,154.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54560	Y	$1,569.47	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54600	Y	$1,569.47	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
54620	Y	$1,569.47	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54640	Y	$2,154.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
54650	Y	$2,217.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
54660	Y	$1,569.47	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54670	Y	$1,569.47	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
54680	Y	$1,569.47	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54690	Y	$3,157.30	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
54692	Y	$4,917.82	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
54699	Y	$2,565.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
54700	Y	$1,569.47	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
54800	Y	$310.01	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
54830	Y	$1,569.47	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
54840	Y	$1,569.47	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
54860	Y	$1,569.47	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54861	Y	$1,569.47	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54865	Y	$1,569.47	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54900	Y	$1,569.47	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
54901	Y	$1,569.47	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
55000	Y	$310.01	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
55040	Y	$2,154.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
55041	Y	$2,154.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
55060	Y	$1,569.47	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
55100	Y	$850.78	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
55110	Y	$1,569.47	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
55120	Y	$1,569.47	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
55150	Y	$1,569.47	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
55175	Y	$1,569.47	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
55180	Y	$1,569.47	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
55200	Y	$1,569.47	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
55250	Y	$1,569.47	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
55300	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
55400	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
55500	Y	$1,569.47	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
55520	Y	$1,569.47	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
55530	Y	$1,569.47	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
55535	Y	$2,154.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
55540	Y	$2,154.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
55550	Y	$3,157.30	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
55559	Y	$2,565.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
55600	Y	$1,569.47	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
55605	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
55650	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
55680	Y	$1,569.47	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
55700	Y	$837.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
55705	Y	$837.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
55706	Y	$837.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
55720	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
55725	Y	$1,720.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
55801	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
55810	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
55812	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
55815	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
55821	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
55831	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
55840	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
55842	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
55845	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
55860	Y	$1,349.76	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
55862	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
55865	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
55866	Y	$7,367.56	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2018
55867	Y	$9,087.30	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2023
55870	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
55873	Y	$7,675.02	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
55874	Y	$3,705.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2018
55875	Y	$2,440.16	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
55876	Y	$1,038.12	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
55880	Y	$4,413.90	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2021

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
55881	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2025
55882	Y	$12,992.42	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2025
55899	Y	$73.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
55920	Y	$1,832.47	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
55970	Y	$4,739.10	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		10/1/2024
55980	Y	$3,321.58	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		10/1/2024
56405	Y	$102.98	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
56420	Y	$102.98	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
56440	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
56441	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
56442	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
56501	Y	$1,433.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
56515	Y	$1,433.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
56605	Y	$229.75	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
56606	Y	$102.98	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
56620	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
56625	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
56630	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
56631	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
56632	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
56633	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
56634	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
56637	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
56640	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
56700	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
56740	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
56800	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
56805	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
56810	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
56820	Y	$102.98	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
56821	Y	$102.98	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57000	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57010	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
57020	Y	$458.02	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57022	Y	$850.78	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
57023	Y	$1,308.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
57061	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57065	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57100	Y	$458.02	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57105	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57106	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57107	Y	$2,377.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57109	Y	$2,377.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57110	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
57111	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
57120	Y	$2,377.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57130	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57135	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57150	Y	$102.98	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57155	Y	$458.02	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57156	Y	$244.04	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
57160	Y	$102.98	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57170	Y	$8.90	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57180	Y	$102.98	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57200	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57210	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57220	Y	$3,032.56	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57230	Y	$2,377.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57240	Y	$2,377.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57250	Y	$2,377.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57260	Y	$2,377.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57265	Y	$3,032.56	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57267	Y	$2,377.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
57268	Y	$2,377.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57270	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
57280	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
57282	Y	$3,032.56	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57283	Y	$3,032.56	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57284	Y	$3,032.56	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57285	Y	$3,032.56	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57287	Y	$1,845.47	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2015
57288	Y	$3,032.56	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57289	Y	$2,377.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57291	Y	$2,377.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57292	Y	$2,377.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57295	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57296	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
57300	Y	$2,377.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57305	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
57307	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
57308	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
57310	Y	$3,032.56	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57311	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
57320	Y	$2,377.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57330	Y	$2,377.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57335	Y	$2,377.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57400	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57410	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57415	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57420	Y	$229.75	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57421	Y	$229.75	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57423	Y	$3,032.56	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57425	Y	$2,565.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57426	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
57452	Y	$102.98	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57454	Y	$229.75	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57455	Y	$229.75	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57456	Y	$229.75	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57460	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
57461	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57465	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2021
57500	Y	$458.02	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57505	Y	$458.02	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57510	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57511	Y	$102.98	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57513	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57520	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57522	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57530	Y	$2,377.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57531	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
57540	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
57545	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
57550	Y	$2,377.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57555	Y	$2,377.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57556	Y	$3,032.56	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57558	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57700	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57720	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
57800	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58100	Y	$102.98	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58110	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
58120	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58140	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
58145	Y	$2,377.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58146	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
58150	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
58152	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
58180	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
58200	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
58210	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
58240	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
58260	Y	$2,377.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
58262	Y	$2,377.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58263	Y	$2,377.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58267	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
58270	Y	$2,377.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58275	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
58280	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
58285	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
58290	Y	$3,032.56	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58291	Y	$3,032.56	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58292	Y	$3,032.56	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58294	Y	$3,032.56	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58300	Y	$259.51	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2020
58301	Y	$452.14	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2020
58321	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
58322	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
58323	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
58340	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
58345	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
58346	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58350	Y	$2,377.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
58353	Y	$2,377.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58356	Y	$3,032.56	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58400	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
58410	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
58520	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
58540	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
58541	Y	$4,917.82	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58542	Y	$4,917.82	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58543	Y	$4,917.82	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58544	Y	$4,917.82	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58545	Y	$2,565.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58546	Y	$3,157.30	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58548	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
58550	Y	$4,917.82	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58552	Y	$3,157.30	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58553	Y	$3,157.30	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58554	Y	$3,157.30	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58555	Y	$1,522.88	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58558	Y	$1,522.88	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58559	Y	$1,522.88	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58560	Y	$2,508.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58561	Y	$2,508.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58562	Y	$1,522.88	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58563	Y	$2,508.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58565	Y	$3,032.56	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58570	Y	$3,157.30	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58571	Y	$3,157.30	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58572	Y	$3,157.30	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58573	Y	$3,157.30	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58575	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2022
58578	Y	$2,565.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
58579	Y	$1,522.88	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
58580	Y	$7,199.80	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2024
58600	Y	$2,377.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58605	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
58611	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
58615	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58660	Y	$3,157.30	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58661	Y	$3,157.30	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58662	Y	$3,157.30	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58670	Y	$3,157.30	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58671	Y	$3,157.30	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58672	Y	$3,157.30	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58673	Y	$3,157.30	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58674	Y	$6,966.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2017
58679	Y	$2,565.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
58700	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
58720	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
58740	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
58750	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2015
58752	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2015
58760	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
58770	Y	$2,377.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
58800	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58805	Y	$2,377.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58820	Y	$2,377.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
58822	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
58825	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
58900	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58920	Y	$2,377.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58925	Y	$2,377.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
58940	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
58943	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
58950	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
58951	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
58952	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
58953	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
58954	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
58956	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
58957	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
58958	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
58960	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
58970	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
58974	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
58976	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
58999	Y	$8.90	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
59000	Y	$229.75	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
59001	Y	$458.02	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
59012	Y	$229.75	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
59015	Y	$229.75	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
59020	Y	$102.98	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
59025	Y	$102.98	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
59030	Y	$229.75	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
59050	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
59051	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
59070	Y	$102.98	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
59072	Y	$229.75	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
59074	Y	$229.75	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
59076	Y	$229.75	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
59100	Y	$2,377.18	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
59120	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
59121	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
59130	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
59136	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
59140	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
59150	Y	$3,157.30	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
59151	Y	$3,157.30	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
59160	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
59200	Y	$102.98	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
59300	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
59320	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
59325	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
59350	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
59400	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
59409	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
59410	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
59412	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
59414	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
59425	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
59426	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
59430	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
59510	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
59514	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
59515	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
59525	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
59610	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
59612	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
59614	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
59618	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
59620	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
59622	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
59812	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
59820	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
59821	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
59830	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
59840	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
59841	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
59850	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
59851	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
59852	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
59855	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
59856	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
59857	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
59866	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
59870	Y	$1,351.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
59871	Y	$1,845.47	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2015
59897	Y	$8.90	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
59898	Y	$2,565.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
59899	Y	$8.90	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
60000	Y	$513.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
6005F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
60100	Y	$310.01	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
6010F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
6015F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
60200	Y	$3,286.45	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
6020F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
60210	Y	$3,286.45	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
60212	Y	$3,286.45	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
60220	Y	$3,286.45	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
60225	Y	$3,286.45	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
60240	Y	$3,286.45	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
60252	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
60254	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
60260	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
60270	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
60271	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
60280	Y	$3,286.45	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
60281	Y	$3,286.45	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
60300	Y	$310.01	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
6030F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
6040F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
6045F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
60500	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
60502	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
60505	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
60512	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
60520	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
60521	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
60522	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
60540	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
60545	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
60600	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
60605	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
60650	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
60659	Y	$2,565.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
60660	Y	$1,620.24	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2025
60661	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2025
60699	Y	$3,286.45	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
6070F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
6080F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
6090F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
61000	Y	$485.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
61001	Y	$485.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
6100F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2012
6101F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
61020	Y	$485.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
61026	Y	$485.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
6102F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
61050	Y	$485.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
61055	Y	$485.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
61070	Y	$429.66	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
61105	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
61107	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
61108	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
6110F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
61120	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61140	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
61150	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
61151	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
61154	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
61156	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
61210	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61215	Y	$2,765.59	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
61250	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61253	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61304	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61305	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61312	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61313	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61314	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61315	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
61316	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61320	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61321	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
61322	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61323	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61330	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
61333	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
61340	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
61343	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61345	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61450	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61458	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61460	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61500	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
61501	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
6150F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
61510	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
61512	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
61514	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61516	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
61517	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61518	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
61519	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
61520	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61521	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61522	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
61524	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61526	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61530	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61531	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
61533	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61534	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61535	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
61536	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61537	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61538	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61539	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61540	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61541	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61543	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61544	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
61545	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61546	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61548	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61550	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61552	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61556	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61557	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61558	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61559	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61563	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61564	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
61566	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61567	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61570	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
61571	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
61575	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61576	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61580	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61581	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61582	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61583	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61584	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61585	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61586	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61590	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
61591	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61592	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61595	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61596	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61597	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61598	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61600	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61601	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61605	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61606	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61607	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61608	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61611	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61613	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61615	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61616	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61618	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61619	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61623	Y	$6,290.62	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
61624	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61626	Y	$6,290.62	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
61630	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
61635	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61640	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
61641	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
61642	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
61645	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2016
61650	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2016
61651	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2016
61680	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61682	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61684	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61686	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
61690	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61692	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61697	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
61698	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
61700	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
61702	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
61703	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61705	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61708	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
61710	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
61711	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61715	Y	$12,470.31	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2025
61720	Y	$2,512.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
61735	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
61736	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2022
61737	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2022
61750	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61751	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
61760	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61770	Y	$2,512.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
61781	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
61782	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
61783	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
61790	Y	$1,261.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
61791	Y	$892.72	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
61796	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
61797	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2015
61798	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
61799	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2015
61800	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
61850	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61860	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61863	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
61864	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61867	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
61868	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
61880	Y	$2,127.98	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2015
61885	Y	$13,892.45	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
61886	Y	$18,519.10	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
61888	Y	$1,932.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
61889	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2024
61891	Y	$20,842.84	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2024
61892	Y	$3,084.03	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2024
62000	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
62005	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
62010	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
62100	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
62115	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
62117	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
62120	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
62121	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
62140	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
62141	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
62142	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
62143	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
62145	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
62146	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
62147	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
62148	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
62160	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
62161	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
62162	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
62164	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
62165	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
62180	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
62190	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
62192	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
62194	Y	$485.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
62200	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
62201	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
62220	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
62223	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
62225	Y	$1,032.01	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
62230	Y	$2,765.59	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
62252	Y	$171.25	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
62256	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
62258	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
62263	Y	$485.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
62264	Y	$892.72	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
62267	Y	$310.01	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
62268	Y	$485.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
62269	Y	$651.59	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
62270	Y	$250.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
62272	Y	$250.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
62273	Y	$250.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
62280	Y	$485.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
62281	Y	$485.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
62282	Y	$485.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
62284	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
62287	Y	$2,512.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
62290	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
62291	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
62292	Y	$485.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
62294	Y	$485.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
62302	Y	$614.04	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2015
62303	Y	$614.04	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2015
62304	Y	$614.04	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2015
62305	Y	$614.04	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2015
62320	Y	$506.98	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2017

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
62321	Y	$506.98	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2017
62322	Y	$506.98	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2017
62323	Y	$506.98	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2017
62324	Y	$638.66	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2017
62325	Y	$638.66	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2017
62326	Y	$638.66	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2017
62327	Y	$638.66	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2017
62328	Y	$625.05	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2020
62329	Y	$625.05	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2020
62350	Y	$2,765.59	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
62351	Y	$3,318.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
62355	Y	$1,469.46	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2015
62360	Y	$2,765.59	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
62361	Y	$13,390.69	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
62362	Y	$13,390.69	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
62365	Y	$2,946.39	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2015
62367	Y	$171.25	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
62368	Y	$171.25	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
62369	Y	$161.13	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
62370	Y	$161.13	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
62380	Y	$5,219.36	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2017
63001	Y	$3,318.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
63003	Y	$3,318.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
63005	Y	$3,318.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
63011	Y	$3,318.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
63012	Y	$3,318.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
63015	Y	$3,318.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
63016	Y	$3,318.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
63017	Y	$3,318.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
63020	Y	$3,318.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
63030	Y	$3,318.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
63035	Y	$3,318.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
63040	Y	$3,318.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
63042	Y	$3,318.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
63043	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
63044	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63045	Y	$3,318.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
63046	Y	$3,318.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
63047	Y	$3,318.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
63048	Y	$3,318.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
63050	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63051	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63052	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2022
63053	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2022
63055	Y	$3,318.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
63056	Y	$3,318.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
63057	Y	$3,318.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
63064	Y	$3,318.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
63066	Y	$3,318.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
63075	Y	$3,318.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
63076	Y	$3,318.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
63077	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63078	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
63081	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63082	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63085	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63086	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
63087	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63088	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
63090	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63091	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
63101	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63102	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63103	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
63170	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63172	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
63173	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63185	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63190	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63191	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
63197	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63200	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63250	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63251	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63252	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63265	Y	$5,981.95	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2020
63266	Y	$5,981.95	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2020
63267	Y	$5,981.95	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2020
63268	Y	$5,981.95	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2020
63270	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63271	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63272	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63273	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63275	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63276	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63277	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63278	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63280	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63281	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63282	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63283	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63285	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63286	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63287	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63290	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63295	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63300	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63301	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63302	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
63303	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63304	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63305	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63306	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63307	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63308	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
63600	Y	$1,261.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
63610	Y	$1,261.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
63620	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
63621	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
63650	Y	$4,429.21	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
63655	Y	$5,831.77	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
63661	Y	$1,383.53	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2015
63662	Y	$2,127.98	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2015
63663	Y	$4,294.13	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
63664	Y	$4,294.13	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
63685	Y	$13,892.45	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
63688	Y	$2,127.98	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2015
63700	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63702	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63704	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63706	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63707	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63709	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63710	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63740	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
63741	Y	$2,765.59	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
63744	Y	$2,765.59	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
63746	Y	$1,469.46	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2015
64400	Y	$172.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
64405	Y	$250.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
64408	Y	$485.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64415	Y	$250.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
64416	Y	$485.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64417	Y	$250.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64418	Y	$250.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64420	Y	$250.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
64421	Y	$485.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
64425	Y	$250.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64430	Y	$485.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64435	Y	$250.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64445	Y	$485.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
64446	Y	$485.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64447	Y	$250.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64448	Y	$485.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64449	Y	$485.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64450	Y	$250.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
64451	Y	$625.05	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2020
64454	Y	$625.05	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2020
64455	Y	$172.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64461	Y	$585.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
64462	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016
64463	Y	$585.17	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
64466	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2025
64467	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2025
64468	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2025
64469	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2025
64473	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2025
64474	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2025
64479	Y	$485.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
64480	Y	$250.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
64483	Y	$485.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
64484	Y	$250.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
64486	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
64487	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
64488	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
64489	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
64490	Y	$485.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64491	Y	$172.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
64492	Y	$172.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
64493	Y	$485.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64494	Y	$172.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
64495	Y	$172.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
64505	Y	$172.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64510	Y	$485.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64517	Y	$485.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
64520	Y	$485.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64530	Y	$485.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64553	Y	$4,429.21	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
64555	Y	$4,429.21	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
64561	Y	$4,429.21	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
64566	Y	$179.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64568	Y	$22,317.71	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
64569	Y	$4,158.72	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
64570	Y	$2,512.54	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2014
64575	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
64580	Y	$5,831.77	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
64581	Y	$5,831.77	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
64582	Y	$30,063.48	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2022
64583	Y	$11,483.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2022
64584	Y	$5,823.95	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2022
64585	Y	$2,127.98	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2015
64590	Y	$13,892.45	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
64595	Y	$2,127.98	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2015
64596	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
64597	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2024
64598	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
64600	Y	$892.72	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
64605	Y	$1,261.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
64610	Y	$1,261.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64611	Y	$179.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64612	Y	$172.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64615	Y	$172.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64616	Y	$187.56	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64617	Y	$328.33	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64620	Y	$485.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
64624	Y	$1,719.35	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2020
64625	Y	$1,719.35	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2020
64628	Y	$12,593.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2022
64629	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2022
64630	Y	$485.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
64632	Y	$172.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64633	Y	$503.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64634	Y	$175.92	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64635	Y	$868.69	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64636	Y	$503.37	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64640	Y	$485.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
64642	Y	$328.33	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64643	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
64644	Y	$328.33	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64645	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
64646	Y	$328.33	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64647	Y	$328.33	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64650	Y	$172.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
64653	Y	$172.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
64680	Y	$485.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
64681	Y	$892.72	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
64702	Y	$1,261.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
64704	Y	$1,261.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
64708	Y	$1,261.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
64712	Y	$1,261.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64713	Y	$1,261.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
64714	Y	$1,261.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64716	Y	$1,261.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
64718	Y	$1,261.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64719	Y	$1,261.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64721	Y	$1,261.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64722	Y	$1,261.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
64726	Y	$1,261.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
64727	Y	$1,261.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
64732	Y	$1,261.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64734	Y	$1,261.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64736	Y	$1,261.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64738	Y	$1,261.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64740	Y	$1,261.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64742	Y	$1,261.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64744	Y	$1,261.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64746	Y	$1,261.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64755	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
64760	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
64763	Y	$1,261.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
64766	Y	$2,512.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
64771	Y	$1,261.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
64772	Y	$1,261.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
64774	Y	$1,261.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
64776	Y	$1,261.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
64778	Y	$1,261.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
64782	Y	$1,261.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
64783	Y	$1,261.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64784	Y	$1,261.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
64786	Y	$2,512.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64787	Y	$1,261.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
64788	Y	$1,261.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
64790	Y	$1,261.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
64792	Y	$2,512.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
64795	Y	$1,261.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
64802	Y	$1,261.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
64804	Y	$1,261.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
64809	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
64818	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
64820	Y	$1,261.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
64821	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64822	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64823	Y	$1,903.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64831	Y	$2,512.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64832	Y	$2,512.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
64834	Y	$2,512.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64835	Y	$2,512.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64836	Y	$2,512.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64837	Y	$2,512.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
64840	Y	$2,512.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64856	Y	$2,512.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
64857	Y	$2,512.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
64858	Y	$2,512.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64859	Y	$2,512.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64861	Y	$2,512.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64862	Y	$2,512.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64864	Y	$2,512.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
64865	Y	$2,512.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
64866	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
64868	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
64872	Y	$2,512.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
64874	Y	$2,512.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64876	Y	$2,512.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64885	Y	$2,512.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
64886	Y	$2,512.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
64890	Y	$2,512.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64891	Y	$2,512.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
64892	Y	$2,512.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
64893	Y	$2,512.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
64895	Y	$2,512.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
64896	Y	$2,512.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
64897	Y	$2,512.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
64898	Y	$2,512.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
64901	Y	$2,512.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
64902	Y	$2,512.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
64905	Y	$2,512.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
64907	Y	$2,512.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
64910	Y	$2,512.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
64911	Y	$2,512.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
64912	Y	$4,627.27	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2018
64913	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2018
64999	Y	$172.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
65091	Y	$2,629.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65093	Y	$2,629.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65101	Y	$2,629.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65103	Y	$2,629.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65105	Y	$2,629.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65110	Y	$2,629.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65112	Y	$2,629.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65114	Y	$2,629.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65125	Y	$1,809.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65130	Y	$1,809.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65135	Y	$1,809.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65140	Y	$2,629.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65150	Y	$1,809.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65155	Y	$2,629.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65175	Y	$1,534.07	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
65205	Y	$100.81	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
65210	Y	$100.81	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
65220	Y	$100.81	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
65222	Y	$100.81	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
65235	Y	$1,095.25	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65260	Y	$1,745.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
65265	Y	$1,396.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65270	Y	$1,223.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65272	Y	$1,644.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65273	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
65275	Y	$1,644.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65280	Y	$1,396.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65285	Y	$2,693.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65286	Y	$303.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65290	Y	$1,581.98	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65400	Y	$1,095.25	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65410	Y	$1,095.25	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65420	Y	$1,095.25	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65426	Y	$1,644.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65430	Y	$100.81	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
65435	Y	$515.12	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65436	Y	$1,095.25	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65450	Y	$298.24	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
65600	Y	$1,223.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65710	Y	$2,530.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65730	Y	$2,530.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65750	Y	$2,530.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65755	Y	$2,530.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65756	Y	$2,530.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65757	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
65760	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
65765	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
65767	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
65770	Y	$6,809.09	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65771	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
65772	Y	$1,095.25	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
65775	Y	$1,095.25	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65778	Y	$1,118.30	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2014
65779	Y	$1,067.58	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2014
65780	Y	$2,530.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65781	Y	$2,530.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65782	Y	$2,530.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65785	Y	$3,380.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
65800	Y	$1,745.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
65810	Y	$1,644.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65815	Y	$1,644.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65820	Y	$303.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65850	Y	$1,644.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65855	Y	$357.35	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65860	Y	$357.35	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65865	Y	$1,095.25	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65870	Y	$1,644.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65875	Y	$1,644.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65880	Y	$1,095.25	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65900	Y	$1,095.25	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
65920	Y	$1,751.93	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
65930	Y	$1,644.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
66020	Y	$1,095.25	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
66030	Y	$303.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
66130	Y	$1,644.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
66150	Y	$1,644.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
66155	Y	$1,644.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
66160	Y	$1,644.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
66170	Y	$1,644.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
66172	Y	$1,644.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
66174	Y	$2,914.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
66175	Y	$2,914.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
66179	Y	$3,121.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
66180	Y	$2,823.23	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
66183	Y	$2,817.27	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
66184	Y	$1,751.93	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
66185	Y	$1,644.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
66225	Y	$2,823.23	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
66250	Y	$1,095.25	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
66500	Y	$1,745.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
66505	Y	$303.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
66600	Y	$1,644.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
66605	Y	$1,644.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
66625	Y	$1,095.25	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
66630	Y	$1,644.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
66635	Y	$1,644.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
66680	Y	$1,644.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
66682	Y	$1,644.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
66683	Y	$16,416.44	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2025
66700	Y	$1,095.25	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
66710	Y	$1,095.25	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
66711	Y	$1,095.25	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
66720	Y	$1,095.25	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
66740	Y	$1,644.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
66761	Y	$357.35	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
66762	Y	$357.35	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
66770	Y	$357.35	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
66820	Y	$1,745.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
66821	Y	$357.35	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
66825	Y	$1,644.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
66830	Y	$303.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
66840	Y	$1,065.59	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
66850	Y	$2,044.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
66852	Y	$2,044.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
66920	Y	$2,044.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
66930	Y	$2,044.38	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
66940	Y	$1,065.59	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
66982	Y	$1,637.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
66983	Y	$1,637.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
66984	Y	$1,637.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
66985	Y	$1,637.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
66986	Y	$1,637.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
66987	Y	$3,818.33	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2020
66988	Y	$3,818.33	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2020
66989	Y	$4,250.50	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2022
66990	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
66991	Y	$4,250.50	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2022
66999	Y	$303.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
67005	Y	$1,396.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67010	Y	$2,693.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67015	Y	$2,693.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67025	Y	$1,396.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67027	Y	$2,693.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67028	Y	$314.29	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
67030	Y	$1,396.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67031	Y	$357.35	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67036	Y	$2,693.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67039	Y	$2,693.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67040	Y	$2,693.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67041	Y	$2,693.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67042	Y	$2,693.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67043	Y	$2,693.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67101	Y	$1,396.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67105	Y	$357.35	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67107	Y	$2,693.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67108	Y	$2,693.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67110	Y	$1,396.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67113	Y	$2,693.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67115	Y	$1,396.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67120	Y	$1,751.93	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
67121	Y	$1,745.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
67141	Y	$394.31	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67145	Y	$357.35	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67208	Y	$394.31	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67210	Y	$357.35	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67218	Y	$1,396.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67220	Y	$394.31	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67221	Y	$394.31	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
67225	Y	$394.31	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67227	Y	$1,396.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67228	Y	$357.35	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67229	Y	$357.35	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
67250	Y	$1,223.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67255	Y	$1,396.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67299	Y	$394.31	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
67311	Y	$1,581.98	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67312	Y	$1,581.98	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67314	Y	$1,581.98	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67316	Y	$1,581.98	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67318	Y	$1,581.98	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67320	Y	$1,581.98	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67331	Y	$1,581.98	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
67332	Y	$1,581.98	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
67334	Y	$1,581.98	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
67335	Y	$1,581.98	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
67340	Y	$1,581.98	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67343	Y	$1,581.98	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67345	Y	$217.50	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67346	Y	$1,047.54	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
67399	Y	$1,581.98	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67400	Y	$1,223.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67405	Y	$1,809.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67412	Y	$1,223.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
67413	Y	$1,809.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67414	Y	$2,629.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67415	Y	$1,223.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67420	Y	$2,629.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67430	Y	$2,629.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67440	Y	$2,629.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67445	Y	$2,629.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67450	Y	$2,629.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67500	Y	$298.24	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
67505	Y	$217.50	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67515	Y	$217.50	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67516	Y	$322.68	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2024
67550	Y	$2,629.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67560	Y	$1,809.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67570	Y	$2,629.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67599	Y	$217.50	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
67700	Y	$217.50	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
67710	Y	$515.12	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67715	Y	$1,223.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67800	Y	$217.50	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
67801	Y	$515.12	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
67805	Y	$217.50	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
67808	Y	$1,223.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
67810	Y	$217.50	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
67820	Y	$100.81	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
67825	Y	$217.50	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67830	Y	$515.12	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
67835	Y	$1,223.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67840	Y	$515.12	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
67850	Y	$515.12	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
67875	Y	$515.12	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67880	Y	$1,095.25	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67882	Y	$1,223.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
67900	Y	$1,809.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67901	Y	$1,223.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67902	Y	$1,809.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67903	Y	$1,223.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67904	Y	$1,223.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67906	Y	$1,223.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67908	Y	$1,223.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67909	Y	$1,223.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67911	Y	$1,223.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
67912	Y	$1,223.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67914	Y	$1,223.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67915	Y	$1,223.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67916	Y	$1,223.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67917	Y	$1,223.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67921	Y	$1,223.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67922	Y	$1,223.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67923	Y	$1,223.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67924	Y	$1,223.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67930	Y	$1,223.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
67935	Y	$1,223.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
67938	Y	$298.24	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
67950	Y	$1,223.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
67961	Y	$1,223.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
67966	Y	$1,223.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
67971	Y	$1,223.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67973	Y	$1,809.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67974	Y	$1,223.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67975	Y	$1,223.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
67999	Y	$217.50	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
68020	Y	$217.50	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
68040	Y	$298.24	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
68100	Y	$303.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
68110	Y	$1,047.54	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
68115	Y	$1,223.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
68130	Y	$1,095.25	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
68135	Y	$515.12	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
68200	Y	$100.81	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
68320	Y	$1,809.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
68325	Y	$1,809.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
68326	Y	$1,223.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
68328	Y	$1,809.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
68330	Y	$1,644.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
68335	Y	$1,809.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
68340	Y	$1,223.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
68360	Y	$1,644.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
68362	Y	$1,644.85	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
68371	Y	$1,095.25	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
68399	Y	$217.50	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
68400	Y	$217.50	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
68420	Y	$1,223.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
68440	Y	$217.50	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
68500	Y	$1,809.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
68505	Y	$1,809.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
68510	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2014
68520	Y	$1,809.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
68525	Y	$1,223.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
68530	Y	$217.50	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
68540	Y	$1,223.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
68550	Y	$1,809.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
68700	Y	$1,223.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
68705	Y	$217.50	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
68720	Y	$1,809.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
68745	Y	$1,809.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
68750	Y	$1,809.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
68760	Y	$217.50	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
68761	Y	$217.50	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
68770	Y	$1,809.15	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
68801	Y	$100.81	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
68810	Y	$217.50	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
68811	Y	$1,223.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
68815	Y	$1,223.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
68816	Y	$1,223.96	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
68840	Y	$298.24	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
68841	Y	$325.64	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2022
68850	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
68899	Y	$217.50	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
69000	Y	$98.12	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
69005	Y	$1,308.10	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
69020	Y	$98.12	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
69090	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
69100	Y	$230.87	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
69105	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
69110	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
69120	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
69140	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
69145	Y	$1,179.44	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
69150	Y	$513.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
69155	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
69200	Y	$131.69	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
69205	Y	$1,576.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
69209	Y	$55.94	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016
69210	Y	$52.35	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
69220	Y	$98.46	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
69222	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
69300	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
69310	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
69320	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
69399	Y	$77.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
69420	Y	$230.87	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
69421	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
69424	Y	$1,266.36	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2015
69433	Y	$513.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
69436	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
69440	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
69450	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
69501	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
69502	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
69505	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
69511	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
69530	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
69535	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
69540	Y	$1,158.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
69550	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
69552	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
69554	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
69601	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
69602	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
69603	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
69604	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
69610	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
69620	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
69631	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
69632	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
69633	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
69635	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
69636	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
69637	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
69641	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
69642	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
69643	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
69644	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
69645	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
69646	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
69650	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
69660	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
69661	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
69662	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
69666	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
69667	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
69670	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
69676	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
69700	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
69705	Y	$5,086.05	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2021
69706	Y	$5,086.05	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2021
69710	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
69711	Y	$2,897.29	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2014
69714	Y	$8,005.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
69716	Y	$12,593.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2022
69717	Y	$8,005.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
69719	Y	$12,593.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2022
69720	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
69725	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
69726	Y	$2,892.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2022
69727	Y	$2,892.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2022
69728	Y	$2,976.66	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2023
69729	Y	$13,048.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2023
69730	Y	$13,048.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2023
69740	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
69745	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
69799	Y	$77.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
69801	Y	$1,682.70	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
69805	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
69806	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
69905	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
69910	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
69915	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
69930	Y	$28,906.14	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
69949	Y	$77.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
69950	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
69955	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
69960	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
69970	Y	$2,897.29	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
69979	Y	$77.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
69990	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
70010	Y	$487.08	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
70015	Y	$487.08	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
70030	Y	$59.34	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
70100	Y	$59.34	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016
7010F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
70110	Y	$94.98	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016
70120	Y	$59.34	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
70130	Y	$94.98	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
70134	Y	$94.98	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
70140	Y	$59.34	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016
70150	Y	$94.98	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
70160	Y	$59.34	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
70170	Y	$210.25	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
70190	Y	$94.98	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
70200	Y	$94.98	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016
7020F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
70210	Y	$59.34	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
70220	Y	$94.98	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
70240	Y	$59.34	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
70250	Y	$94.98	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016
7025F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
70260	Y	$94.98	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
70300	Y	$59.34	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
70310	Y	$94.98	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
70320	Y	$59.34	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
70328	Y	$59.34	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
70330	Y	$59.34	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
70332	Y	$265.32	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
70336	Y	$349.53	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
70350	Y	$59.34	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
70355	Y	$59.34	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
70360	Y	$59.34	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016
70370	Y	$159.47	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
70371	Y	$159.47	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
70380	Y	$59.34	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
70390	Y	$210.25	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
70450	Y	$195.07	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
70460	Y	$297.03	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
70470	Y	$333.52	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
70480	Y	$195.07	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
70481	Y	$297.03	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
70482	Y	$333.52	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
70486	Y	$195.07	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
70487	Y	$297.03	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
70488	Y	$333.52	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
70490	Y	$195.07	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
70491	Y	$297.03	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
70492	Y	$333.52	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
70496	Y	$340.47	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2016
70498	Y	$340.47	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2016
70540	Y	$349.53	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
70542	Y	$423.99	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
70543	Y	$535.42	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
70544	Y	$349.53	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2016
70545	Y	$423.99	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
70546	Y	$535.42	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
70547	Y	$349.53	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
70548	Y	$423.99	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
70549	Y	$535.42	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
70551	Y	$349.53	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2016
70552	Y	$423.99	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2016
70553	Y	$535.42	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2016
70554	Y	$349.53	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
70555	Y	$349.53	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
70557	Y	$349.53	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
70558	Y	$423.99	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
70559	Y	$535.42	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
71045	Y	$62.11	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2018
71046	Y	$62.11	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2018
71047	Y	$62.11	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2018
71048	Y	$118.74	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2018
71100	Y	$59.34	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016
71101	Y	$94.98	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016
71110	Y	$94.98	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
71111	Y	$94.98	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
71120	Y	$59.34	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
71130	Y	$59.34	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
71250	Y	$195.07	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2016
71260	Y	$297.03	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2016
71270	Y	$333.52	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
71271	Y	$80.90	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2021
71275	Y	$340.47	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
71550	Y	$349.53	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
71551	Y	$423.99	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
71552	Y	$535.42	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
71555	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
72020	Y	$59.34	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
72040	Y	$94.98	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
72050	Y	$94.98	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
72052	Y	$94.98	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
72070	Y	$94.98	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
72072	Y	$94.98	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
72074	Y	$94.98	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
72080	Y	$59.34	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
72081	Y	$60.80	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016
72082	Y	$100.69	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016
72083	Y	$191.97	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2016
72084	Y	$191.97	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2016
72100	Y	$94.98	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016
72110	Y	$94.98	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
72114	Y	$94.98	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
72120	Y	$94.98	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
72125	Y	$195.07	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
72126	Y	$297.03	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
72127	Y	$333.52	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
72128	Y	$195.07	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
72129	Y	$297.03	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
72130	Y	$333.52	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
72131	Y	$195.07	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
72132	Y	$297.03	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
72133	Y	$333.52	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
72141	Y	$349.53	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
72142	Y	$423.99	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
72146	Y	$349.53	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
72147	Y	$423.99	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
72148	Y	$349.53	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
72149	Y	$423.99	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
72156	Y	$535.42	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
72157	Y	$535.42	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
72158	Y	$535.42	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
72159	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
72170	Y	$94.98	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016
72190	Y	$94.98	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
72191	Y	$340.47	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
72192	Y	$195.07	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
72193	Y	$297.03	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
72194	Y	$333.52	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
72195	Y	$349.53	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
72196	Y	$423.99	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
72197	Y	$535.42	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
72198	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
72200	Y	$59.34	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016
72202	Y	$94.98	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
72220	Y	$59.34	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
72240	Y	$487.08	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
72255	Y	$487.08	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
72265	Y	$487.08	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
72270	Y	$487.08	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
72285	Y	$1,743.15	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2016
72295	Y	$1,743.15	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2016
73000	Y	$59.34	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
73010	Y	$59.34	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
73020	Y	$59.34	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
73030	Y	$94.98	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016
73040	Y	$265.32	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
73050	Y	$94.98	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
73060	Y	$59.34	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
73070	Y	$59.34	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
73080	Y	$59.34	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
73085	Y	$265.32	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
73090	Y	$59.34	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
73092	Y	$94.98	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
73100	Y	$59.34	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
73110	Y	$59.34	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016
73115	Y	$265.32	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
73120	Y	$94.98	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
73130	Y	$59.34	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016
73140	Y	$59.34	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016
73200	Y	$195.07	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
73201	Y	$297.03	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
73202	Y	$333.52	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
73206	Y	$340.47	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
73218	Y	$349.53	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
73219	Y	$423.99	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
73220	Y	$535.42	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
73221	Y	$349.53	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
73222	Y	$423.99	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
73223	Y	$535.42	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
73225	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
73501	Y	$60.80	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016
73502	Y	$60.80	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016
73503	Y	$100.69	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016
73521	Y	$100.69	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016
73522	Y	$100.69	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016
73523	Y	$191.97	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2016
73525	Y	$265.32	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
73551	Y	$60.80	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016
73552	Y	$60.80	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016
73560	Y	$59.34	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016
73562	Y	$94.98	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016
73564	Y	$94.98	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016
73565	Y	$59.34	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
73580	Y	$265.32	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
73590	Y	$59.34	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016
73592	Y	$94.98	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
73600	Y	$94.98	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016
73610	Y	$94.98	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016
73615	Y	$265.32	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
73620	Y	$59.34	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
73630	Y	$59.34	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016
73650	Y	$59.34	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
73660	Y	$59.34	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
73700	Y	$195.07	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
73701	Y	$297.03	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
73702	Y	$333.52	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
73706	Y	$340.47	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
73718	Y	$349.53	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
73719	Y	$423.99	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
73720	Y	$535.42	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
73721	Y	$349.53	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
73722	Y	$423.99	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
73723	Y	$535.42	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
73725	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
74018	Y	$62.11	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2018
74019	Y	$118.74	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2018
74021	Y	$118.74	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2018
74022	Y	$94.98	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
74150	Y	$195.07	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
74160	Y	$297.03	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
74170	Y	$333.52	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
74174	Y	$558.90	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
74175	Y	$340.47	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
74176	Y	$189.71	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2016
74177	Y	$293.41	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2016
74178	Y	$327.11	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2014
74181	Y	$349.53	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
74182	Y	$423.99	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
74183	Y	$535.42	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
74185	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
74190	Y	$210.25	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
74210	Y	$87.53	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
74220	Y	$87.53	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
74221	Y	$182.22	OPPS Price Mcare APC St Ind Q1	Not Available		1/1/2020
74230	Y	$87.53	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
74235	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
74240	Y	$87.53	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2016
74246	Y	$87.53	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
74248	Y	$0.00	OPPS PackagdServ APC St Ind N	Not Available		1/1/2020
74250	Y	$87.53	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
74251	Y	$141.56	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
74261	Y	$195.07	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2014
74262	Y	$297.03	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2014
74263	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
74270	Y	$87.53	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
74280	Y	$141.56	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
74283	Y	$87.53	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
74290	Y	$87.53	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
74300	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
74301	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
74328	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
74329	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
74330	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
74340	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
74355	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
74360	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
74363	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
74400	Y	$171.62	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
74410	Y	$171.62	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
74415	Y	$171.62	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
74420	Y	$171.62	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
74425	Y	$171.62	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2016
74430	Y	$171.62	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
74440	Y	$171.62	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2014
74445	Y	$171.62	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
74450	Y	$171.62	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
74455	Y	$171.62	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
74470	Y	$210.25	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
74485	Y	$1,148.22	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
74712	Y	$273.54	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2016
74713	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016
74740	Y	$210.25	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
74742	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
74775	Y	$171.62	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
75557	Y	$349.53	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
75559	Y	$349.53	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
75561	Y	$535.42	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
75563	Y	$535.42	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
75565	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
75571	Y	$29.33	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
75572	Y	$269.15	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
75573	Y	$269.15	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
75574	Y	$269.15	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
75580	Y	$996.18	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2024
75600	Y	$1,962.36	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
75605	Y	$1,962.36	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
75625	Y	$1,962.36	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
75630	Y	$1,962.36	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
75635	Y	$340.47	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
75705	Y	$1,962.36	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
75710	Y	$1,962.36	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2016
75716	Y	$1,962.36	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
75726	Y	$1,962.36	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
75731	Y	$1,962.36	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
75733	Y	$1,962.36	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
75736	Y	$1,962.36	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
75741	Y	$1,962.36	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
75743	Y	$1,962.36	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
75746	Y	$694.13	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
75756	Y	$694.13	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
75774	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
75801	Y	$377.55	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
75803	Y	$377.55	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
75805	Y	$377.55	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
75807	Y	$377.55	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
75809	Y	$75.23	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
75810	Y	$1,962.36	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
75820	Y	$694.13	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2016
75822	Y	$694.13	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
75825	Y	$1,962.36	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
75827	Y	$694.13	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
75831	Y	$1,962.36	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
75833	Y	$1,962.36	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
75840	Y	$1,962.36	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
75842	Y	$1,962.36	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
75860	Y	$694.13	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
75870	Y	$694.13	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
75872	Y	$694.13	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
75880	Y	$694.13	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
75885	Y	$1,962.36	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
75887	Y	$694.13	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
75889	Y	$1,962.36	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
75891	Y	$1,962.36	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
75893	Y	$1,962.36	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
75894	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
75898	Y	$75.23	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016
75901	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
75902	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
75956	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
75957	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
75958	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
75959	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
75970	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
75984	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
75989	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
76000	Y	$159.47	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
76010	Y	$59.34	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
76014	Y	$24.49	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2025
76015	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2025
76016	Y	$88.05	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2025
76017	Y	$241.72	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2025
76018	Y	$91.79	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2025
76019	Y	$59.40	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2025
76080	Y	$210.25	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2016
76098	Y	$377.55	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
76100	Y	$94.98	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
76120	Y	$159.47	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
76125	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
76140	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
76145	Y	$126.87	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2021
76376	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
76377	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
76380	Y	$59.34	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
76390	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
76391	Y	$230.56	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2019
76496	Y	$159.47	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
76497	Y	$59.34	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
76498	Y	$349.53	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
76499	Y	$59.34	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
76506	Y	$62.47	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
76510	Y	$100.81	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
76511	Y	$97.29	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
76512	Y	$97.29	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
76513	Y	$97.29	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
76514	Y	$29.33	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
76516	Y	$91.66	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
76519	Y	$91.66	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
76529	Y	$62.47	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
76536	Y	$97.29	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
76604	Y	$62.47	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
76641	Y	$91.66	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
76642	Y	$91.66	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
76700	Y	$97.29	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
76705	Y	$97.29	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
76706	Y	$112.69	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2017
76770	Y	$97.29	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
76775	Y	$97.29	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
76776	Y	$97.29	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2016
76800	Y	$91.66	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
76801	Y	$97.29	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
76802	Y	$62.47	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
76805	Y	$97.29	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
76810	Y	$97.29	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
76811	Y	$155.07	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
76812	Y	$62.47	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
76813	Y	$62.47	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
76814	Y	$62.47	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
76815	Y	$62.47	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
76816	Y	$91.66	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
76817	Y	$62.47	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
76818	Y	$97.29	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
76819	Y	$97.29	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
76820	Y	$91.66	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
76821	Y	$91.66	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
76825	Y	$596.04	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
76826	Y	$450.97	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
76827	Y	$91.66	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
76828	Y	$91.66	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
76830	Y	$97.29	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
76831	Y	$155.07	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
76856	Y	$97.29	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
76857	Y	$62.47	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
76870	Y	$97.29	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
76872	Y	$97.29	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
76873	Y	$97.29	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
76881	Y	$94.23	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2011
76882	Y	$91.66	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
76883	Y	$106.88	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2023
76885	Y	$91.66	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
76886	Y	$91.66	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
76932	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
76936	Y	$108.36	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
76937	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
76940	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
76941	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
76942	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
76945	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
76946	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
76948	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
76965	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
76975	Y	$155.07	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
76977	Y	$52.35	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
76978	Y	$201.74	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2019
76979	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2019
76981	Y	$112.51	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2019
76982	Y	$112.51	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2019
76983	Y	$25.67	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2019
76984	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2024
76987	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2024
76988	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2024
76989	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2024

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
76998	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
76999	Y	$91.66	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
77001	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
77002	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
77003	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
77011	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
77012	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
77013	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
77014	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
77021	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
77022	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
77046	Y	$230.56	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2019
77047	Y	$230.56	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2019
77048	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2019
77049	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2019
77053	Y	$210.25	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
77054	Y	$210.25	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		11/1/2010
77061	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
77062	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
77063	Y	$23.74	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2015
77065	Y	$125.59	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		7/1/2017
77066	Y	$158.59	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		7/1/2017
77067	Y	$127.61	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		7/1/2017
77071	Y	$59.34	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
77072	Y	$94.98	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
77073	Y	$94.98	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
77074	Y	$94.98	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
77075	Y	$159.47	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
77076	Y	$94.98	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
77077	Y	$94.98	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
77078	Y	$72.50	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
77080	Y	$72.50	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
77081	Y	$29.11	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
77084	Y	$349.53	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
77085	Y	$94.98	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
77086	Y	$59.34	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
77089	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
77090	Y	$82.61	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2022
77091	Y	$82.61	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2022
77092	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
77261	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
77262	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
77263	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
77280	Y	$113.12	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
77285	Y	$314.43	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
77290	Y	$314.43	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
77293	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
77295	Y	$1,038.12	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
77299	Y	$113.12	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
77300	Y	$113.12	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
77301	Y	$1,038.12	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
77306	Y	$113.12	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
77307	Y	$113.12	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
77316	Y	$113.12	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
77317	Y	$314.43	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
77318	Y	$314.43	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
77321	Y	$314.43	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
77331	Y	$113.12	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
77332	Y	$215.54	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
77333	Y	$215.54	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
77334	Y	$215.54	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2016
77336	Y	$113.12	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
77338	Y	$314.43	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
77370	Y	$113.12	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
77371	Y	$7,911.00	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		4/1/2013

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
77372	Y	$3,331.39	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
77373	Y	$1,782.08	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
77385	Y	$507.55	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2016
77386	Y	$507.55	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2016
77387	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016
77399	Y	$113.12	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
77401	Y	$92.78	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
77402	Y	$92.78	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
77407	Y	$92.78	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
77412	Y	$155.24	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
77417	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
77423	Y	$155.24	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
77424	Y	$924.66	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
77425	Y	$924.66	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2013
77427	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
77431	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
77432	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
77435	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
77469	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		10/1/2013
77470	Y	$380.58	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
77499	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
77520	Y	$942.31	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
77522	Y	$942.31	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
77523	Y	$1,232.67	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
77525	Y	$1,232.67	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
77600	Y	$380.58	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
77605	Y	$380.58	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
77610	Y	$380.58	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
77615	Y	$380.58	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
77620	Y	$380.58	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
77750	Y	$155.24	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
77761	Y	$302.29	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
77762	Y	$302.29	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
77763	Y	$302.29	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
77767	Y	$194.35	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2016
77768	Y	$194.35	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2016
77770	Y	$696.21	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2016
77771	Y	$696.21	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2016
77772	Y	$696.21	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2016
77778	Y	$893.50	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
77789	Y	$92.78	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
77790	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
77799	Y	$302.29	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78012	Y	$107.78	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
78013	Y	$141.82	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
78014	Y	$220.17	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
78015	Y	$290.07	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78016	Y	$290.07	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78018	Y	$290.07	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78020	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
78070	Y	$221.73	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78071	Y	$377.18	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
78072	Y	$377.18	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
78075	Y	$963.06	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78099	Y	$145.56	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78102	Y	$258.45	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78103	Y	$258.45	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78104	Y	$258.45	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78110	Y	$390.10	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78111	Y	$390.10	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78120	Y	$390.10	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78121	Y	$390.10	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78122	Y	$390.10	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78130	Y	$390.10	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78140	Y	$390.10	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78185	Y	$258.45	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
78191	Y	$180.76	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78195	Y	$258.45	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78199	Y	$258.45	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78201	Y	$290.78	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78202	Y	$290.78	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78215	Y	$290.78	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78216	Y	$290.78	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78226	Y	$282.42	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
78227	Y	$282.42	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
78230	Y	$247.39	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78231	Y	$247.39	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78232	Y	$247.39	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78258	Y	$247.39	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78261	Y	$247.39	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78262	Y	$247.39	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78264	Y	$247.39	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78265	Y	$332.65	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2016
78266	Y	$441.36	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2016
78267	Y	$13.27	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
78268	Y	$94.41	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
78278	Y	$247.39	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78282	Y	$247.39	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78290	Y	$247.39	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78291	Y	$247.39	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78299	Y	$247.39	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78300	Y	$247.43	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78305	Y	$247.43	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78306	Y	$247.43	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78315	Y	$247.43	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78350	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
78351	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
78399	Y	$247.43	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
78414	Y	$305.79	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78428	Y	$305.79	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78429	Y	$1,443.09	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2020
78430	Y	$1,443.09	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2020
78431	Y	$2,250.50	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2020
78432	Y	$2,750.50	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2020
78433	Y	$2,750.50	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2020
78434	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2020
78445	Y	$200.05	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78451	Y	$775.09	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
78452	Y	$775.09	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
78453	Y	$775.09	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
78454	Y	$775.09	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
78456	Y	$200.05	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78457	Y	$200.05	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78458	Y	$200.05	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78459	Y	$1,432.87	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78466	Y	$305.79	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78468	Y	$305.79	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78469	Y	$305.79	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78472	Y	$305.79	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78473	Y	$305.79	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78481	Y	$305.79	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78483	Y	$305.79	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78491	Y	$1,432.87	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78492	Y	$1,432.87	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78494	Y	$305.79	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78496	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
78499	Y	$305.79	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78579	Y	$194.87	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
78580	Y	$206.43	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78582	Y	$304.55	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2012
78597	Y	$194.87	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
78598	Y	$304.55	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
78599	Y	$206.43	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78600	Y	$196.70	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78601	Y	$578.65	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78605	Y	$196.70	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78606	Y	$578.65	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
78608	Y	$1,037.34	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78609	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
78610	Y	$196.70	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78630	Y	$578.65	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
78635	Y	$578.65	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78645	Y	$196.70	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78650	Y	$578.65	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78660	Y	$196.70	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78699	Y	$196.70	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78700	Y	$325.04	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78701	Y	$325.04	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
78707	Y	$325.04	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78708	Y	$325.04	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78709	Y	$325.04	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78725	Y	$180.76	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78730	Y	$112.53	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
78740	Y	$325.04	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78761	Y	$325.04	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78799	Y	$325.04	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78800	Y	$290.07	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78801	Y	$510.41	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78802	Y	$510.41	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78803	Y	$510.41	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78804	Y	$963.06	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78808	Y	$180.76	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		11/1/2010
78811	Y	$1,037.34	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78812	Y	$1,037.34	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
78813	Y	$1,037.34	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78814	Y	$1,037.34	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78815	Y	$1,037.34	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78816	Y	$1,037.34	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
78830	Y	$1,272.19	OPPS Price Mcare APC St Ind S	Not Available		1/1/2020
78831	Y	$1,272.19	OPPS Price Mcare APC St Ind S	Not Available		1/1/2020
78832	Y	$1,443.09	OPPS Price Mcare APC St Ind S	Not Available		1/1/2020
78835	Y	$0.00	OPPS PackagdServ APC St Ind N	Not Available		1/1/2020
78999	Y	$112.53	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
79005	Y	$218.10	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
79101	Y	$218.10	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
79200	Y	$350.56	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
79300	Y	$218.10	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
79403	Y	$350.56	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
79440	Y	$350.56	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
79445	Y	$218.10	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
79999	Y	$218.10	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
80047	Y	$16.48	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80048	Y	$10.15	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80050	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
80051	Y	$8.41	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80053	Y	$12.67	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80055	Y	$57.37	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80061	Y	$16.07	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80069	Y	$10.42	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80074	Y	$57.16	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80076	Y	$9.80	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80081	Y	$89.83	OPPS NM Fee Sched APC St Ind	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
			A			
80143	Y	$18.64	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
80145	Y	$38.57	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80150	Y	$18.10	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80151	Y	$0.00	OPPS NM Medicaid Price Review	APC Medicare CLAB NM FEE		1/1/2021
80155	Y	$38.57	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80156	Y	$17.48	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80157	Y	$15.90	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80158	Y	$21.66	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80159	Y	$24.18	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80161	Y	$0.00	OPPS NM Medicaid Price Review	APC Medicare CLAB NM FEE		1/1/2021
80162	Y	$15.94	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80163	Y	$0.00	OPPS PackagdServ APC St Ind N	APC Medicare CLAB NM FEE		1/1/2021
80164	Y	$16.25	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80165	Y	$0.00	OPPS PackagdServ APC St Ind N	APC Medicare CLAB NM FEE		1/1/2021
80167	Y	$0.00	OPPS NM Medicaid Price Review	APC Medicare CLAB NM FEE		1/1/2021
80168	Y	$19.61	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80169	Y	$16.48	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80170	Y	$19.66	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80171	Y	$26.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80173	Y	$18.94	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80175	Y	$15.90	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80176	Y	$17.63	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
80177	Y	$15.90	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80178	Y	$7.93	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80179	Y	$18.64	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
80180	Y	$21.66	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80181	Y	$0.00	OPPS NM Medicaid Price Review	APC Medicare CLAB NM FEE		1/1/2021
80183	Y	$15.90	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80184	Y	$18.36	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80185	Y	$15.90	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80186	Y	$16.51	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80187	Y	$27.11	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80188	Y	$19.91	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80189	Y	$0.00	OPPS NM Medicaid Price Review	APC Medicare CLAB NM FEE		1/1/2021
80190	Y	$60.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80192	Y	$16.75	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80193	Y	$0.00	OPPS NM Medicaid Price Review	APC Medicare CLAB NM FEE		1/1/2021
80194	Y	$14.60	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80195	Y	$16.48	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80197	Y	$16.48	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80198	Y	$16.97	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80199	Y	$27.11	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80200	Y	$19.36	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80201	Y	$14.30	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
80202	Y	$16.25	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80203	Y	$15.90	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80204	Y	$0.00	OPPS NM Medicaid Price Review	APC Medicare CLAB NM FEE		1/1/2021
80210	Y	$0.00	OPPS NM Medicaid Price Review	APC Medicare CLAB NM FEE		1/1/2021
80220	Y	$18.64	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
80230	Y	$38.57	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80235	Y	$27.11	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80280	Y	$38.57	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80285	Y	$27.11	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80299	Y	$22.37	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80305	Y	$15.12	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80306	Y	$20.57	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80307	Y	$74.57	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80320	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80321	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80322	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80323	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80324	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80325	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80326	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80327	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80328	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80329	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80330	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80331	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80332	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
80333	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80334	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80335	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80336	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80337	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80338	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80339	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80340	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80341	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80342	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80343	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80344	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80345	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80346	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80347	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80348	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80349	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80350	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80351	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80352	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80353	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80354	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80355	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80356	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80357	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80358	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80359	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80360	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80361	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80362	Y	$0.00	OPPS NM Medicaid Not Covered	Not Available		1/1/2016
80363	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80364	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80365	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
80366	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80367	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80368	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80369	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80370	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80371	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80372	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80373	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80374	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80375	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80376	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80377	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
80400	Y	$39.14	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80402	Y	$86.96	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80406	Y	$78.26	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80408	Y	$125.50	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80410	Y	$80.37	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80412	Y	$801.62	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
80414	Y	$61.97	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80415	Y	$67.07	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80416	Y	$209.32	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
80417	Y	$43.99	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80418	Y	$579.48	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
80420	Y	$161.88	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80422	Y	$46.07	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
80424	Y	$50.50	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80426	Y	$148.41	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80428	Y	$66.70	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80430	Y	$129.33	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80432	Y	$165.62	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80434	Y	$285.03	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
80435	Y	$103.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80436	Y	$91.16	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80438	Y	$50.41	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80439	Y	$67.21	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
80503	Y	$0.00	OPPS NM Medicaid Price Review	APC Medicare CLAB NM FEE		1/1/2022
80504	Y	$0.00	OPPS NM Medicaid Price Review	APC Medicare CLAB NM FEE		1/1/2022
80505	Y	$0.00	OPPS NM Medicaid Price Review	APC Medicare CLAB NM FEE		1/1/2022
80506	Y	$0.00	OPPS NM Medicaid Price Review	APC Medicare CLAB NM FEE		1/1/2022
81000	Y	$4.82	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
81001	Y	$3.80	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
81002	Y	$4.18	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
81003	Y	$2.70	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
81005	Y	$2.60	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
81007	Y	$35.98	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
81015	Y	$3.66	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
81020	Y	$4.70	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
81025	Y	$10.33	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
81050	Y	$4.37	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
81099	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2014
81105	Y	$122.22	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81106	Y	$122.22	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81107	Y	$122.22	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81108	Y	$122.22	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81109	Y	$122.22	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81110	Y	$122.22	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81111	Y	$122.22	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81112	Y	$122.22	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81120	Y	$193.25	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
81121	Y	$295.79	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81161	Y	$279.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81162	Y	$1,824.88	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81163	Y	$468.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81164	Y	$584.23	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
81165	Y	$282.88	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81166	Y	$301.35	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
81167	Y	$282.88	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81168	Y	$207.31	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
81170	Y	$300.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81171	Y	$137.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81172	Y	$274.83	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81173	Y	$301.35	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81174	Y	$185.20	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81175	Y	$676.50	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81176	Y	$241.90	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81177	Y	$137.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81178	Y	$137.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81179	Y	$137.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81180	Y	$137.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81181	Y	$137.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81182	Y	$137.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81183	Y	$137.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81184	Y	$137.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81185	Y	$846.27	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81186	Y	$185.20	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81187	Y	$137.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81188	Y	$137.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81189	Y	$274.83	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81190	Y	$185.20	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
81191	Y	$207.31	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81192	Y	$207.31	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81193	Y	$207.31	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81194	Y	$518.28	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81195	Y	$1,263.53	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
81200	Y	$47.25	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81201	Y	$780.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81202	Y	$336.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81203	Y	$240.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81204	Y	$137.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81205	Y	$94.99	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81206	Y	$196.75	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81207	Y	$173.81	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81208	Y	$257.54	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81209	Y	$39.31	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81210	Y	$210.49	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81212	Y	$528.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81215	Y	$450.31	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81216	Y	$185.12	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
81217	Y	$375.25	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
81218	Y	$241.90	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
81219	Y	$121.63	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81220	Y	$556.60	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
81221	Y	$97.22	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
81222	Y	$435.07	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
81223	Y	$499.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81224	Y	$168.75	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81225	Y	$349.64	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81226	Y	$541.10	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81227	Y	$209.77	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81228	Y	$900.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81229	Y	$1,160.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81230	Y	$174.81	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81231	Y	$174.81	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81232	Y	$174.81	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81233	Y	$175.40	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81234	Y	$137.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81235	Y	$389.50	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81236	Y	$282.88	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81237	Y	$175.40	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81238	Y	$600.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81239	Y	$274.83	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
81240	Y	$78.83	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81241	Y	$88.05	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81242	Y	$36.62	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81243	Y	$57.04	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81244	Y	$44.89	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81245	Y	$198.61	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81246	Y	$83.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81247	Y	$174.81	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81248	Y	$375.25	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81249	Y	$600.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81250	Y	$58.49	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81251	Y	$47.25	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81252	Y	$101.12	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81253	Y	$61.52	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81254	Y	$35.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81255	Y	$51.45	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81256	Y	$78.43	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81257	Y	$122.72	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81258	Y	$375.25	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81259	Y	$600.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81260	Y	$39.31	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
81261	Y	$237.59	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81262	Y	$68.55	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81263	Y	$353.43	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81264	Y	$207.28	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81265	Y	$279.69	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81266	Y	$304.81	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
81267	Y	$207.46	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
81268	Y	$260.79	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
81269	Y	$202.40	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81270	Y	$109.99	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81271	Y	$137.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81272	Y	$329.51	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81273	Y	$124.87	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81274	Y	$274.83	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81275	Y	$231.91	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81276	Y	$193.25	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81277	Y	$1,160.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
81278	Y	$78.41	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81279	Y	$185.20	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81283	Y	$73.37	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81284	Y	$137.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
81285	Y	$274.83	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81286	Y	$274.83	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81287	Y	$124.64	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81288	Y	$192.32	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81289	Y	$185.20	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81290	Y	$39.31	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81291	Y	$78.41	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81292	Y	$810.49	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81293	Y	$397.20	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81294	Y	$242.89	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81295	Y	$458.04	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81296	Y	$337.73	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
81297	Y	$255.96	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81298	Y	$770.22	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81299	Y	$369.60	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81300	Y	$285.60	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81301	Y	$418.28	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81302	Y	$527.87	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81303	Y	$120.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81304	Y	$150.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81305	Y	$175.40	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
81306	Y	$291.36	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81307	Y	$676.50	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
81308	Y	$301.35	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
81309	Y	$274.83	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
81310	Y	$295.83	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81311	Y	$295.79	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81312	Y	$137.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81313	Y	$255.05	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81314	Y	$329.51	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81315	Y	$248.77	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81316	Y	$207.31	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
81317	Y	$811.80	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81318	Y	$331.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
81319	Y	$244.20	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81320	Y	$291.36	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81321	Y	$720.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81322	Y	$46.60	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81323	Y	$300.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
81324	Y	$910.04	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81325	Y	$769.58	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
81326	Y	$46.60	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
81327	Y	$192.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81328	Y	$174.81	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81329	Y	$137.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
81330	Y	$47.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81331	Y	$51.07	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81332	Y	$52.38	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81333	Y	$137.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81334	Y	$329.51	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81335	Y	$174.81	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81336	Y	$301.35	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81337	Y	$185.20	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81338	Y	$150.33	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81339	Y	$185.20	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81340	Y	$250.70	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81341	Y	$49.59	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81342	Y	$241.80	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81343	Y	$105.84	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81344	Y	$137.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81345	Y	$185.20	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81346	Y	$174.81	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81347	Y	$193.25	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
81348	Y	$175.40	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81349	Y	$1,197.94	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81350	Y	$234.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81351	Y	$641.85	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81352	Y	$329.51	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81353	Y	$308.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81355	Y	$105.84	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81357	Y	$193.25	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81360	Y	$193.25	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81361	Y	$174.81	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81362	Y	$375.25	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81363	Y	$202.40	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81364	Y	$324.58	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81370	Y	$402.12	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
81371	Y	$404.52	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
81372	Y	$403.59	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
81373	Y	$152.91	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81374	Y	$89.20	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81375	Y	$264.89	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81376	Y	$146.67	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81377	Y	$113.69	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
81378	Y	$345.57	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
81379	Y	$335.38	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
81380	Y	$177.25	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81381	Y	$203.89	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81382	Y	$148.42	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81383	Y	$130.95	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81400	Y	$76.75	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81401	Y	$164.40	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81402	Y	$180.40	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81403	Y	$185.20	OPPS NM Fee Sched APC St Ind A	Legislative Mandate		11/1/2024
81404	Y	$274.83	OPPS NM Fee Sched APC St Ind A	Legislative Mandate		11/1/2024
81405	Y	$301.35	OPPS NM Fee Sched APC St Ind A	Legislative Mandate		11/1/2024
81406	Y	$282.88	OPPS NM Fee Sched APC St Ind A	Legislative Mandate		11/1/2024
81407	Y	$846.27	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81408	Y	$2,000.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81410	Y	$504.00	OPPS Not Payable APC St Ind B	APC Medicare CLAB NM FEE		11/1/2024
81411	Y	$1,350.19	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81412	Y	$2,448.56	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81413	Y	$584.90	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81414	Y	$584.90	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81415	Y	$4,780.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
81416	Y	$12,000.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81417	Y	$320.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81418	Y	$917.08	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81419	Y	$2,448.56	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81420	Y	$759.05	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
81422	Y	$759.05	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81425	Y	$5,031.20	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81426	Y	$2,709.95	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81427	Y	$2,337.65	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81430	Y	$1,625.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81431	Y	$679.57	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81432	Y	$1,303.95	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
81433	Y	$438.93	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81434	Y	$597.91	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81435	Y	$1,303.95	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
81436	Y	$584.90	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81437	Y	$1,303.95	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
81438	Y	$438.93	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81439	Y	$584.90	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81440	Y	$3,324.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81441	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
81442	Y	$2,143.60	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81443	Y	$2,448.56	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
81445	Y	$597.91	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81448	Y	$587.90	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81449	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2023
81450	Y	$759.53	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81451	Y	$759.53	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81455	Y	$2,919.60	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81456	Y	$2,919.60	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81457	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2024
81458	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2024
81459	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2024
81460	Y	$1,287.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81462	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2024
81463	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2024
81464	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2024
81465	Y	$936.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81470	Y	$914.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81471	Y	$914.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/10/2024
81479	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2024
81490	Y	$840.65	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
81493	Y	$1,050.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81500	Y	$260.50	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
81503	Y	$897.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81504	Y	$520.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81506	Y	$68.92	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81507	Y	$795.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81508	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2024
81509	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2024
81510	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2024
81511	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2024
81512	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2024
81513	Y	$0.00	OPPS NM Medicaid Not Covered	APC Medicare CLAB NM FEE		11/1/2024
81514	Y	$0.00	OPPS NM Medicaid Not Covered	APC Medicare CLAB NM FEE		11/1/2024
81515	Y	$262.99	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
81517	Y	$176.19	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2024
81518	Y	$4,647.62	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81519	Y	$4,647.62	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81520	Y	$2,510.21	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81521	Y	$3,873.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81522	Y	$3,873.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
81523	Y	$3,873.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81525	Y	$3,116.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
81528	Y	$508.87	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81529	Y	$7,193.00	OPPS NM Fee Sched APC St Ind	APC Medicare CLAB NM FEE		11/1/2024

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
			A			
81535	Y	$579.46	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81536	Y	$177.56	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81538	Y	$2,871.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81539	Y	$760.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81540	Y	$3,750.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81541	Y	$3,873.00	OPPS NM Fee Sched APC St Ind A	Legislative Mandate		1/1/2025
81542	Y	$3,873.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81546	Y	$3,600.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81551	Y	$2,030.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81552	Y	$7,776.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81554	Y	$5,445.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
81558	Y	$262.99	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
81560	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2024
81595	Y	$3,240.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2024
81596	Y	$72.19	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		11/1/2024
81599	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2024
82009	Y	$5.42	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82010	Y	$9.80	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82013	Y	$14.75	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82016	Y	$16.49	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82017	Y	$20.24	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
82024	Y	$46.34	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82030	Y	$25.80	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82040	Y	$5.94	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82042	Y	$9.34	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82043	Y	$6.94	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82044	Y	$7.48	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82045	Y	$33.94	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82075	Y	$36.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82077	Y	$17.27	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82085	Y	$11.65	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82088	Y	$48.90	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82103	Y	$16.13	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82104	Y	$17.35	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82105	Y	$20.12	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82106	Y	$20.40	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82107	Y	$77.29	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82108	Y	$30.58	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82120	Y	$7.19	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82127	Y	$14.18	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82128	Y	$13.87	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82131	Y	$27.58	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
82135	Y	$19.74	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82136	Y	$23.53	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82139	Y	$20.24	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82140	Y	$17.48	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82143	Y	$9.35	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82150	Y	$7.78	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82154	Y	$28.83	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82157	Y	$35.13	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82160	Y	$30.66	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82163	Y	$24.62	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82164	Y	$17.52	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82166	Y	$38.62	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2024
82172	Y	$25.31	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82175	Y	$22.76	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82180	Y	$11.87	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82190	Y	$15.90	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82232	Y	$19.42	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82233	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
82234	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
82239	Y	$20.54	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82240	Y	$26.58	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
82247	Y	$6.02	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82248	Y	$6.02	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82252	Y	$4.56	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82261	Y	$16.87	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82270	Y	$5.26	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82271	Y	$5.32	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82272	Y	$5.08	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82274	Y	$19.10	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82286	Y	$5.16	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82300	Y	$28.37	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82306	Y	$35.52	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82308	Y	$32.15	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82310	Y	$6.19	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82330	Y	$16.42	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82331	Y	$13.34	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82340	Y	$7.24	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82355	Y	$13.90	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82360	Y	$15.44	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82365	Y	$15.48	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82370	Y	$12.52	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82373	Y	$21.67	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
82374	Y	$5.86	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82375	Y	$14.78	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82376	Y	$14.07	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82378	Y	$22.75	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82379	Y	$20.24	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82380	Y	$11.06	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82382	Y	$27.30	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82383	Y	$29.08	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82384	Y	$30.30	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82387	Y	$18.06	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82390	Y	$12.89	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82397	Y	$16.94	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82415	Y	$12.67	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82435	Y	$5.52	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82436	Y	$6.90	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82438	Y	$6.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82441	Y	$6.01	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82465	Y	$5.22	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82480	Y	$9.44	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82482	Y	$11.77	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82485	Y	$20.65	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
82495	Y	$24.34	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82507	Y	$33.36	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82523	Y	$22.42	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82525	Y	$14.89	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82528	Y	$22.52	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82530	Y	$20.05	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82533	Y	$19.56	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82540	Y	$5.57	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82542	Y	$28.91	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82550	Y	$7.81	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82552	Y	$16.07	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82553	Y	$13.86	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82554	Y	$11.87	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82565	Y	$6.14	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82570	Y	$6.22	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82575	Y	$11.35	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82585	Y	$14.14	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82595	Y	$7.76	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82600	Y	$23.28	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82607	Y	$18.10	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82608	Y	$17.18	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
82610	Y	$22.22	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82615	Y	$11.46	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82626	Y	$30.32	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82627	Y	$26.68	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82633	Y	$30.98	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82634	Y	$35.13	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82638	Y	$12.25	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82642	Y	$0.00	OPPS NM Medicaid Not Covered	APC Medicare CLAB NM FEE		1/1/2019
82652	Y	$46.20	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82653	Y	$22.97	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
82656	Y	$13.84	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82657	Y	$26.60	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82658	Y	$44.03	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82664	Y	$73.80	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82668	Y	$22.55	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82670	Y	$33.53	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82671	Y	$38.76	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82672	Y	$26.04	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82677	Y	$29.02	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82679	Y	$29.94	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82681	Y	$27.94	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
82693	Y	$14.90	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82696	Y	$26.24	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82705	Y	$6.12	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82710	Y	$20.16	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82715	Y	$27.56	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82725	Y	$22.52	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82726	Y	$23.70	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82728	Y	$16.36	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82731	Y	$77.29	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82735	Y	$22.25	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82746	Y	$17.64	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82747	Y	$21.18	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82757	Y	$17.34	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82759	Y	$21.48	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82760	Y	$11.20	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82775	Y	$21.07	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82776	Y	$11.74	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82777	Y	$53.10	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82784	Y	$11.16	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82785	Y	$19.75	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82787	Y	$9.62	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
82800	Y	$11.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82803	Y	$31.28	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82805	Y	$94.53	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82810	Y	$9.77	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82820	Y	$13.34	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82930	Y	$6.71	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82938	Y	$17.69	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82941	Y	$21.16	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82943	Y	$17.15	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82945	Y	$4.72	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82946	Y	$17.77	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82947	Y	$4.72	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82948	Y	$6.05	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82950	Y	$5.70	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82951	Y	$15.44	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82952	Y	$4.70	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82955	Y	$11.64	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82960	Y	$6.05	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82962	Y	$3.94	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82963	Y	$25.78	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82965	Y	$13.15	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
82977	Y	$8.64	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82978	Y	$18.54	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82979	Y	$9.44	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
82985	Y	$20.11	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83001	Y	$22.30	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83002	Y	$22.22	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83003	Y	$20.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83006	Y	$0.00	OPPS PackagdServ APC St Ind N	APC Medicare CLAB NM FEE		1/1/2021
83009	Y	$80.83	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83010	Y	$15.10	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83012	Y	$26.89	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83013	Y	$80.83	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83014	Y	$9.43	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83015	Y	$20.94	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83018	Y	$26.35	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83020	Y	$15.44	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83021	Y	$21.67	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83026	Y	$4.81	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83030	Y	$12.89	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83033	Y	$9.60	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83036	Y	$11.65	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
83037	Y	$11.65	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83045	Y	$6.49	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83050	Y	$9.84	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83051	Y	$7.31	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83060	Y	$8.80	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83065	Y	$9.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83068	Y	$9.47	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83069	Y	$4.74	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83070	Y	$5.70	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83080	Y	$20.24	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83088	Y	$35.44	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83090	Y	$21.50	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83150	Y	$26.89	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83491	Y	$17.90	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83497	Y	$15.48	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83498	Y	$32.60	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83500	Y	$22.65	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83505	Y	$24.30	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83516	Y	$13.84	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83518	Y	$11.57	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83519	Y	$22.08	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
83520	Y	$20.72	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83521	Y	$17.27	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
83525	Y	$13.72	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83527	Y	$15.54	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83528	Y	$19.82	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83529	Y	$17.27	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
83540	Y	$7.76	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83550	Y	$10.49	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83570	Y	$8.85	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83582	Y	$15.47	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83586	Y	$15.36	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83593	Y	$28.50	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83605	Y	$13.88	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83615	Y	$7.25	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83625	Y	$15.35	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83630	Y	$23.64	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83631	Y	$23.56	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83632	Y	$20.22	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83633	Y	$11.25	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83655	Y	$14.53	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83661	Y	$21.99	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
83662	Y	$18.91	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83663	Y	$18.91	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83664	Y	$23.18	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83670	Y	$9.81	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83690	Y	$8.27	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83695	Y	$17.18	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83698	Y	$55.57	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83700	Y	$13.51	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83701	Y	$40.63	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83704	Y	$41.03	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83718	Y	$9.83	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83719	Y	$12.75	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83721	Y	$12.60	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83722	Y	$0.00	OPPS NM Medicaid Not Covered	APC Medicare CLAB NM FEE		1/1/2019
83727	Y	$20.63	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83735	Y	$8.04	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83775	Y	$7.37	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83785	Y	$31.98	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83789	Y	$28.93	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83825	Y	$19.51	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83835	Y	$20.33	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
83857	Y	$10.74	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83861	Y	$26.98	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83864	Y	$34.20	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83872	Y	$7.03	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83873	Y	$17.20	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83874	Y	$15.50	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83876	Y	$61.03	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83880	Y	$47.11	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83883	Y	$16.32	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83884	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
83885	Y	$29.41	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83915	Y	$13.38	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83916	Y	$32.87	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83918	Y	$28.32	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83919	Y	$16.45	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83921	Y	$25.45	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83930	Y	$7.93	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83935	Y	$8.18	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83937	Y	$35.82	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83945	Y	$17.34	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83950	Y	$64.41	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
83951	Y	$77.29	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83970	Y	$49.54	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83986	Y	$4.30	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83987	Y	$3.58	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
83992	Y	$23.24	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
83993	Y	$23.56	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84030	Y	$6.60	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84035	Y	$3.98	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84060	Y	$9.17	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84066	Y	$9.66	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84075	Y	$6.22	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84078	Y	$8.26	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84080	Y	$17.74	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84081	Y	$16.52	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84085	Y	$9.44	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84087	Y	$10.73	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84100	Y	$5.69	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84105	Y	$6.94	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84106	Y	$5.82	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84110	Y	$10.13	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84112	Y	$117.73	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
84119	Y	$13.36	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84120	Y	$17.65	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84126	Y	$46.93	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84132	Y	$5.71	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84133	Y	$5.68	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84134	Y	$17.51	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84135	Y	$21.27	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84138	Y	$21.05	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84140	Y	$24.80	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84143	Y	$27.37	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84144	Y	$25.03	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84145	Y	$32.66	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84146	Y	$23.26	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84150	Y	$50.12	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84152	Y	$22.07	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84153	Y	$22.07	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84154	Y	$22.07	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84155	Y	$4.40	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84156	Y	$4.40	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84157	Y	$4.80	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84160	Y	$5.61	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
84163	Y	$18.06	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84165	Y	$12.89	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84166	Y	$21.40	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84181	Y	$20.44	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84182	Y	$35.05	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84202	Y	$17.22	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84203	Y	$9.74	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84206	Y	$32.03	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84207	Y	$33.72	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84210	Y	$17.38	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84220	Y	$11.33	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84228	Y	$11.63	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84233	Y	$87.88	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84234	Y	$64.88	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84235	Y	$71.23	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84238	Y	$43.88	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84244	Y	$26.39	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84252	Y	$24.29	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84255	Y	$30.64	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84260	Y	$37.17	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84270	Y	$26.08	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
84275	Y	$16.13	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84285	Y	$25.21	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84295	Y	$5.77	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84300	Y	$6.07	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84302	Y	$5.83	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84305	Y	$25.51	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84307	Y	$18.28	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84311	Y	$9.72	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84315	Y	$3.28	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84375	Y	$39.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84376	Y	$6.60	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84377	Y	$5.50	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84378	Y	$13.84	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84379	Y	$11.53	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84392	Y	$6.59	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84393	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
84394	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
84402	Y	$30.56	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84403	Y	$30.97	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84410	Y	$61.54	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84425	Y	$25.48	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
84430	Y	$11.63	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84431	Y	$42.13	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84432	Y	$19.27	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84433	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2023
84436	Y	$8.24	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84437	Y	$6.47	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84439	Y	$10.82	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84442	Y	$17.74	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84443	Y	$20.16	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84445	Y	$61.03	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84446	Y	$17.02	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84449	Y	$21.60	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84450	Y	$6.22	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84460	Y	$6.36	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84466	Y	$15.31	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84478	Y	$6.89	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84479	Y	$7.76	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84480	Y	$17.02	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84481	Y	$20.33	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84482	Y	$18.91	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84484	Y	$14.96	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
84485	Y	$7.20	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84488	Y	$7.30	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84490	Y	$9.93	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84510	Y	$12.76	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84512	Y	$12.11	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84520	Y	$4.74	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84525	Y	$5.13	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84540	Y	$6.67	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84545	Y	$8.64	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84550	Y	$5.42	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84560	Y	$6.10	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84577	Y	$16.80	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84578	Y	$5.36	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84580	Y	$9.55	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84583	Y	$6.05	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84585	Y	$18.60	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84586	Y	$42.40	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84588	Y	$40.73	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84590	Y	$13.93	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84591	Y	$20.47	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84597	Y	$16.46	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
84600	Y	$20.53	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84620	Y	$12.91	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84630	Y	$13.67	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84681	Y	$24.97	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84702	Y	$18.06	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84703	Y	$9.02	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84704	Y	$18.35	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84830	Y	$12.70	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
84999	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2014
85002	Y	$5.78	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85004	Y	$7.76	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85007	Y	$4.56	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85008	Y	$4.12	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85009	Y	$5.07	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85013	Y	$8.40	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85014	Y	$2.84	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85018	Y	$2.84	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85025	Y	$9.32	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85027	Y	$7.76	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85032	Y	$4.31	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85041	Y	$3.62	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
85044	Y	$5.17	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85045	Y	$4.79	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85046	Y	$6.68	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85048	Y	$3.05	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85049	Y	$5.38	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85055	Y	$42.89	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85060	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
85097	Y	$79.01	OPPS Price Mcare APC St Ind S	APC Medicare CLAB NM FEE		7/1/2023
85130	Y	$11.89	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85170	Y	$16.30	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85175	Y	$20.37	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85210	Y	$15.58	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85220	Y	$21.18	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85230	Y	$21.48	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85240	Y	$21.48	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85244	Y	$24.50	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85245	Y	$27.53	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85246	Y	$27.53	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85247	Y	$27.53	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85250	Y	$22.85	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85260	Y	$21.48	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85270	Y	$21.48	OPPS NM Fee Sched APC St Ind	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
			A			
85280	Y	$23.22	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85290	Y	$19.61	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85291	Y	$9.11	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85292	Y	$18.93	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85293	Y	$18.93	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85300	Y	$14.22	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85301	Y	$12.97	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85302	Y	$14.41	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85303	Y	$16.61	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85305	Y	$13.93	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85306	Y	$18.38	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85307	Y	$18.38	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85335	Y	$15.44	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85337	Y	$17.27	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85345	Y	$4.69	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85347	Y	$4.28	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85348	Y	$4.49	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85360	Y	$10.09	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85362	Y	$8.27	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85366	Y	$80.46	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
85370	Y	$12.43	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85378	Y	$9.72	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85379	Y	$12.22	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85380	Y	$10.18	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85384	Y	$11.66	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85385	Y	$17.35	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85390	Y	$18.58	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85396	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
85397	Y	$37.03	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85400	Y	$7.71	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85410	Y	$9.25	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85415	Y	$20.63	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85420	Y	$7.84	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85421	Y	$10.18	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85441	Y	$4.20	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85445	Y	$6.82	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85460	Y	$9.28	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85461	Y	$9.36	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85475	Y	$8.87	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85520	Y	$15.71	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85525	Y	$11.84	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
85530	Y	$13.09	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85536	Y	$6.88	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85540	Y	$8.60	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85547	Y	$8.60	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85549	Y	$22.50	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85555	Y	$8.96	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85557	Y	$16.03	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85576	Y	$29.89	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85597	Y	$21.58	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85598	Y	$21.58	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85610	Y	$5.15	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85611	Y	$3.94	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85612	Y	$17.49	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85613	Y	$11.50	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85635	Y	$9.85	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85651	Y	$5.12	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85652	Y	$3.24	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85660	Y	$6.61	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85670	Y	$6.92	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85675	Y	$6.85	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85705	Y	$11.56	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
85730	Y	$7.21	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85732	Y	$7.76	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85810	Y	$14.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
85999	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2014
86000	Y	$6.98	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86001	Y	$9.38	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86003	Y	$6.26	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86005	Y	$9.56	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86008	Y	$21.52	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86015	Y	$12.05	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
86021	Y	$18.06	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86022	Y	$22.04	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86023	Y	$14.95	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86036	Y	$12.05	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
86037	Y	$12.05	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
86038	Y	$14.51	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86039	Y	$13.39	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86041	Y	$18.40	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2024
86042	Y	$18.40	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2024
86043	Y	$12.05	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2024
86051	Y	$11.53	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
86052	Y	$12.05	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
86053	Y	$37.73	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
86060	Y	$8.76	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86063	Y	$5.77	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86077	Y	$61.76	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2023
86078	Y	$61.76	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2023
86079	Y	$51.78	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2023
86140	Y	$6.22	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86141	Y	$15.54	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86146	Y	$30.54	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86147	Y	$30.54	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86148	Y	$19.28	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86152	Y	$250.78	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
86153	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2014
86155	Y	$15.99	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86156	Y	$8.07	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86157	Y	$9.67	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86160	Y	$14.40	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86161	Y	$14.40	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86162	Y	$24.38	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86171	Y	$10.01	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86200	Y	$15.54	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
86215	Y	$15.90	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86225	Y	$16.49	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86226	Y	$14.53	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86231	Y	$12.09	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
86235	Y	$21.52	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86255	Y	$14.46	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86256	Y	$14.46	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86258	Y	$12.05	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
86277	Y	$15.74	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86280	Y	$8.19	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86294	Y	$25.57	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86300	Y	$24.97	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86301	Y	$24.97	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86304	Y	$24.97	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86305	Y	$20.81	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86308	Y	$6.22	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86309	Y	$7.76	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86310	Y	$8.84	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86316	Y	$24.97	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86317	Y	$17.99	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86318	Y	$23.10	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
86320	Y	$29.92	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86325	Y	$23.13	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86327	Y	$29.92	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86328	Y	$47.40	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86329	Y	$16.86	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86331	Y	$14.38	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86332	Y	$29.24	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86334	Y	$26.81	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86335	Y	$35.22	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86336	Y	$18.71	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86337	Y	$25.69	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86340	Y	$18.10	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86341	Y	$28.29	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86343	Y	$14.95	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86344	Y	$10.39	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86352	Y	$163.03	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86353	Y	$58.83	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86355	Y	$45.28	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86356	Y	$32.14	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86357	Y	$45.28	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86359	Y	$45.28	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
86360	Y	$56.37	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86361	Y	$32.14	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86362	Y	$12.05	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
86363	Y	$37.73	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
86364	Y	$11.53	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
86366	Y	$18.40	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2024
86367	Y	$77.78	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86376	Y	$17.46	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86381	Y	$25.45	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
86382	Y	$20.29	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86384	Y	$16.33	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86386	Y	$26.14	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86403	Y	$13.85	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86406	Y	$12.77	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86408	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		8/10/2020
86409	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		8/10/2020
86413	Y	$0.00	OPPS NM Medicaid Not Covered	APC Medicare CLAB NM FEE		8/1/2020
86430	Y	$7.37	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86431	Y	$6.80	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86480	Y	$74.37	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86481	Y	$120.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86485	Y	$19.90	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
86486	Y	$5.90	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2023
86490	Y	$71.31	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2023
86510	Y	$6.92	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		1/1/2025
86580	Y	$11.11	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2023
86581	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
86590	Y	$12.66	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86592	Y	$5.12	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86593	Y	$5.28	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86596	Y	$12.05	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
86602	Y	$10.18	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86603	Y	$12.87	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86606	Y	$18.06	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86609	Y	$15.46	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86611	Y	$12.22	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86612	Y	$15.48	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86615	Y	$15.83	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86617	Y	$18.59	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86618	Y	$20.44	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86619	Y	$13.38	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86622	Y	$10.72	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86625	Y	$15.74	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86628	Y	$14.41	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
86631	Y	$14.18	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86632	Y	$15.22	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86635	Y	$13.76	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86638	Y	$14.54	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86641	Y	$14.41	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86644	Y	$17.27	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86645	Y	$20.22	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86648	Y	$18.25	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86651	Y	$13.19	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86652	Y	$13.19	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86653	Y	$13.19	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86654	Y	$13.19	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86658	Y	$15.64	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86663	Y	$15.74	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86664	Y	$18.35	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86665	Y	$21.77	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86666	Y	$12.22	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86668	Y	$16.99	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86671	Y	$14.70	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86674	Y	$17.66	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86677	Y	$20.22	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
86682	Y	$15.61	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86684	Y	$15.84	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86687	Y	$9.09	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86688	Y	$14.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86689	Y	$23.22	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86692	Y	$20.59	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86694	Y	$17.27	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86695	Y	$15.83	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86696	Y	$23.22	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86698	Y	$16.55	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86701	Y	$10.67	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86702	Y	$16.22	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86703	Y	$16.45	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86704	Y	$14.46	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86705	Y	$14.12	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86706	Y	$12.89	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86707	Y	$13.88	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86708	Y	$14.87	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86709	Y	$13.51	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86710	Y	$16.26	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86711	Y	$20.27	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
86713	Y	$15.30	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86717	Y	$12.25	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86720	Y	$19.44	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86723	Y	$13.19	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86727	Y	$12.87	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86732	Y	$15.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86735	Y	$15.66	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86738	Y	$15.89	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86741	Y	$13.19	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86744	Y	$15.99	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86747	Y	$18.04	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86750	Y	$13.19	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86753	Y	$14.87	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86756	Y	$19.07	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86757	Y	$23.22	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86759	Y	$18.23	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86762	Y	$17.27	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86765	Y	$15.46	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86768	Y	$15.83	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86769	Y	$44.10	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86771	Y	$24.48	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
86774	Y	$17.76	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86777	Y	$17.27	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86778	Y	$17.29	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86780	Y	$15.89	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86784	Y	$12.56	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86787	Y	$15.46	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86788	Y	$20.22	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86789	Y	$17.27	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86790	Y	$15.46	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86793	Y	$15.83	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86800	Y	$19.09	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86803	Y	$17.12	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86804	Y	$18.59	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86805	Y	$189.51	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86806	Y	$47.59	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86807	Y	$78.65	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86808	Y	$29.68	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86812	Y	$30.97	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86813	Y	$58.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86816	Y	$30.17	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86817	Y	$127.37	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
86821	Y	$36.56	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86825	Y	$109.49	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86826	Y	$36.53	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86828	Y	$77.03	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86829	Y	$64.19	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86830	Y	$95.52	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86831	Y	$81.88	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86832	Y	$388.51	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86833	Y	$390.96	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86834	Y	$357.56	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
86835	Y	$322.96	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
86849	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2014
86850	Y	$11.72	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2023
86860	Y	$125.07	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
86870	Y	$209.42	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		1/1/2016
86880	Y	$6.47	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2023
86885	Y	$5.72	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2023
86886	Y	$6.22	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2023
86890	Y	$125.07	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
86891	Y	$125.07	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
86900	Y	$3.59	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2023
86901	Y	$3.59	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2023
86902	Y	$6.35	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2023
86904	Y	$16.34	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2023
86905	Y	$4.60	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2023
86906	Y	$9.30	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
86910	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
86911	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
86920	Y	$125.07	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
86921	Y	$76.04	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
86922	Y	$125.07	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2016
86923	Y	$125.07	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
86927	Y	$14.80	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
86930	Y	$76.04	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
86931	Y	$125.07	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2016
86932	Y	$76.04	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
86940	Y	$8.77	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86941	Y	$12.11	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
86945	Y	$76.04	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016
86950	Y	$76.04	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
86960	Y	$125.07	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
86965	Y	$125.07	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
86970	Y	$29.33	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
86971	Y	$125.07	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2016
86972	Y	$125.07	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
86975	Y	$125.07	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
86976	Y	$76.04	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
86977	Y	$76.04	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
86978	Y	$76.04	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
86985	Y	$125.07	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
86999	Y	$76.04	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
87003	Y	$16.84	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87015	Y	$8.02	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87040	Y	$12.38	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87045	Y	$11.33	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
87046	Y	$11.33	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87070	Y	$10.34	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87071	Y	$11.87	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87073	Y	$9.66	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87075	Y	$11.36	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87076	Y	$9.70	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87077	Y	$9.70	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87081	Y	$7.96	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87084	Y	$32.48	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87086	Y	$9.68	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87088	Y	$9.71	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87101	Y	$9.25	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87102	Y	$10.09	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87103	Y	$24.55	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87106	Y	$12.38	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87107	Y	$12.38	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87109	Y	$18.47	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87110	Y	$23.52	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87116	Y	$12.96	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87118	Y	$17.53	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87140	Y	$6.68	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
87143	Y	$12.52	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87147	Y	$6.22	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87149	Y	$20.05	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87150	Y	$42.11	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87152	Y	$7.74	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87153	Y	$138.43	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87154	Y	$218.06	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
87158	Y	$9.29	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87164	Y	$10.74	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87166	Y	$11.30	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87168	Y	$4.27	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87169	Y	$5.17	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87172	Y	$5.12	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87176	Y	$7.06	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87177	Y	$10.68	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87181	Y	$5.70	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87184	Y	$8.98	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87185	Y	$5.70	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87186	Y	$10.38	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87187	Y	$40.17	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87188	Y	$6.64	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
87190	Y	$7.31	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87197	Y	$15.02	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87205	Y	$5.12	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87206	Y	$6.47	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87207	Y	$7.19	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87209	Y	$21.58	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87210	Y	$6.98	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87220	Y	$5.12	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87230	Y	$23.69	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87250	Y	$19.56	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87252	Y	$31.28	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87253	Y	$24.24	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87254	Y	$23.47	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87255	Y	$40.63	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87260	Y	$14.43	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87265	Y	$11.98	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87267	Y	$13.42	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87269	Y	$13.61	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87270	Y	$11.98	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87271	Y	$13.42	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87272	Y	$14.38	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
87273	Y	$11.98	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87274	Y	$14.38	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87275	Y	$14.70	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87276	Y	$19.28	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87278	Y	$15.60	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87279	Y	$16.43	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87280	Y	$16.10	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87281	Y	$11.98	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87283	Y	$72.96	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87285	Y	$12.18	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87290	Y	$16.10	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87299	Y	$16.10	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87300	Y	$11.98	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87301	Y	$11.98	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87305	Y	$14.38	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87320	Y	$15.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87324	Y	$14.38	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87327	Y	$16.10	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87328	Y	$16.58	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87329	Y	$14.38	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87332	Y	$11.98	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
87335	Y	$12.66	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87336	Y	$16.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87337	Y	$14.38	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87338	Y	$17.26	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87339	Y	$19.20	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87340	Y	$12.40	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87341	Y	$12.40	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87350	Y	$13.84	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87380	Y	$22.03	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87385	Y	$15.90	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87389	Y	$28.90	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87390	Y	$28.87	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87391	Y	$21.90	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87400	Y	$16.96	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87420	Y	$16.69	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87425	Y	$14.38	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87426	Y	$35.33	OPPS NM Medicaid Covered	APC Medicare CLAB NM FEE		1/1/2023
87427	Y	$14.38	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87428	Y	$70.29	OPPS NM Medicaid Covered	APC Medicare CLAB NM FEE		1/1/2024
87430	Y	$20.17	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87449	Y	$14.38	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87451	Y	$10.51	OPPS NM Fee Sched APC St Ind	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
			A			
87467	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2023
87468	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2023
87469	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2023
87471	Y	$35.09	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87472	Y	$42.84	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87475	Y	$20.05	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87476	Y	$42.11	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87478	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2023
87480	Y	$24.06	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87481	Y	$42.11	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87482	Y	$55.74	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87483	Y	$416.76	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87484	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2023
87485	Y	$20.05	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87486	Y	$42.11	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87487	Y	$42.84	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87490	Y	$27.30	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87491	Y	$42.11	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87492	Y	$64.16	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87493	Y	$44.72	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
87495	Y	$30.03	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87496	Y	$42.11	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87497	Y	$51.41	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87498	Y	$42.11	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87500	Y	$42.11	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87501	Y	$51.31	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87502	Y	$114.96	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87503	Y	$35.06	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87505	Y	$0.00	OPPS PackagdServ APC St Ind N	APC Medicare CLAB NM FEE		1/1/2021
87506	Y	$0.00	OPPS PackagdServ APC St Ind N	APC Medicare CLAB NM FEE		1/1/2021
87507	Y	$0.00	OPPS PackagdServ APC St Ind N	APC Medicare CLAB NM FEE		1/1/2021
87510	Y	$24.06	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87511	Y	$42.11	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87512	Y	$50.11	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87513	Y	$35.09	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
87516	Y	$35.09	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87517	Y	$51.41	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87520	Y	$31.22	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87521	Y	$42.11	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87522	Y	$51.41	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87523	Y	$42.84	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2024
87525	Y	$29.80	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
87526	Y	$39.26	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87527	Y	$41.76	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87528	Y	$20.05	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87529	Y	$42.11	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87530	Y	$51.41	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87531	Y	$58.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87532	Y	$42.11	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87533	Y	$50.11	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87534	Y	$21.92	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87535	Y	$42.11	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87536	Y	$102.12	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87537	Y	$21.92	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87538	Y	$42.11	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87539	Y	$58.62	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87540	Y	$20.05	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87541	Y	$42.11	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87542	Y	$41.76	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87550	Y	$20.05	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87551	Y	$48.24	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87552	Y	$42.84	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87555	Y	$26.88	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
87556	Y	$50.02	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87557	Y	$42.84	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87560	Y	$27.29	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87561	Y	$42.11	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87562	Y	$42.84	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87563	Y	$35.09	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
87564	Y	$76.77	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
87580	Y	$20.05	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87581	Y	$42.11	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87582	Y	$302.62	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
87590	Y	$32.26	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87591	Y	$42.11	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87592	Y	$51.41	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87593	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		7/26/2022
87594	Y	$35.09	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
87623	Y	$0.00	OPPS PackagdServ APC St Ind N	APC Medicare CLAB NM FEE		1/1/2021
87624	Y	$0.00	OPPS PackagdServ APC St Ind N	APC Medicare CLAB NM FEE		1/1/2021
87625	Y	$0.00	OPPS PackagdServ APC St Ind N	APC Medicare CLAB NM FEE		1/1/2021
87626	Y	$70.20	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
87631	Y	$171.15	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87632	Y	$261.68	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87633	Y	$500.13	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
87634	Y	$70.20	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87635	Y	$53.71	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87636	Y	$142.63	OPPS NM Medicaid Covered	APC Medicare CLAB NM FEE		1/1/2023
87637	Y	$142.63	OPPS NM Medicaid Covered	APC Medicare CLAB NM FEE		1/1/2023
87640	Y	$42.11	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87641	Y	$42.11	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87650	Y	$24.06	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87651	Y	$42.11	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87652	Y	$50.11	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87653	Y	$42.11	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87660	Y	$24.06	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87661	Y	$42.11	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87797	Y	$30.03	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87798	Y	$42.11	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87799	Y	$51.41	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87800	Y	$52.40	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87801	Y	$84.24	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87802	Y	$15.28	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87803	Y	$16.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87804	Y	$19.86	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87806	Y	$39.33	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87807	Y	$15.72	OPPS NM Fee Sched APC St Ind	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
			A			
87808	Y	$18.35	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87809	Y	$26.11	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87810	Y	$35.29	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87811	Y	$41.38	OPPS NM Medicaid Covered	APC Medicare CLAB NM FEE		1/1/2023
87850	Y	$24.56	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87880	Y	$19.84	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87899	Y	$19.28	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87900	Y	$156.42	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87901	Y	$308.94	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87902	Y	$308.94	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87903	Y	$586.39	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87904	Y	$31.28	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87905	Y	$14.66	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87906	Y	$154.48	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87910	Y	$257.45	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
87912	Y	$308.94	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
87913	Y	$0.00	OPPS NM Medicaid Price Review	APC Medicare CLAB NM FEE		7/1/2022
87999	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2014
88000	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
88005	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
88007	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
88012	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
88014	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
88016	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
88020	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
88025	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
88027	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
88028	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
88029	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
88036	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
88037	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
88040	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
88045	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
88099	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
88104	Y	$43.88	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		1/1/2025
88106	Y	$47.45	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		1/1/2025
88108	Y	$42.01	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		1/1/2025
88112	Y	$43.76	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2023
88120	Y	$493.38	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2023
88121	Y	$339.99	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2023
88125	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
88130	Y	$17.98	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
88140	Y	$7.99	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
88141	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
88142	Y	$24.31	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
88143	Y	$23.04	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
88147	Y	$60.67	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
88148	Y	$17.76	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
88150	Y	$20.77	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
88152	Y	$27.64	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
88153	Y	$24.03	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
88155	Y	$17.58	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
88160	Y	$49.23	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		1/1/2025
88161	Y	$51.01	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		1/1/2025
88162	Y	$81.13	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		1/1/2025
88164	Y	$20.77	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
88165	Y	$42.22	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
88166	Y	$17.76	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
88167	Y	$17.76	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
88172	Y	$19.41	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		1/1/2025
88173	Y	$89.45	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		1/1/2025
88174	Y	$30.44	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
88175	Y	$31.93	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
88177	Y	$7.34	OPPS Price Mcare APC St Ind X	APC Medicare CLAB NM FEE		7/1/2023
88182	Y	$116.39	OPPS Price Mcare APC St Ind S	APC Medicare CLAB NM FEE		1/1/2025
88184	Y	$81.64	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2023
88185	Y	$26.04	OPPS Price Mcare APC St Ind X	APC Medicare CLAB NM FEE		7/1/2023
88187	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2016
88188	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2016
88189	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2016
88199	Y	$54.26	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
88230	Y	$139.79	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
88233	Y	$168.88	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
88235	Y	$180.36	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
88237	Y	$172.49	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
88239	Y	$177.03	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
88240	Y	$13.07	OPPS NM Fee Sched APC St Ind	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
			A			
88241	Y	$12.09	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
88245	Y	$0.00	OPPS NM Medicaid Not Covered	APC Medicare CLAB NM FEE		11/1/2024
88248	Y	$0.00	OPPS NM Medicaid Not Covered	APC Medicare CLAB NM FEE		11/1/2024
88249	Y	$0.00	OPPS NM Medicaid Not Covered	APC Medicare CLAB NM FEE		11/1/2024
88261	Y	$0.00	OPPS NM Medicaid Not Covered	APC Medicare CLAB NM FEE		11/1/2024
88262	Y	$0.00	OPPS NM Medicaid Not Covered	APC Medicare CLAB NM FEE		11/1/2024
88263	Y	$0.00	OPPS NM Medicaid Not Covered	APC Medicare CLAB NM FEE		11/1/2024
88264	Y	$0.00	OPPS NM Medicaid Not Covered	APC Medicare CLAB NM FEE		11/1/2024
88267	Y	$0.00	OPPS NM Medicaid Not Covered	APC Medicare CLAB NM FEE		11/1/2024
88269	Y	$0.00	OPPS NM Medicaid Not Covered	APC Medicare CLAB NM FEE		11/1/2024
88271	Y	$0.00	OPPS NM Medicaid Not Covered	APC Medicare CLAB NM FEE		11/1/2024
88272	Y	$0.00	OPPS NM Medicaid Not Covered	APC Medicare CLAB NM FEE		11/1/2024
88273	Y	$0.00	OPPS NM Medicaid Not Covered	APC Medicare CLAB NM FEE		11/1/2024
88274	Y	$0.00	OPPS NM Medicaid Not Covered	APC Medicare CLAB NM FEE		11/1/2024
88275	Y	$0.00	OPPS NM Medicaid Not Covered	APC Medicare CLAB NM FEE		11/1/2024
88280	Y	$0.00	OPPS NM Medicaid Not Covered	APC Medicare CLAB NM FEE		11/1/2024
88283	Y	$0.00	OPPS NM Medicaid Not Covered	APC Medicare CLAB NM FEE		11/1/2024
88285	Y	$0.00	OPPS NM Medicaid Not Covered	APC Medicare CLAB NM FEE		11/1/2024
88289	Y	$0.00	OPPS NM Medicaid Not Covered	APC Medicare CLAB NM FEE		11/1/2024
88291	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
88299	Y	$54.26	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
88300	Y	$10.79	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		1/1/2025
88302	Y	$28.72	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2023
88304	Y	$34.59	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2023
88305	Y	$38.26	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2023
88307	Y	$229.68	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2023
88309	Y	$270.26	OPPS Price Mcare APC St Ind S	APC Medicare CLAB NM FEE		7/1/2023
88311	Y	$9.28	OPPS Price Mcare APC St Ind X	APC Medicare CLAB NM FEE		7/1/2023
88312	Y	$94.74	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2023
88313	Y	$76.77	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2023
88314	Y	$64.28	OPPS Price Mcare APC St Ind X	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
88319	Y	$99.83	OPPS Price Mcare APC St Ind S	APC Medicare CLAB NM FEE		7/1/2023
88321	Y	$112.64	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2023
88323	Y	$25.77	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2023
88325	Y	$151.46	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2023
88329	Y	$64.36	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2023
88331	Y	$37.69	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2023
88332	Y	$22.71	OPPS Price Mcare APC St Ind X	APC Medicare CLAB NM FEE		7/1/2023
88333	Y	$29.44	OPPS Price Mcare APC St Ind S	APC Medicare CLAB NM FEE		7/1/2023
88334	Y	$17.73	OPPS Price Mcare APC St Ind X	APC Medicare CLAB NM FEE		7/1/2023
88341	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
88342	Y	$72.37	OPPS Price Mcare APC St Ind Q2	APC Medicare CLAB NM FEE		7/1/2023
88344	Y	$143.16	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2023
88346	Y	$106.77	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2023
88348	Y	$435.89	OPPS Price Mcare APC St Ind S	APC Medicare CLAB NM FEE		7/1/2023
88350	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016
88355	Y	$55.51	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2023
88356	Y	$104.88	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		1/1/2025
88358	Y	$82.92	OPPS Price Mcare APC St Ind S	APC Medicare CLAB NM FEE		7/1/2023
88360	Y	$84.84	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2023
88361	Y	$82.64	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2023
88362	Y	$110.10	OPPS Price Mcare APC St Ind S	APC Medicare CLAB NM FEE		7/1/2023
88363	Y	$26.63	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2023
88364	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
88365	Y	$151.71	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2023
88366	Y	$199.16	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2023
88367	Y	$74.06	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2023
88368	Y	$95.91	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		1/1/2025
88369	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
88371	Y	$0.00	OPPS PackagdServ APC St Ind N	APC Medicare CLAB NM FEE		11/1/2024
88372	Y	$0.00	OPPS PackagdServ APC St Ind N	APC Medicare CLAB NM FEE		11/1/2024
88373	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
88374	Y	$286.21	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2023
88375	Y	$46.18	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
88377	Y	$365.54	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2023
88380	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2015
88381	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2015
88387	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2015
88388	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
88399	Y	$54.26	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
88720	Y	$6.02	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
88738	Y	$6.02	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
88740	Y	$9.37	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
88741	Y	$9.37	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
88749	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2014
89049	Y	$261.41	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2023
89050	Y	$5.66	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
89051	Y	$6.72	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
89055	Y	$5.12	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
89060	Y	$8.80	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
89125	Y	$5.88	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
89160	Y	$4.85	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
89190	Y	$6.95	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
89220	Y	$19.92	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2023
89230	Y	$3.04	OPPS Price Mcare APC St Ind Q1	APC Medicare CLAB NM FEE		7/1/2023
89240	Y	$54.26	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
89250	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
89251	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
89253	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
89254	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
89255	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
89257	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
89258	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
89259	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
89260	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
89261	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
89264	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
89268	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
89272	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
89280	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
89281	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
89290	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
89291	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
89300	Y	$9.84	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
89310	Y	$8.61	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
89320	Y	$14.77	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
89321	Y	$14.46	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
89322	Y	$18.60	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
89325	Y	$10.03	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2020
89329	Y	$18.41	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2020
89330	Y	$10.38	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
89331	Y	$19.59	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
89335	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
89337	Y	$183.62	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
89342	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
89343	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
89344	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
89346	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
89352	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
89353	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
89354	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
89356	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
89398	Y	$54.26	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
9001F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
9002F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
9003F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
9004F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
9005F	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
9006F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
9007F	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
90281	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
90283	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
90284	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
90287	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
90288	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
90291	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
90296	N	$50.71	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
90371	N	$104.56	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
90375	N	$248.30	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
90376	N	$242.39	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
90377	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2021
90378	N	$1,169.99	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		10/1/2011
90380	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		7/17/2023
90381	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		7/17/2023
90384	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
90385	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
90386	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
90389	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
90393	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2017
90396	N	$129.48	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		10/1/2011

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
90399	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
90460	Y	$25.67	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2015
90461	Y	$25.67	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2011
90471	Y	$25.67	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
90472	Y	$25.67	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
90473	Y	$25.67	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
90474	Y	$25.67	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
90476	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2012
90477	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
90480	N	$46.83	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2025
90581	N	$112.86	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2013
90584	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2022
90585	N	$173.12	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
90586	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
90587	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2018
90589	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2024
90593	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2025
90611	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		7/26/2022
90619	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2019
90620	N	$137.91	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat	VFC Antigen	2/1/2015
90621	N	$122.70	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat	VFC Antigen	2/1/2015
90622	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		7/26/2022
90623	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2024
90624	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		10/1/2024
90625	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2016
90626	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2021
90627	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2021
90630	N	$20.34	OPPS Price Mcare APC St Ind L	Ambulatory Payment Classificat		1/1/2017
90632	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
90633	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat	VFC Antigen	11/1/2010
90634	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat	VFC Antigen	11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
90636	N	$14.10	OPPS Price Mcare APC St Ind L	Ambulatory Payment Classificat		10/1/2014
90637	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2024
90638	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2024
90644	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
90647	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat	VFC Antigen	11/1/2010
90648	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat	VFC Antigen	11/1/2010
90649	N	$159.32	OPPS NM Medicaid Covered	Ambulatory Payment Classificat	VFC Antigen	1/1/2025
90650	N	$157.80	OPPS NM Medicaid Covered	Ambulatory Payment Classificat	VFC Antigen	1/1/2025
90651	N	$216.87	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2025
90653	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
90654	N	$23.19	OPPS Price Mcare APC St Ind L	Ambulatory Payment Classificat	VFC Antigen	1/1/2025
90655	N	$21.13	OPPS Price Mcare APC St Ind L	Ambulatory Payment Classificat	VFC Antigen	1/1/2025
90656	N	$24.24	OPPS Price Mcare APC St Ind L	Ambulatory Payment Classificat	VFC Antigen	1/1/2025
90657	N	$7.38	OPPS Price Mcare APC St Ind L	Ambulatory Payment Classificat	VFC Antigen	1/1/2025
90658	N	$13.93	OPPS NM Medicaid Covered	Ambulatory Payment Classificat	VFC Antigen	1/1/2025
90660	N	$28.75	OPPS Price Mcare APC St Ind L	Ambulatory Payment Classificat	VFC Antigen	1/1/2025
90661	N	$27.31	OPPS Price Mcare APC St Ind L	Ambulatory Payment Classificat		1/1/2025
90662	N	$49.03	OPPS Price Mcare APC St Ind L	Ambulatory Payment Classificat		10/1/2017
90664	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
90666	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
90667	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
90668	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
90670	N	$192.64	OPPS Price Mcare APC St Ind L	Ambulatory Payment Classificat	VFC Antigen	4/1/2017
90671	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2021
90672	N	$41.68	OPPS Price Mcare APC St Ind L	Ambulatory Payment Classificat		1/1/2025
90673	N	$49.77	OPPS Price Mcare APC St Ind L	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
90674	N	$24.05	OPPS Price Mcare APC St Ind L	Ambulatory Payment Classificat	VFC Antigen	10/1/2017
90675	N	$237.38	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
90676	N	$107.83	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		10/1/2011
90677	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2021
90678	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
90679	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		5/3/2023
90680	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat	VFC Antigen	1/1/2012
90681	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat	VFC Antigen	1/1/2014
90682	N	$53.37	OPPS Price Mcare APC St Ind L	Ambulatory Payment Classificat		1/1/2019
90683	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2024
90684	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		6/27/2024
90685	N	$21.20	OPPS Price Mcare APC St Ind L	Ambulatory Payment Classificat		10/1/2017
90686	N	$33.53	OPPS Price Mcare APC St Ind L	Ambulatory Payment Classificat		1/1/2025
90687	N	$15.66	OPPS Price Mcare APC St Ind L	Ambulatory Payment Classificat		1/1/2025
90688	N	$31.32	OPPS Price Mcare APC St Ind L	Ambulatory Payment Classificat		1/1/2025
90689	N	$26.60	OPPS Price Mcare APC St Ind L	Ambulatory Payment Classificat		1/1/2025
90690	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
90691	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
90694	N	$116.04	OPPS Price Mcare APC St Ind L	Ambulatory Payment Classificat		1/1/2025
90695	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2025
90696	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat	VFC Antigen	11/1/2010
90697	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		2/1/2015
90698	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat	VFC Antigen	11/1/2010
90700	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat	VFC Antigen	11/1/2010
90702	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat	VFC Antigen	11/1/2010
90707	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat	VFC Antigen	11/1/2010
90710	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat	VFC Antigen	11/1/2010
90713	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat	VFC	11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
					Antigen	
90714	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat	VFC Antigen	11/1/2010
90715	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat	VFC Antigen	11/1/2010
90716	N	$100.09	OPPS NM Medicaid Covered	Ambulatory Payment Classificat	VFC Antigen	1/1/2025
90717	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
90723	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat	VFC Antigen	11/1/2010
90732	N	$98.85	OPPS Price Mcare APC St Ind L	Ambulatory Payment Classificat	VFC Antigen	4/1/2017
90733	N	$111.82	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		10/1/2011
90734	N	$93.82	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat	VFC Antigen	10/1/2011
90736	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
90738	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
90739	N	$240.43	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
90740	N	$122.96	OPPS Price Mcare APC St Ind F	Ambulatory Payment Classificat		4/1/2016
90743	N	$26.13	OPPS Price Mcare APC St Ind F	Ambulatory Payment Classificat	VFC Antigen	10/1/2017
90744	N	$25.39	OPPS Price Mcare APC St Ind F	Ambulatory Payment Classificat	VFC Antigen	4/1/2016
90746	N	$61.47	OPPS Price Mcare APC St Ind F	Ambulatory Payment Classificat		1/1/2017
90747	N	$122.96	OPPS Price Mcare APC St Ind F	Ambulatory Payment Classificat		4/1/2016
90748	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
90749	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
90750	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2017
90756	N	$22.79	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		10/1/2018
90758	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2021
90759	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2022
90785	Y	$3.50	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2019
90791	Y	$104.13	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2013
90792	Y	$104.13	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2014
90832	Y	$78.32	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
90833	Y	$40.93	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2019
90834	Y	$104.13	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2014
90836	Y	$66.44	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2019
90837	Y	$104.13	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2014
90838	Y	$98.78	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2019
90839	Y	$104.13	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2013
90840	Y	$35.00	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2019
90845	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
90846	Y	$148.99	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2015
90847	Y	$148.99	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2015
90849	Y	$60.03	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2015
90853	Y	$60.03	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
90863	Y	$30.00	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2019
90865	Y	$112.50	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
90867	Y	$182.20	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2011
90868	Y	$182.20	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2011
90869	Y	$80.97	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
90870	Y	$435.84	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
90875	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
90876	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
90880	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
90882	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
90885	Y	$51.42	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2019
90887	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
90889	Y	$42.80	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2019
90899	Y	$80.60	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
90901	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
90912	Y	$112.64	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
90913	Y	$45.46	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
90935	Y	$459.79	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
90937	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
90940	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
90945	Y	$167.52	OPPS Price Mcare APC St Ind V	Ambulatory Payment Classificat		11/1/2010
90947	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
90951	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
90952	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
90953	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
90954	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
90955	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
90956	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
90957	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
90958	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
90959	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
90960	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
90961	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
90962	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
90963	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
90964	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
90965	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
90966	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
90967	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
90968	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
90969	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
90970	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
90989	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
90993	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
90997	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
90999	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
91010	Y	$328.61	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
91013	Y	$276.45	OPPS Price Mcare APC St Ind X	Ambulatory Payment Classificat		1/1/2014
91020	Y	$328.61	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
91022	Y	$328.61	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
91030	Y	$328.61	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
91034	Y	$328.61	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
91035	Y	$328.61	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
91037	Y	$141.12	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
91038	Y	$328.61	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
91040	Y	$141.12	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
91065	Y	$141.12	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
91110	Y	$663.97	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
91111	Y	$589.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
91112	Y	$852.09	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
91113	Y	$810.48	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2022
91117	Y	$216.48	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2011
91120	Y	$73.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
91122	Y	$203.66	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
91132	Y	$141.12	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
91133	Y	$141.12	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
91200	Y	$134.80	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
91299	Y	$141.12	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
91304	N	$222.30	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2025
91318	N	$65.55	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2024
91319	N	$87.78	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2024
91320	N	$155.90	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		10/1/2024
91321	N	$147.06	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		10/1/2024
91322	N	$161.65	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		10/1/2024
92002	Y	$89.12	OPPS Price Mcare APC St Ind V	Ambulatory Payment Classificat		11/1/2010
92004	Y	$89.12	OPPS Price Mcare APC St Ind V	Ambulatory Payment Classificat		11/1/2010
92012	Y	$57.92	OPPS Price Mcare APC St Ind V	Ambulatory Payment Classificat		11/1/2010
92014	Y	$69.68	OPPS Price Mcare APC St Ind V	Ambulatory Payment Classificat		11/1/2010
92015	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
92018	Y	$1,047.54	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
92019	Y	$1,047.54	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
92020	Y	$52.04	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92025	Y	$52.04	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92060	Y	$52.04	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92065	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
92066	Y	$57.48	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
92071	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
92072	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
92081	Y	$52.04	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92082	Y	$52.04	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92083	Y	$100.81	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92100	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
92132	Y	$52.04	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92133	Y	$52.04	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92134	Y	$52.04	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92136	Y	$100.81	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92137	Y	$311.40	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2025
92145	Y	$52.04	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92201	Y	$55.01	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2020
92202	Y	$55.01	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2020
92227	Y	$52.35	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92228	Y	$131.69	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92229	Y	$55.66	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2021
92230	Y	$100.81	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92235	Y	$131.95	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
92240	Y	$131.95	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
92242	Y	$232.21	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2017
92250	Y	$100.81	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92260	Y	$52.04	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92265	Y	$100.81	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92270	Y	$100.81	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92273	Y	$252.31	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2019
92274	Y	$135.95	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2019
92283	Y	$52.04	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92284	Y	$100.81	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92285	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
92286	Y	$100.81	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92287	Y	$100.81	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92310	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
92311	Y	$100.81	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92312	Y	$100.81	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92313	Y	$100.81	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92314	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
92315	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
92316	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
92317	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
92325	Y	$100.81	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92326	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
92340	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
92341	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
92342	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
92352	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
92353	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
92354	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
92355	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
92358	Y	$100.81	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92370	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
92371	Y	$100.81	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92499	Y	$52.04	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92502	Y	$230.87	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
92504	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
92507	Y	$58.77	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2010
92508	Y	$34.18	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
92511	Y	$53.97	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
92512	Y	$142.95	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
92516	Y	$142.95	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
92517	Y	$139.55	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2021
92518	Y	$139.55	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2021
92519	Y	$264.45	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2021
92520	Y	$52.35	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92521	Y	$117.90	OPPS NM Fee Sched APC St Ind	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
			A			
92522	Y	$117.90	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2015
92523	Y	$117.90	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2015
92524	Y	$117.90	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2015
92526	Y	$78.07	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2010
92531	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
92532	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
92533	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
92534	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
92537	Y	$220.35	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2016
92538	Y	$220.35	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2016
92540	Y	$142.95	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
92541	Y	$131.69	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92542	Y	$52.35	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92544	Y	$142.95	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
92545	Y	$142.95	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
92546	Y	$142.95	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
92547	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
92548	Y	$142.95	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
92549	Y	$109.03	OPPS Price Mcare APC St Ind Q1	Not Available		1/1/2020
92550	Y	$117.90	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92551	Y	$31.68	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		11/1/2010
92552	Y	$117.90	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92553	Y	$117.90	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92555	Y	$183.62	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92556	Y	$43.31	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92557	Y	$117.90	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92558	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
92562	Y	$117.90	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92563	Y	$43.31	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92565	Y	$43.31	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
92567	Y	$43.31	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92568	Y	$29.33	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92570	Y	$117.90	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92571	Y	$43.31	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92572	Y	$117.90	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92575	Y	$43.31	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92576	Y	$43.31	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92577	Y	$117.90	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92579	Y	$117.90	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92582	Y	$117.90	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92583	Y	$43.31	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92584	Y	$180.86	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
92587	Y	$142.95	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
92588	Y	$142.95	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
92590	Y	$31.68	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		11/1/2010
92591	Y	$31.68	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		11/1/2010
92592	Y	$31.68	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		11/1/2010
92593	Y	$31.68	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		11/1/2010
92594	Y	$31.68	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		11/1/2010
92595	Y	$31.68	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		11/1/2010
92596	Y	$43.31	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92597	Y	$31.68	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		10/1/2011
92601	Y	$117.90	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92602	Y	$117.90	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92603	Y	$117.90	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92604	Y	$117.90	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92605	Y	$31.68	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		10/1/2011
92606	Y	$31.68	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		10/1/2011
92607	Y	$31.68	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		10/1/2011
92608	Y	$31.68	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		10/1/2011

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
92609	Y	$31.68	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		10/1/2011
92610	Y	$85.44	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		10/1/2011
92611	Y	$85.44	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		10/1/2011
92612	Y	$85.44	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		10/1/2011
92613	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
92614	Y	$85.44	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		10/1/2011
92615	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
92616	Y	$85.44	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		10/1/2011
92617	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
92618	Y	$15.84	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2014
92620	Y	$117.90	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92621	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
92622	Y	$148.83	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2024
92623	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2024
92625	Y	$117.90	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92626	Y	$117.90	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92627	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
92630	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
92633	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
92640	Y	$117.90	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92650	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2021
92651	Y	$139.55	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2021
92652	Y	$264.45	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2021
92653	Y	$264.45	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2021
92700	Y	$43.31	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
92920	Y	$3,802.64	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
92921	Y	$3,802.64	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2013
92924	Y	$7,250.90	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
92925	Y	$7,250.90	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2013

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
92928	Y	$5,775.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
92929	Y	$5,775.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2013
92933	Y	$5,775.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
92934	Y	$5,775.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2013
92937	Y	$5,775.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
92938	Y	$5,775.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
92941	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2018
92943	Y	$5,775.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
92944	Y	$5,775.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
92950	Y	$165.50	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
92953	Y	$159.56	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2011
92960	Y	$371.05	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
92961	Y	$371.05	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
92970	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
92971	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
92972	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2024
92973	Y	$2,756.93	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
92974	Y	$1,202.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
92975	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
92977	Y	$161.46	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
92978	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
92979	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
92986	Y	$3,416.20	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
92987	Y	$3,416.20	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
92990	Y	$3,416.20	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
92997	Y	$3,416.20	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
92998	Y	$3,416.20	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
93000	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
93005	Y	$78.44	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
93010	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
93015	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2015
93016	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2014
93017	Y	$237.95	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
93018	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2015
93024	Y	$237.95	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
93025	Y	$237.95	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
93040	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
93041	Y	$52.35	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
93042	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
93050	Y	$30.51	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016
93150	Y	$92.23	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2024
93151	Y	$92.23	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2024
93152	Y	$284.59	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2024
93153	Y	$92.23	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2024
93224	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
93225	Y	$78.44	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
93226	Y	$78.44	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
93227	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
93228	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
93229	Y	$770.55	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
93241	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2021
93242	Y	$33.84	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2021
93243	Y	$55.66	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2021
93244	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2021
93245	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2021
93246	Y	$55.66	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2021
93247	Y	$111.95	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2021
93248	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2021
93260	Y	$35.14	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
93261	Y	$35.14	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
93264	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
93268	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
93270	Y	$35.14	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
93271	Y	$107.85	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
93272	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
93278	Y	$52.35	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
93279	Y	$35.14	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
93280	Y	$35.14	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
93281	Y	$35.14	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
93282	Y	$35.14	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
93283	Y	$35.14	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
93284	Y	$35.14	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
93285	Y	$35.14	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
93286	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
93287	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
93288	Y	$35.14	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
93289	Y	$35.14	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
93290	Y	$35.14	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
93291	Y	$29.33	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
93292	Y	$35.14	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
93293	Y	$35.14	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
93294	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
93295	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
93296	Y	$35.14	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
93297	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
93298	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
93303	Y	$596.04	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
93304	Y	$450.97	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
93306	Y	$450.97	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
93307	Y	$264.39	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
93308	Y	$264.39	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
93312	Y	$596.04	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
93313	Y	$450.97	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
93314	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
93315	Y	$596.04	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
93316	Y	$596.04	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
93317	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
93318	Y	$596.04	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
93319	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2022

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
93320	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
93321	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
93325	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
93350	Y	$450.97	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
93351	Y	$596.04	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
93352	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
93355	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
93356	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2020
93451	Y	$2,668.65	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
93452	Y	$2,668.65	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
93453	Y	$2,668.65	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
93454	Y	$2,668.65	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
93455	Y	$2,668.65	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
93456	Y	$2,668.65	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
93457	Y	$2,668.65	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
93458	Y	$2,668.65	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
93459	Y	$2,668.65	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
93460	Y	$2,668.65	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
93461	Y	$2,668.65	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
93462	Y	$2,668.65	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
93463	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
93464	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
93503	Y	$1,202.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
93505	Y	$1,202.77	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
93563	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
93564	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
93565	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
93566	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
93567	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
93568	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
93569	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2023
93571	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
93572	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
93573	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2023
93574	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2023
93575	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2023
93580	Y	$9,933.81	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
93581	Y	$9,933.81	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
93582	Y	$11,861.02	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
93583	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
93584	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2024
93585	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2024
93586	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2024
93587	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2024
93588	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2024
93590	Y	$14,775.90	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2017
93591	Y	$14,775.90	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2017
93592	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2017
93593	Y	$2,961.52	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2022
93594	Y	$2,961.52	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2022
93595	Y	$2,961.52	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2022
93596	Y	$2,961.52	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2022
93597	Y	$2,961.52	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2022
93598	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2022
93600	Y	$728.73	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
93602	Y	$728.73	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
93603	Y	$728.73	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
93609	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
93610	Y	$728.73	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
93612	Y	$728.73	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
93613	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
93615	Y	$728.73	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
93616	Y	$728.73	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
93618	Y	$728.73	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
93619	Y	$3,531.28	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
93620	Y	$3,531.28	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
93621	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
93622	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
93623	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
93624	Y	$3,531.28	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
93631	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
93640	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
93641	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
93642	Y	$728.73	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
93644	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
93650	Y	$3,531.28	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
93653	Y	$10,535.09	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2014
93654	Y	$10,535.09	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2014
93655	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
93656	Y	$10,535.09	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2014
93657	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
93660	Y	$294.60	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
93662	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
93668	Y	$55.90	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2019
93701	Y	$78.44	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
93702	Y	$112.67	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
93724	Y	$23.63	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
93740	Y	$161.22	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
93745	Y	$38.29	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
93750	Y	$107.85	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
93770	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
93784	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		10/1/2013
93786	Y	$78.44	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
93788	Y	$78.44	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
93790	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
93792	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2018
93793	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2018
93797	Y	$38.36	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
93798	Y	$38.36	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
93799	Y	$66.38	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
93880	Y	$155.07	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
93882	Y	$155.07	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
93886	Y	$155.07	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
93888	Y	$62.47	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
93890	Y	$97.29	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
93892	Y	$97.29	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
93893	Y	$97.29	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
93895	Y	$52.35	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
93896	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2025
93897	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2025
93898	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2025
93922	Y	$66.38	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
93923	Y	$108.36	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
93924	Y	$108.36	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
93925	Y	$155.07	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
93926	Y	$97.29	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
93930	Y	$155.07	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
93931	Y	$97.29	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
93970	Y	$155.07	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
93971	Y	$97.29	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
93975	Y	$155.07	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
93976	Y	$155.07	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
93978	Y	$155.07	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
93979	Y	$97.29	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
93980	Y	$155.07	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
93981	Y	$155.07	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
93985	Y	$233.04	OPPS Price Mcare APC St Ind S	Not Available		1/1/2020
93986	Y	$112.08	OPPS Price Mcare APC St Ind S	Not Available		1/1/2020
93990	Y	$97.29	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
93998	Y	$52.35	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
94002	Y	$195.80	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2011
94003	Y	$195.80	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2011

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
94004	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
94005	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
94010	Y	$161.22	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
94011	Y	$161.22	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
94012	Y	$161.22	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
94013	Y	$236.77	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
94014	Y	$161.22	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
94015	Y	$161.22	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
94016	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2011
94060	Y	$95.33	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
94070	Y	$236.77	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
94150	Y	$161.22	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
94200	Y	$131.69	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
94375	Y	$161.22	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
94450	Y	$161.22	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
94452	Y	$161.22	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
94453	Y	$161.22	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
94610	Y	$164.56	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
94617	Y	$105.03	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2018
94618	Y	$105.03	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2018
94619	Y	$55.66	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2021
94621	Y	$236.77	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
94625	Y	$56.85	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2022
94626	Y	$56.85	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2022
94640	Y	$164.56	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
94642	Y	$164.56	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
94644	Y	$131.69	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
94645	Y	$45.11	OPPS Price Mcare APC St Ind X	Ambulatory Payment Classificat		1/1/2014
94660	Y	$96.51	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2011
94662	Y	$195.80	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2011
94664	Y	$164.56	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
94667	Y	$164.56	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
94668	Y	$52.35	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
94669	Y	$164.56	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016
94680	Y	$161.22	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
94681	Y	$161.22	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
94690	Y	$52.35	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
94726	Y	$161.22	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
94727	Y	$161.22	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
94728	Y	$161.22	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
94729	Y	$60.03	OPPS Price Mcare APC St Ind X	Ambulatory Payment Classificat		1/1/2015
94760	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
94761	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
94762	Y	$64.84	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2011
94772	Y	$236.77	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
94774	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
94775	Y	$66.38	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
94776	Y	$66.38	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
94777	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
94780	Y	$52.35	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
94781	Y	$43.91	OPPS Price Mcare APC St Ind X	Ambulatory Payment Classificat		1/1/2015
94799	Y	$161.22	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
95004	Y	$131.69	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
95012	Y	$52.35	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
95018	Y	$52.35	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
95024	Y	$52.35	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
95027	Y	$29.33	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
95028	Y	$52.35	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
95044	Y	$131.69	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
95052	Y	$52.35	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
95056	Y	$52.35	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
95060	Y	$131.69	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
95065	Y	$52.35	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
95070	Y	$236.77	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
95076	Y	$328.61	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
95079	Y	$129.75	OPPS Price Mcare APC St Ind X	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
95115	Y	$25.67	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
95117	Y	$25.67	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
95120	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
95125	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
95130	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
95131	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
95132	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
95133	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
95134	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
95144	Y	$37.44	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
95145	Y	$37.44	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
95146	Y	$75.69	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
95147	Y	$75.69	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
95148	Y	$37.44	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
95149	Y	$37.44	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
95165	Y	$25.67	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
95170	Y	$37.44	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
95180	Y	$131.69	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
95199	Y	$29.23	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
95249	Y	$55.96	OPPS Price Mcare APC St Ind V	Ambulatory Payment Classificat		1/1/2018
95250	Y	$113.44	OPPS Price Mcare APC St Ind V	Ambulatory Payment Classificat		11/1/2010
95251	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
95700	Y	$253.10	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2020
95705	Y	$253.10	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2020
95706	Y	$253.10	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2020
95707	Y	$253.10	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2020
95708	Y	$485.61	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2020
95709	Y	$485.61	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2020
95710	Y	$485.61	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2020
95711	Y	$253.10	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2020
95712	Y	$253.10	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2020
95713	Y	$485.61	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2020
95714	Y	$485.61	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2020

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
95715	Y	$485.61	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2020
95716	Y	$908.95	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2020
95717	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
95718	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
95719	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
95720	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
95721	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
95722	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
95723	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
95724	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
95725	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
95726	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
95782	Y	$761.96	OPPS Price Mcare APC St Ind S	Not Available		1/1/2015
95783	Y	$761.96	OPPS Price Mcare APC St Ind S	Not Available		1/1/2015
95800	Y	$163.08	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2011
95801	Y	$163.08	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2011
95803	Y	$52.35	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
95805	Y	$770.55	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
95806	Y	$162.06	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
95807	Y	$770.55	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
95808	Y	$770.55	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
95810	Y	$770.55	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
95811	Y	$770.55	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
95812	Y	$162.06	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
95813	Y	$162.06	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
95816	Y	$162.06	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
95819	Y	$162.06	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
95822	Y	$162.06	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
95824	Y	$180.86	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
95829	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
95830	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
95836	Y	$37.16	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2019
95851	Y	$80.65	OPPS NM Fee Sched APC St Ind	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
			A			
95852	Y	$80.65	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		10/1/2011
95857	Y	$80.65	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
95860	Y	$94.93	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
95861	Y	$80.65	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
95863	Y	$80.65	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
95864	Y	$80.65	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
95865	Y	$94.93	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
95866	Y	$94.93	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
95867	Y	$80.65	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
95868	Y	$80.65	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
95869	Y	$94.93	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
95870	Y	$52.35	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
95872	Y	$80.65	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
95873	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
95874	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
95875	Y	$41.35	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
95885	Y	$80.97	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
95886	Y	$80.97	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
95887	Y	$42.52	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
95905	Y	$94.93	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
95907	Y	$40.75	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
95908	Y	$40.75	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
95909	Y	$40.75	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
95910	Y	$40.75	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
95911	Y	$75.46	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
95912	Y	$75.46	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
95913	Y	$75.46	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
95919	Y	$116.11	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2023
95921	Y	$80.65	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
95922	Y	$94.93	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
95923	Y	$94.93	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
95924	Y	$75.46	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
95925	Y	$180.86	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
95926	Y	$180.86	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
95927	Y	$180.86	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
95928	Y	$80.65	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
95929	Y	$94.93	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
95930	Y	$180.86	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
95933	Y	$94.93	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
95937	Y	$80.65	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
95938	Y	$178.21	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
95939	Y	$80.97	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
95940	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2013
95941	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2013
95954	Y	$80.65	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
95955	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
95957	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
95958	Y	$162.06	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
95961	Y	$180.86	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
95962	Y	$180.86	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
95965	Y	$3,571.78	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
95966	Y	$962.61	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
95967	Y	$962.61	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
95970	Y	$94.93	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
95971	Y	$107.85	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
95972	Y	$107.85	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
95976	Y	$37.16	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2019
95977	Y	$117.54	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2019
95980	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
95981	Y	$94.93	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
95982	Y	$35.14	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
95983	Y	$37.16	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2019
95984	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2019
95990	Y	$126.78	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
95991	Y	$126.78	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
95992	Y	$94.93	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2015
95999	Y	$94.93	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
96000	Y	$180.86	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
96001	Y	$180.86	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
96002	Y	$80.65	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
96003	Y	$94.93	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
96004	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
96020	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
96040	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
96041	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2025
96105	Y	$58.84	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2014
96110	Y	$12.05	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2019
96112	Y	$135.95	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2019
96113	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2019
96116	Y	$179.86	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
96121	Y	$108.59	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2025
96125	Y	$61.49	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2010
96127	Y	$29.23	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016
96130	Y	$135.95	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2019
96131	Y	$124.12	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2025
96132	Y	$135.95	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2019
96133	Y	$139.73	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2025
96136	Y	$17.17	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2019
96137	Y	$52.60	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2025
96138	Y	$17.17	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2019
96139	Y	$47.40	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2025
96146	Y	$17.17	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2019
96156	Y	$78.54	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2020
96158	Y	$78.54	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2020
96159	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2020

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
96160	Y	$25.22	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2017
96161	Y	$25.22	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2017
96164	Y	$27.32	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2020
96165	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2020
96167	Y	$27.32	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2020
96168	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2020
96170	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
96171	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
96202	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
96203	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
96360	N	$75.69	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
96361	N	$25.67	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
96365	N	$126.78	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
96366	N	$25.67	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
96367	N	$37.44	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
96368	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
96369	N	$126.78	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
96370	N	$37.44	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
96371	N	$25.67	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
96372	N	$25.67	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
96373	N	$37.44	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
96374	N	$37.44	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
96375	N	$37.44	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
96376	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
96377	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2017
96379	N	$25.67	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
96380	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		10/6/2023
96381	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		10/6/2023
96401	N	$37.44	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
96402	N	$37.44	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
96405	N	$37.44	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
96406	N	$126.78	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
96409	N	$126.78	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
96411	N	$75.69	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
96413	N	$219.96	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2014
96415	N	$37.44	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
96416	N	$219.96	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
96417	N	$75.69	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
96420	N	$75.69	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
96422	N	$219.96	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
96423	N	$75.69	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
96425	N	$219.96	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
96440	N	$126.78	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
96446	N	$125.70	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2011
96450	N	$219.96	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
96521	Y	$126.78	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
96522	Y	$126.78	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
96523	Y	$41.33	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
96542	N	$75.69	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
96547	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2024
96548	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2024
96549	Y	$25.67	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
96567	Y	$188.62	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
96570	Y	$103.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
96571	Y	$103.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
96573	Y	$168.93	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2018
96574	Y	$168.93	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2018
96900	Y	$29.23	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
96902	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
96904	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
96910	Y	$52.35	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
96912	Y	$52.35	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
96913	Y	$219.84	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
96920	Y	$98.46	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
96921	Y	$98.46	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
96922	Y	$98.46	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
96931	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
96932	Y	$30.51	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016
96933	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2016
96934	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016
96935	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016
96936	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016
96999	Y	$98.46	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
97010	Y	$16.78	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2010
97012	Y	$14.44	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2010
97014	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
97016	Y	$16.55	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
97018	Y	$7.98	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
97022	Y	$23.64	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
97024	Y	$10.21	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
97026	Y	$9.32	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
97028	Y	$11.64	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
97032	Y	$20.44	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
97033	Y	$27.17	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
97034	Y	$19.81	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
97035	Y	$19.81	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
97036	Y	$48.22	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
97037	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
97039	Y	$14.74	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
97110	Y	$41.41	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
97112	Y	$47.43	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
97113	Y	$51.36	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
97116	Y	$41.41	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
97124	Y	$42.30	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
97129	Y	$32.27	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
97130	Y	$30.84	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
97139	Y	$17.81	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
97140	Y	$38.20	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
97150	Y	$25.52	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
97151	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2019
97152	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2019
97153	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2019
97154	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2019
97155	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2019
97156	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2019
97157	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2019
97158	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2019
97161	Y	$141.72	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
97162	Y	$141.72	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
97163	Y	$141.72	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
97164	Y	$97.94	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
97165	Y	$143.05	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
97166	Y	$143.05	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
97167	Y	$143.05	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
97168	Y	$98.38	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
97169	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2017
97170	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2017
97171	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2017
97172	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2017
97530	Y	$28.29	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2010
97533	Y	$25.54	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2010
97535	Y	$45.87	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
97537	Y	$26.62	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2010
97542	Y	$27.31	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2010
97545	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
97546	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
97550	Y	$50.55	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2024
97551	Y	$25.20	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2024
97552	Y	$20.70	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2024
97597	Y	$103.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
97598	Y	$103.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
97602	Y	$59.24	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
97605	Y	$98.46	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
97606	Y	$103.89	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
97607	Y	$146.08	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
97608	Y	$225.55	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
97610	Y	$77.67	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
97750	Y	$29.01	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2010
97755	Y	$34.21	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2010
97760	Y	$66.16	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
97761	Y	$58.14	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
97763	Y	$72.32	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
97799	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
97802	Y	$51.14	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
97803	Y	$44.53	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
97804	Y	$23.56	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
97810	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
97811	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
97813	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
97814	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
98000	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2025
98001	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2025
98002	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2025
98003	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2025
98004	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2025
98005	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2025
98006	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2025
98007	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2025
98008	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2025
98009	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2025
98010	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2025
98011	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2025
98012	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2025
98013	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2025
98014	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2025
98015	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2025
98016	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2025
98925	Y	$19.82	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
98926	Y	$19.82	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
98927	Y	$19.82	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
98928	Y	$19.82	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
98929	Y	$19.82	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
98940	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
98941	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
98942	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
98943	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
98960	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
98961	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
98962	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
98966	Y	$18.65	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
98967	Y	$34.63	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
98968	Y	$47.80	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
98970	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2020
98971	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2020
98972	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2020
98975	Y	$121.35	OPPS Price Mcare APC St Ind V	Ambulatory Payment Classificat		1/1/2022
98976	Y	$38.03	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2022
98977	Y	$38.03	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2022
98978	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
98980	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2022
98981	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2022
99000	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
99001	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99002	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
99024	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
99026	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99027	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99050	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
99051	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
99053	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
99056	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
99058	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
99060	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
99070	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
99071	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
99075	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99078	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2014
99080	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2014
99082	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
99091	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
99100	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
99116	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
99135	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
99140	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
99151	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2017
99152	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
99153	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2017
99155	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2017
99156	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2017
99157	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2017
99170	Y	$8.90	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
99172	Y	$131.95	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		11/1/2010
99173	Y	$131.95	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		11/1/2010
99174	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99175	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
99177	Y	$10.00	OPPS NM Medicaid Covered	Not Available		1/1/2018
99183	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
99184	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2015
99188	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		7/1/2019
99190	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
99191	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
99192	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
99195	Y	$78.79	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
99199	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
99202	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2014
99203	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2014
99204	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2014
99205	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2014
99211	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2014
99212	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2014
99213	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2014
99214	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2014
99215	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2014
99221	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
99222	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
99223	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
99231	Y	$71.24	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2025
99232	Y	$113.10	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2025
99233	Y	$170.16	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2025
99234	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
99235	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
99236	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
99238	Y	$115.68	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2025
99239	Y	$163.29	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2025
99242	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99243	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99244	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99245	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99252	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99253	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99254	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99255	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99281	Y	$53.16	OPPS Price Mcare APC St Ind V	Ambulatory Payment Classificat		11/1/2010
99282	Y	$87.85	OPPS Price Mcare APC St Ind V	Ambulatory Payment Classificat		11/1/2010
99283	Y	$140.18	OPPS Price Mcare APC St Ind V	Ambulatory Payment Classificat		11/1/2010
99284	Y	$223.17	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
99285	Y	$329.73	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
99288	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
99291	Y	$495.38	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
99292	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
99304	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
99305	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
99306	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
99307	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
99308	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
99309	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
99310	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
99315	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
99316	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
99341	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
99342	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
99344	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
99345	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
99347	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
99348	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
99349	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
99350	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
99358	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		5/1/2020
99359	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2014
99360	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
99366	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
99367	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
99368	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
99374	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
99375	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99377	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
99378	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99379	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
99380	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
99381	Y	$113.44	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
99382	Y	$113.44	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		11/1/2010
99383	Y	$113.44	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		11/1/2010
99384	Y	$113.44	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		11/1/2010
99385	Y	$113.44	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		11/1/2010
99386	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99387	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99391	Y	$113.44	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		11/1/2010
99392	Y	$113.44	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		11/1/2010
99393	Y	$113.44	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		11/1/2010
99394	Y	$113.44	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		11/1/2010
99395	Y	$113.44	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		11/1/2010
99396	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99397	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99401	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99402	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99403	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99404	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99406	Y	$21.13	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2013
99407	Y	$21.13	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2013
99408	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99409	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99411	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99412	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99415	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016
99416	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016
99417	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2021
99418	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2023
99421	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		3/1/2020
99422	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		3/1/2020
99423	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		3/1/2020
99424	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
99425	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
99426	Y	$76.42	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2022

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
99427	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2022
99429	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99437	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
99439	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2021
99441	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99442	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99443	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99446	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		10/1/2019
99447	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		10/1/2019
99448	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		10/1/2019
99449	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		10/1/2019
99450	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99451	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
99452	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
99453	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2019
99454	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2019
99455	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
99456	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
99457	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
99458	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2020
99459	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2024
99460	Y	$69.68	OPPS Price Mcare APC St Ind V	Ambulatory Payment Classificat		11/1/2010
99461	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
99462	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
99463	Y	$69.68	OPPS Price Mcare APC St Ind V	Ambulatory Payment Classificat		11/1/2010
99464	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
99465	Y	$165.50	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
99466	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
99467	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
99468	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
99469	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
99471	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
99472	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
99473	Y	$22.99	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2020
99474	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
99475	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
99476	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2014
99477	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
99478	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
99479	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
99480	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
99483	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
99484	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
99485	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2014
99486	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2013
99487	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
99489	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2013
99490	Y	$53.70	OPPS Price Mcare APC St Ind V	Ambulatory Payment Classificat		1/1/2015
99491	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
99492	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
99493	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
99494	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
99495	Y	$69.64	OPPS Price Mcare APC St Ind V	Ambulatory Payment Classificat		1/1/2014
99496	Y	$91.65	OPPS Price Mcare APC St Ind V	Ambulatory Payment Classificat		1/1/2014
99497	Y	$54.41	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016
99498	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
99499	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
99500	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99501	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99502	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99503	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99504	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99505	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99506	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99507	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99509	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
99510	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99511	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99512	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99600	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		5/12/2023
99601	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99602	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99605	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99606	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
99607	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A0021	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A0080	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A0090	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A0100	Y	$1.68	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		10/1/2011
A0110	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A0120	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A0130	Y	$1.68	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		10/1/2011
A0140	N	$0.00	OPPS NM Medicaid Special Revw	Ambulatory Payment Classificat		11/1/2010
A0160	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A0170	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A0180	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A0190	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A0200	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A0210	Y	$7.20	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		10/1/2011
A0225	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A0380	Y	$3.40	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		10/1/2011
A0382	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
A0384	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
A0390	Y	$3.40	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		10/1/2011
A0392	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
A0394	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
A0396	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
A0398	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
A0420	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
A0422	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
A0424	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
A0425	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
A0426	Y	$467.99	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A0427	Y	$740.99	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A0428	Y	$389.99	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A0429	Y	$623.99	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A0430	N	$5,290.65	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A0431	N	$6,151.19	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A0432	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
A0433	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
A0434	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2015
A0435	Y	$15.75	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A0436	Y	$41.99	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A0888	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
A0998	N	$0.00	OPPS NM Medicaid Special Revw	Ambulatory Payment Classificat		11/1/2010
A0999	N	$0.00	OPPS NM Medicaid Special Revw	Ambulatory Payment Classificat		11/1/2010
A2001	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2022
A2002	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2022
A2003	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2022
A2004	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2022
A2005	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2022
A2006	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2022
A2007	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2022
A2008	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2022
A2009	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2022
A2010	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2022
A2011	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2022

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
A2012	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2022
A2013	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2022
A2014	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2022
A2015	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2022
A2016	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2022
A2017	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2022
A2018	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2022
A2019	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2023
A2020	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2023
A2021	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2023
A2022	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2023
A2023	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2023
A2024	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2023
A2025	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2023
A2026	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2024
A2027	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
A2028	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
A2029	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
A2030	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2025
A2031	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2025
A2032	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2025
A2033	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2025
A2034	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2025
A2035	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2025
A4100	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2022
A4206	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A4207	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A4208	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A4209	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A4210	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A4211	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A4212	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
A4213	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
A4215	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A4216	N	$0.92	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4217	N	$6.42	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4218	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4220	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4221	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A4222	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A4223	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A4224	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2023
A4225	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2017
A4226	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2020
A4230	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4231	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4232	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A4233	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
A4234	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
A4235	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
A4236	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
A4238	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		4/1/2022
A4239	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2023
A4244	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A4245	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A4246	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A4247	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A4248	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4250	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A4252	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A4253	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A4255	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A4256	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A4257	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
A4258	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
A4259	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A4261	N	$49.45	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2025
A4262	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
A4263	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
A4264	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
A4265	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2023
A4266	N	$36.65	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2025
A4267	N	$0.49	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2025
A4268	N	$2.47	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2025
A4269	N	$3.68	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2025
A4270	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
A4271	Y	$66.07	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4280	N	$7.46	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4281	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A4282	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A4283	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A4284	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A4285	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A4286	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A4287	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2024
A4290	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
A4300	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
A4301	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4305	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4306	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4310	N	$15.81	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4311	N	$20.70	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4312	N	$25.20	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4313	N	$25.88	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
A4314	N	$32.85	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4315	N	$32.85	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4316	N	$33.73	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4320	N	$7.46	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4321	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
A4322	N	$6.18	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4326	N	$15.07	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4327	N	$62.31	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4328	N	$14.58	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4330	N	$8.51	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4331	N	$4.44	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4332	N	$0.23	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4333	N	$3.10	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4334	N	$6.87	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4335	N	$93.86	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4336	N	$2.01	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4337	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016
A4338	N	$21.35	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4340	N	$40.46	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4341	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2023
A4342	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2023
A4344	N	$32.76	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
A4346	N	$27.36	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4349	N	$2.81	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4351	N	$3.71	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4352	N	$7.66	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4353	N	$9.79	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4354	N	$15.12	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4355	N	$10.59	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4356	Y	$63.75	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4357	N	$16.89	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4358	N	$13.58	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4360	N	$0.69	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4361	N	$21.80	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4362	N	$4.12	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4363	Y	$2.81	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		7/1/2023
A4364	N	$6.02	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4366	N	$1.80	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4367	N	$14.88	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4368	N	$0.35	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4369	N	$4.97	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4371	N	$7.47	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4372	N	$5.87	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
A4373	N	$8.76	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4375	N	$23.99	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4376	N	$66.48	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4377	N	$5.99	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4378	N	$42.96	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4379	N	$20.98	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4380	N	$52.16	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4381	N	$6.46	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4382	N	$34.40	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4383	N	$39.38	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4384	N	$13.42	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4385	N	$10.43	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4387	N	$3.14	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4388	N	$6.09	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4389	N	$8.67	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4390	N	$13.41	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4391	N	$9.87	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4392	N	$11.42	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4393	N	$12.63	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4394	N	$5.31	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4395	N	$0.05	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2013

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
A4396	Y	$56.56	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4398	N	$19.31	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4399	Y	$17.14	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4400	N	$68.28	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4402	N	$2.85	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4404	N	$2.34	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4405	Y	$4.77	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4406	Y	$11.72	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4407	N	$17.93	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4408	N	$13.79	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4409	N	$12.71	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4410	N	$18.50	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4411	N	$7.12	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4412	N	$3.78	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4413	N	$7.70	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4414	N	$10.07	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4415	N	$12.27	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4416	N	$3.85	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4417	N	$5.21	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4418	N	$2.53	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4419	N	$2.41	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
A4420	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
A4421	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A4422	N	$0.16	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		7/1/2023
A4423	N	$2.59	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		7/1/2023
A4424	N	$9.74	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4425	N	$7.32	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4426	N	$3.81	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4427	N	$3.90	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4428	N	$9.11	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4429	N	$11.53	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4430	N	$11.90	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4431	N	$8.67	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4432	N	$7.34	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4433	N	$4.69	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4434	N	$5.25	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4435	N	$8.05	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4436	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2022
A4437	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2022
A4438	Y	$2.51	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4450	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2017
A4452	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2017
A4453	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2021
A4455	N	$2.48	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4456	N	$0.50	OPPS NM Fee Sched APC St Ind	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
			A			
A4457	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2024
A4458	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A4459	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
A4461	N	$4.61	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4463	Y	$18.60	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4465	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4467	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2017
A4468	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2024
A4470	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4480	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4481	N	$0.75	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4483	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2014
A4490	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A4495	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A4500	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A4510	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A4520	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A4540	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2024
A4541	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2024
A4542	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2024
A4543	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
A4544	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		10/1/2024
A4545	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		10/1/2024
A4550	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2015
A4553	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2017
A4554	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A4555	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
A4556	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2023
A4557	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A4558	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
A4559	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A4560	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		4/1/2023
A4561	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4562	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4563	Y	$1,656.42	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4564	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		4/1/2024
A4565	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
A4566	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
A4570	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A4575	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A4580	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A4590	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A4593	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		4/1/2024
A4594	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		4/1/2024
A4595	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2022
A4596	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2022
A4600	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
A4601	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
A4602	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2022
A4604	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2014
A4605	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2023
A4606	Y	$46.40	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		1/1/2015
A4608	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2014
A4611	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
A4612	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
A4613	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
A4614	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A4615	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A4616	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A4617	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A4618	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2023
A4619	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
A4620	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A4623	Y	$11.42	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4624	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A4625	Y	$9.68	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4626	N	$6.53	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4627	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A4628	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A4629	N	$9.53	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A4630	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
A4633	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
A4634	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
A4635	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
A4636	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
A4637	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
A4638	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
A4639	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
A4640	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
A4641	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4642	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4648	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
A4649	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4650	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4651	N	$1.50	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		1/1/2014
A4652	N	$50.00	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		1/1/2014
A4653	N	$3.00	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		1/1/2014
A4657	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4660	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4663	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4670	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A4671	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
A4672	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
A4673	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
A4674	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
A4680	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4690	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4706	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4707	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4708	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4709	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4714	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4719	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4720	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4721	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4722	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4723	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4724	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4725	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4726	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4728	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
A4730	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4736	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4737	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4740	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4750	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4755	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4760	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4765	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4766	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4770	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4771	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4772	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4773	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4774	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4802	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
A4860	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4870	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4890	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4911	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4913	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4918	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4927	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4928	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4929	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4930	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4931	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A4932	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A5051	N	$2.88	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A5052	N	$3.05	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A5053	N	$2.05	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A5054	N	$2.51	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A5055	N	$2.94	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A5056	Y	$9.57	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A5057	Y	$13.41	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A5061	N	$4.94	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A5062	N	$4.58	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A5063	N	$5.54	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A5071	N	$8.40	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A5072	N	$4.94	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A5073	N	$4.42	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
A5081	N	$3.94	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A5082	N	$16.63	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A5083	N	$0.90	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A5093	N	$2.55	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A5102	Y	$31.53	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A5105	N	$53.43	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A5112	N	$45.23	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A5113	Y	$5.59	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A5114	Y	$12.50	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A5120	Y	$0.42	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A5121	N	$10.41	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A5122	N	$17.94	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A5126	N	$1.56	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A5131	N	$22.15	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A5200	N	$23.15	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A5500	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A5501	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A5503	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A5504	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2014
A5505	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A5506	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A5507	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A5508	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A5510	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
A5512	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A5513	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A5514	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2023
A6000	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A6010	N	$43.27	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6011	N	$3.19	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6021	N	$29.38	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6022	N	$29.38	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6023	N	$265.90	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6024	N	$8.64	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6025	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A6154	N	$20.09	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6196	N	$15.06	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6197	N	$22.98	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6198	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2014
A6199	N	$7.37	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6203	N	$6.90	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6204	N	$8.69	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6205	N	$10.00	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		1/1/2014
A6206	N	$7.78	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6207	N	$10.26	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6208	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2014
A6209	N	$15.30	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6210	N	$40.79	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
A6211	N	$41.04	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6212	N	$19.88	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6213	N	$10.28	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6214	N	$14.39	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6215	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2014
A6216	N	$0.05	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		7/1/2023
A6217	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2014
A6218	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2014
A6219	N	$1.33	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		7/1/2023
A6220	N	$3.62	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6221	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2014
A6222	N	$4.37	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6223	N	$3.39	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6224	N	$5.03	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6228	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2014
A6229	N	$5.03	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6230	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2014
A6231	N	$6.55	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6232	N	$9.59	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6233	N	$26.79	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6234	N	$13.41	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6235	N	$34.43	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6236	N	$38.07	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
A6237	N	$11.05	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6238	N	$31.86	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6239	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2014
A6240	N	$25.07	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6241	N	$3.59	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6242	N	$12.39	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6243	N	$17.22	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6244	N	$54.89	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6245	N	$10.16	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6246	N	$13.88	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6247	N	$33.23	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6248	Y	$22.70	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6250	N	$15.00	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		1/1/2014
A6251	N	$2.78	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6252	N	$6.66	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6253	N	$8.85	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6254	N	$2.45	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6255	N	$4.25	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6256	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2014
A6257	N	$3.14	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6258	N	$8.82	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6259	N	$22.38	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
A6260	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2014
A6261	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2014
A6262	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2014
A6266	N	$3.92	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6402	N	$0.23	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6403	N	$0.58	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		7/1/2023
A6404	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2014
A6407	N	$3.83	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6410	N	$0.52	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6411	N	$0.32	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6412	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
A6413	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A6441	N	$0.95	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		7/1/2023
A6442	N	$0.23	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6443	N	$0.57	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6444	N	$1.14	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6445	N	$0.44	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		7/1/2023
A6446	N	$0.80	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6447	N	$0.95	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		7/1/2023
A6448	N	$1.61	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6449	N	$3.59	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6450	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2017
A6451	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2017
A6452	N	$8.24	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
A6453	N	$0.88	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		7/1/2023
A6454	N	$1.10	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6455	N	$1.95	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6456	N	$1.75	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		7/1/2023
A6457	N	$2.33	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6460	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2019
A6461	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2019
A6501	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2015
A6502	Y	$0.00	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		1/1/2018
A6503	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2015
A6504	Y	$0.00	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		1/1/2018
A6505	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2015
A6506	Y	$0.00	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		1/1/2018
A6507	Y	$0.00	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		1/1/2018
A6508	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2015
A6509	Y	$0.00	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		1/1/2018
A6510	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2015
A6511	Y	$0.00	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		1/1/2018
A6512	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2014
A6513	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2014
A6515	Y	$200.00	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		4/1/2025
A6516	Y	$150.00	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		4/1/2025
A6517	Y	$200.00	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		4/1/2025
A6518	Y	$300.00	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		4/1/2025
A6519	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		4/1/2025
A6520	N	$123.13	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6521	N	$488.56	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6522	N	$299.18	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
A6523	N	$709.85	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6524	N	$373.26	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6525	N	$753.55	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6526	N	$674.84	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6527	N	$1,240.94	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6528	N	$648.90	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6529	N	$1,025.37	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6530	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2025
A6531	N	$80.83	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6532	N	$71.94	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6533	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2025
A6534	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2025
A6535	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2025
A6536	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2025
A6537	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2025
A6538	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2025
A6539	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2025
A6540	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2025
A6541	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2025
A6544	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A6545	N	$159.17	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6549	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A6550	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A6552	N	$56.45	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6553	N	$220.43	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6554	N	$77.62	OPPS NM Fee Sched APC St Ind	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
			A			
A6555	N	$220.43	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6556	N	$302.09	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6557	N	$302.09	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6558	N	$311.75	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6559	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2024
A6560	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2024
A6561	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2024
A6562	N	$988.68	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6563	N	$988.68	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6564	N	$1,065.02	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6565	N	$170.84	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6566	N	$248.05	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6567	N	$779.38	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6568	N	$161.89	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6569	N	$921.85	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6570	N	$110.30	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6571	N	$662.94	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6572	N	$102.35	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6573	N	$242.87	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6574	N	$309.63	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6575	N	$100.34	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
A6576	N	$190.03	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6577	N	$157.28	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6578	N	$77.46	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6579	N	$305.02	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6580	N	$302.78	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6581	N	$71.07	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6582	N	$47.40	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6583	N	$155.92	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6584	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2024
A6585	N	$184.62	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6586	N	$543.90	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6587	N	$71.25	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6588	N	$237.46	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6589	N	$93.74	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6590	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2023
A6591	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2023
A6593	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2024
A6594	N	$34.13	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6595	N	$33.57	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6596	N	$0.18	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6597	N	$1.51	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6598	N	$0.73	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
A6599	N	$1.66	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6600	N	$2.99	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6601	N	$3.36	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6602	N	$4.90	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6603	N	$2.30	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6604	N	$1.34	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6605	N	$1.53	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6606	N	$4.55	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6607	N	$1.22	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6608	N	$5.07	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6609	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2024
A6610	N	$220.43	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A6611	Y	$200.00	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		4/1/2025
A7000	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A7001	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A7002	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2023
A7003	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A7004	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A7005	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2014
A7006	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A7007	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A7008	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A7009	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2023
A7010	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A7012	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A7013	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
A7014	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A7015	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A7016	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A7017	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A7018	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A7020	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2011
A7021	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		10/1/2024
A7023	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
A7025	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A7026	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A7027	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A7028	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A7029	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A7030	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2014
A7031	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2014
A7032	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A7033	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A7034	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2014
A7035	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A7036	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A7037	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A7038	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A7039	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A7040	N	$56.82	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A7041	N	$106.79	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A7044	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2014
A7045	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2014
A7046	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2014
A7047	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
A7048	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016
A7049	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		4/1/2023
A7501	N	$146.73	OPPS NM Fee Sched APC St Ind	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
			A			
A7502	Y	$69.75	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A7503	Y	$15.85	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A7504	Y	$0.95	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		7/1/2023
A7505	N	$6.55	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A7506	Y	$0.45	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A7507	Y	$3.49	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A7508	Y	$4.01	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A7509	N	$2.88	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A7520	N	$97.17	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A7521	N	$96.29	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A7522	Y	$63.10	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A7523	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
A7524	Y	$108.17	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A7525	N	$4.22	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A7526	Y	$6.95	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A7527	N	$5.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
A8000	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A8001	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A8002	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A8003	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A8004	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A9150	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
A9152	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
A9153	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A9154	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		4/1/2025
A9155	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
A9156	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2023
A9180	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A9268	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		10/1/2023
A9269	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		10/1/2023
A9270	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A9272	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
A9273	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
A9274	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A9275	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A9276	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A9277	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A9278	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A9279	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A9280	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A9281	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A9282	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A9283	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A9284	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A9285	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2017
A9286	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2017
A9291	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		4/1/2022
A9292	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		10/1/2023
A9293	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		4/1/2024
A9300	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
A9500	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A9501	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A9502	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A9503	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A9504	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A9505	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
A9506	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		7/1/2024
A9507	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A9508	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
A9509	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A9510	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A9512	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
A9513	N	$266.85	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
A9515	N	$5,700.00	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2017
A9516	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
A9517	N	$22.26	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
A9520	N	$240.00	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2015
A9521	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A9524	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
A9526	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A9527	N	$37.92	OPPS Price Mcare APC St Ind U	Ambulatory Payment Classificat		1/1/2016
A9528	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A9529	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A9530	N	$13.26	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2016
A9531	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016
A9532	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A9536	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A9537	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A9538	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A9539	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A9540	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A9541	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A9542	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A9543	N	$36,447.53	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		10/1/2011
A9546	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A9547	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
A9548	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
A9550	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A9551	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
A9552	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A9553	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A9554	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A9555	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A9556	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
A9557	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A9558	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
A9559	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A9560	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A9561	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A9562	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A9563	N	$162.87	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		10/1/2011
A9564	N	$154.15	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2015
A9566	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A9567	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A9568	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A9569	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A9570	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A9571	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A9572	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A9573	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2023
A9574	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		4/1/2022
A9575	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
A9576	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A9577	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A9578	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A9579	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
A9580	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A9581	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2011
A9582	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2012
A9583	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
A9584	N	$1,905.88	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2015
A9585	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
A9586	N	$2,756.00	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2015
A9587	N	$66.74	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2017
A9588	N	$389.55	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2017
A9589	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2019
A9590	N	$320.12	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2020
A9591	N	$0.77	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2021
A9592	N	$917.98	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		4/1/2021
A9593	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2021
A9594	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2021
A9595	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2022
A9596	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		7/1/2022
A9597	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2017
A9598	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2017
A9600	N	$963.96	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2015
A9601	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2022
A9602	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2022
A9603	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2023
A9604	N	$7,665.00	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		10/1/2011
A9606	N	$120.65	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2015
A9607	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2022
A9608	N	$632.69	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2024
A9609	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2024
A9610	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2024
A9611	Y	$515.00	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		4/1/2025
A9615	N	$37.51	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
A9697	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2023
A9698	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A9699	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
A9700	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
A9800	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		10/1/2022
A9900	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
A9901	N	$3.94	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		11/1/2010
A9999	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
B4034	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
B4035	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
B4036	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
B4081	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
B4082	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
B4083	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
B4087	N	$48.08	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
B4088	N	$56.45	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
B4100	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
B4102	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
B4103	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
B4104	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
B4105	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2019
B4148	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		10/1/2023
B4149	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
B4150	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
B4152	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
B4153	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
B4154	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
B4155	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
B4157	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
B4158	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
B4159	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
B4160	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
B4161	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
B4162	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
B4164	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
B4168	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
B4172	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
B4176	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
B4178	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
B4180	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
B4185	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
B4187	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2023
B4189	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
B4193	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2014
B4197	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2014
B4199	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
B4216	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
B4220	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
B4222	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
B4224	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
B5000	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2014
B5100	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2014
B5200	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
B9002	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
B9004	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
B9006	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
B9998	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
B9999	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
C1052	Y	$0.00	OPPS Price Mcare APC St Ind H	Ambulatory Payment Classificat		1/1/2021
C1062	Y	$0.00	OPPS Price Mcare APC St Ind H	Ambulatory Payment Classificat		1/1/2021
C1600	N	$0.00	OPPS Price Mcare APC St Ind H	Ambulatory Payment Classificat		1/1/2024
C1601	N	$0.00	OPPS Price Mcare APC St Ind H	Ambulatory Payment Classificat		1/1/2024
C1602	N	$0.00	OPPS Price Mcare APC St Ind H	Ambulatory Payment Classificat		1/1/2024
C1603	N	$0.00	OPPS Price Mcare APC St Ind H	Ambulatory Payment Classificat		1/1/2024
C1604	N	$0.00	OPPS Price Mcare APC St Ind H	Ambulatory Payment Classificat		1/1/2024
C1605	N	$0.00	OPPS Price Mcare APC St Ind H	Ambulatory Payment Classificat		7/1/2024
C1606	N	$0.00	OPPS Price Mcare APC St Ind H	Ambulatory Payment Classificat		7/1/2024
C1713	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C1714	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C1715	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016
C1716	Y	$42.85	OPPS Price Mcare APC St Ind U	Ambulatory Payment Classificat		1/1/2015
C1717	Y	$231.38	OPPS Price Mcare APC St Ind U	Ambulatory Payment Classificat		1/1/2015
C1719	Y	$64.02	OPPS Price Mcare APC St Ind U	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
C1721	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
C1722	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
C1724	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C1725	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C1726	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C1727	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C1728	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C1729	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C1730	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C1731	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
C1732	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
C1733	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
C1734	Y	$0.00	OPPS Price Mcare APC St Ind H	Ambulatory Payment Classificat		1/1/2020
C1735	Y	$0.00	OPPS Price Mcare APC St Ind H	Ambulatory Payment Classificat		1/1/2025
C1736	Y	$0.00	OPPS Price Mcare APC St Ind H	Ambulatory Payment Classificat		1/1/2025
C1737	Y	$0.00	OPPS Price Mcare APC St Ind H	Ambulatory Payment Classificat		1/1/2025
C1738	Y	$0.00	OPPS Price Mcare APC St Ind H	Ambulatory Payment Classificat		1/1/2025
C1739	Y	$0.00	OPPS Price Mcare APC St Ind H	Ambulatory Payment Classificat		1/1/2025
C1747	Y	$0.00	OPPS Price Mcare APC St Ind H	Ambulatory Payment Classificat		1/1/2023
C1748	Y	$0.00	OPPS Price Mcare APC St Ind H	Ambulatory Payment Classificat		7/1/2020
C1749	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
C1750	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
C1751	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
C1752	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
C1753	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
C1754	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
C1755	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
C1756	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
C1757	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C1758	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
C1759	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
C1760	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C1761	Y	$0.00	OPPS Price Mcare APC St Ind H	Ambulatory Payment Classificat		7/1/2021

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
C1762	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C1763	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C1764	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
C1765	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C1766	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C1767	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
C1768	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
C1769	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C1770	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
C1771	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
C1772	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
C1773	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
C1776	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C1777	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
C1778	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C1779	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
C1780	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
C1781	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C1782	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
C1783	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
C1784	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
C1785	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
C1786	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
C1787	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
C1788	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
C1789	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
C1813	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
C1814	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
C1815	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
C1816	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
C1817	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
C1818	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
C1819	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
C1820	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
C1821	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C1822	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2016
C1823	Y	$0.00	OPPS Price Mcare APC St Ind H	Ambulatory Payment Classificat		1/1/2019
C1824	Y	$0.00	OPPS Price Mcare APC St Ind H	Ambulatory Payment Classificat		1/1/2020
C1825	Y	$0.00	OPPS Price Mcare APC St Ind H	Ambulatory Payment Classificat		1/1/2021
C1826	Y	$0.00	OPPS Price Mcare APC St Ind H	Ambulatory Payment Classificat		1/1/2023
C1827	Y	$0.00	OPPS Price Mcare APC St Ind H	Ambulatory Payment Classificat		1/1/2023
C1830	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2015
C1831	Y	$0.00	OPPS Price Mcare APC St Ind H	Ambulatory Payment Classificat		10/1/2021
C1832	Y	$0.00	OPPS Price Mcare APC St Ind H	Ambulatory Payment Classificat		1/1/2022
C1833	Y	$0.00	OPPS Price Mcare APC St Ind H	Ambulatory Payment Classificat		1/1/2022
C1839	Y	$0.00	OPPS Price Mcare APC St Ind H	Ambulatory Payment Classificat		1/1/2020
C1840	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2015
C1874	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C1875	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C1876	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C1877	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C1878	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
C1880	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
C1881	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
C1882	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
C1883	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C1884	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C1885	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C1886	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2014
C1887	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C1888	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
C1889	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2017
C1890	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2019
C1891	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
C1892	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C1893	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
C1894	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C1895	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
C1896	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
C1897	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
C1898	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
C1899	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
C1900	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
C1982	Y	$0.00	OPPS Price Mcare APC St Ind H	Ambulatory Payment Classificat		1/1/2020
C2596	Y	$0.00	OPPS Price Mcare APC St Ind H	Ambulatory Payment Classificat		1/1/2020
C2613	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		7/1/2016
C2614	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
C2615	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
C2616	Y	$15,779.35	OPPS Price Mcare APC St Ind U	Ambulatory Payment Classificat		11/1/2010
C2617	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C2618	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C2619	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
C2620	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
C2621	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
C2622	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
C2623	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2021
C2624	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2015
C2625	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C2626	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
C2627	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
C2628	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C2629	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C2630	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C2631	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
C2634	Y	$59.80	OPPS Price Mcare APC St Ind U	Ambulatory Payment Classificat		1/1/2015
C2635	Y	$28.59	OPPS Price Mcare APC St Ind U	Ambulatory Payment Classificat		1/1/2015
C2636	Y	$19.37	OPPS Price Mcare APC St Ind U	Ambulatory Payment Classificat		1/1/2015
C2637	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
C2638	Y	$42.48	OPPS Price Mcare APC St Ind U	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
C2639	Y	$36.18	OPPS Price Mcare APC St Ind U	Ambulatory Payment Classificat		1/1/2015
C2640	Y	$60.36	OPPS Price Mcare APC St Ind U	Ambulatory Payment Classificat		1/1/2015
C2641	Y	$57.12	OPPS Price Mcare APC St Ind U	Ambulatory Payment Classificat		1/1/2015
C2642	Y	$109.84	OPPS Price Mcare APC St Ind U	Ambulatory Payment Classificat		1/1/2015
C2643	Y	$66.09	OPPS Price Mcare APC St Ind U	Ambulatory Payment Classificat		1/1/2015
C2644	Y	$18.97	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2017
C2645	Y	$4.69	OPPS Price Mcare APC St Ind U	Ambulatory Payment Classificat		1/1/2016
C2698	Y	$42.48	OPPS Price Mcare APC St Ind U	Ambulatory Payment Classificat		11/1/2010
C2699	Y	$28.59	OPPS Price Mcare APC St Ind U	Ambulatory Payment Classificat		11/1/2010
C5271	Y	$379.75	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
C5272	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C5273	Y	$1,271.83	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
C5274	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C5275	Y	$379.75	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
C5276	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C5277	Y	$379.75	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
C5278	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C7500	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7501	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7502	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7503	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7504	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7505	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7506	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7507	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7508	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7509	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7510	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7511	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7512	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7513	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7514	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
C7515	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7516	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7517	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7518	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7519	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7520	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7521	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7522	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7523	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7524	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7525	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7526	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7527	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7528	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7529	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7530	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7531	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7532	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7533	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7534	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7535	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7537	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7538	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7539	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7540	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7541	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7542	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7543	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7544	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7545	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7546	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7547	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7548	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
C7549	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7550	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7551	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7552	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7553	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7554	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7555	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
C7556	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2024
C7557	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2024
C7558	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2024
C7560	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2024
C7562	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2025
C7563	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2025
C7564	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2025
C7565	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2025
C7900	Y	$29.68	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2023
C7901	Y	$75.85	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2023
C7902	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2023
C7903	Y	$27.34	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2024
C8000	Y	$0.00	OPPS Price Mcare APC St Ind H	Ambulatory Payment Classificat		10/1/2024
C8001	Y	$0.00	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2025
C8002	Y	$7,250.50	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2025
C8003	Y	$18,390.05	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2025
C8004	Y	$11,340.57	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		4/1/2025
C8005	Y	$3,750.50	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		4/1/2025
C8900	Y	$423.99	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
C8901	Y	$349.53	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
C8902	Y	$535.42	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
C8903	Y	$423.99	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
C8905	Y	$535.42	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
C8906	Y	$423.99	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
C8908	Y	$535.42	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
C8909	Y	$423.99	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
C8910	Y	$349.53	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
C8911	Y	$535.42	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
C8912	Y	$423.99	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2014
C8913	Y	$349.53	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2014
C8914	Y	$535.42	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2014
C8918	Y	$423.99	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
C8919	Y	$349.53	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
C8920	Y	$535.42	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
C8921	Y	$651.17	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
C8922	Y	$651.17	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
C8923	Y	$651.17	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
C8924	Y	$651.17	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
C8925	Y	$651.17	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
C8926	Y	$651.17	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
C8927	Y	$651.17	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
C8928	Y	$651.17	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
C8929	Y	$651.17	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
C8930	Y	$651.17	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
C8931	Y	$423.99	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2014
C8932	Y	$349.53	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2014
C8933	Y	$535.42	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2014
C8934	Y	$423.99	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2014
C8935	Y	$349.53	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2014
C8936	Y	$535.42	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2014
C8937	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2019
C8957	Y	$219.96	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
C9046	Y	$1.62	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		4/1/2019
C9047	Y	$683.55	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		7/1/2019
C9067	Y	$8.64	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		10/1/2020
C9088	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2022
C9089	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2022
C9090	Y	$31.80	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		4/1/2022
C9091	Y	$101.58	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		4/1/2022

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
C9092	Y	$42.49	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		4/1/2022
C9093	Y	$82.40	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		4/1/2022
C9094	Y	$16.86	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		7/1/2022
C9095	Y	$193.23	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		7/1/2022
C9096	Y	$0.78	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		7/1/2022
C9097	Y	$37.60	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		7/1/2022
C9098	Y	$478,950.00	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		7/1/2022
C9101	Y	$0.39	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		10/1/2022
C9143	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2023
C9144	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2023
C9145	Y	$1.87	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		4/1/2023
C9150	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2023
C9169	N	$92.19	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		10/1/2024
C9170	N	$1,545.00	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		10/1/2024
C9171	N	$37.51	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		10/1/2024
C9172	N	$3,605,000.00	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		10/1/2024
C9173	N	$0.54	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
C9248	Y	$2.68	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2014
C9250	Y	$136.58	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2012
C9254	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C9257	Y	$1.51	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2015
C9285	Y	$13.57	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2015
C9290	Y	$1.14	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2015
C9293	Y	$223.85	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2015
C9352	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C9353	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C9354	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C9355	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C9356	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C9358	Y	$11.01	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2015
C9359	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C9360	Y	$11.33	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2015
C9361	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2012

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
C9362	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C9363	Y	$19.91	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2015
C9364	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
C9367	Y	$4.35	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2013
C9399	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2015
C9460	Y	$15.88	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2016
C9462	Y	$0.44	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		4/1/2018
C9482	Y	$9.42	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		10/1/2016
C9488	Y	$29.78	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		4/1/2017
C9507	Y	$750.50	OPPS Price Mcare APC St Ind R	Ambulatory Payment Classificat		4/1/2022
C9600	Y	$7,337.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
C9601	Y	$7,337.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
C9602	Y	$7,337.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
C9603	Y	$7,337.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
C9604	Y	$7,337.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
C9605	Y	$7,337.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
C9606	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		1/1/2019
C9607	Y	$7,337.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
C9608	Y	$7,337.86	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
C9610	Y	$0.00	OPPS Price Mcare APC St Ind H	Ambulatory Payment Classificat		1/1/2025
C9725	Y	$361.63	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
C9726	Y	$1,668.41	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2014
C9727	Y	$513.61	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
C9728	Y	$1,038.12	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
C9733	Y	$154.87	OPPS Price Mcare APC St Ind Q2	Ambulatory Payment Classificat		4/1/2012
C9734	Y	$2,395.59	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2016
C9738	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2018
C9739	Y	$2,007.32	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		4/1/2014
C9740	Y	$4,750.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		4/1/2014
C9751	Y	$8,250.50	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2019
C9756	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2019
C9757	Y	$11,900.71	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2020
C9758	Y	$12,500.50	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2020

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
C9759	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2020
C9760	Y	$12,500.50	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		7/1/2020
C9761	Y	$4,231.62	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		10/1/2020
C9762	Y	$481.58	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		7/1/2020
C9763	Y	$481.58	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		7/1/2020
C9764	Y	$4,953.91	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		7/1/2020
C9765	Y	$9,908.48	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		7/1/2020
C9766	Y	$9,908.48	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		7/1/2020
C9767	Y	$15,939.97	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		7/1/2020
C9768	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2020
C9769	Y	$4,231.62	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		10/1/2020
C9772	Y	$10,042.94	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2021
C9773	Y	$16,064.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2021
C9774	Y	$16,064.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2021
C9775	Y	$16,064.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2021
C9776	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2021
C9777	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2021
C9778	Y	$2,623.21	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		7/1/2021
C9779	Y	$2,443.39	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		10/1/2021
C9780	Y	$8,250.50	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		10/1/2021
C9781	Y	$6,397.05	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		4/1/2022
C9782	Y	$9,750.50	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		4/1/2022
C9783	Y	$10,258.49	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		4/1/2022
C9784	Y	$9,087.30	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		7/1/2023
C9785	Y	$9,087.30	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		7/1/2023
C9786	Y	$99.81	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		7/1/2023
C9789	Y	$2,250.50	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		10/1/2023
C9791	Y	$1,250.50	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		10/1/2023
C9792	Y	$9,750.50	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		10/1/2023
C9793	Y	$996.18	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2024
C9794	Y	$1,950.50	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2024
C9795	Y	$3,750.50	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2024
C9796	Y	$2,675.24	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		4/1/2024

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
C9797	Y	$16,707.31	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		4/1/2024
C9804	Y	$0.00	OPPS Price Mcare APC St Ind H	Ambulatory Payment Classificat		1/1/2025
C9806	Y	$0.00	OPPS Price Mcare APC St Ind H	Ambulatory Payment Classificat		1/1/2025
C9807	Y	$0.00	OPPS Price Mcare APC St Ind H	Ambulatory Payment Classificat		1/1/2025
C9808	Y	$0.00	OPPS Price Mcare APC St Ind H	Ambulatory Payment Classificat		1/1/2025
C9809	Y	$0.00	OPPS Price Mcare APC St Ind H	Ambulatory Payment Classificat		1/1/2025
C9898	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
C9899	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2016
C9901	Y	$9,807.76	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		7/1/2024
D0120	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D0140	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D0145	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D0150	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D0160	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D0170	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D0171	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
D0180	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D0190	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2013
D0191	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2013
D0210	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D0220	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D0230	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D0240	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D0250	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D0251	Y	$60.80	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016
D0270	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D0272	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D0273	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D0274	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D0277	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D0310	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D0320	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D0321	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
D0322	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D0330	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D0340	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D0350	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D0364	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D0365	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D0366	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D0367	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D0368	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D0369	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D0370	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D0371	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D0372	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2023
D0373	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2023
D0374	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2023
D0380	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D0381	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D0382	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D0383	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D0384	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D0385	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D0386	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D0387	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2023
D0388	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2023
D0389	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2023
D0391	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D0393	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2014
D0394	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2014
D0395	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2014
D0396	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2024
D0411	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
D0412	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2019
D0414	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2017

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
D0415	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D0416	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D0417	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D0418	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D0419	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
D0422	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2016
D0423	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2016
D0425	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D0431	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D0460	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D0470	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D0472	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D0473	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D0474	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D0475	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D0476	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D0477	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D0478	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D0479	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D0480	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D0481	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D0482	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D0483	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D0484	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D0485	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D0486	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D0502	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D0600	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2017
D0601	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2014
D0602	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2014
D0603	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2014
D0604	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2021
D0605	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2021

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
D0701	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2021
D0702	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2021
D0703	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2021
D0705	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2021
D0706	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2021
D0707	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2021
D0708	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2021
D0709	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2021
D0801	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
D0802	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
D0803	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
D0804	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
D0999	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D1110	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D1120	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D1206	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		7/1/2019
D1208	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D1301	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2024
D1310	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D1320	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D1321	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2021
D1330	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D1351	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D1352	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2011
D1353	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
D1354	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2016
D1355	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2021
D1510	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D1516	Y	$230.00	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2019
D1517	Y	$230.00	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2019
D1520	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D1526	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2019
D1527	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2019

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
D1551	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2020
D1552	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2020
D1553	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2020
D1556	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
D1557	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
D1558	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
D1575	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2017
D1708	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2022
D1709	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2022
D1710	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2022
D1711	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2022
D1712	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2022
D1713	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2022
D1714	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2022
D1781	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
D1782	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
D1783	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
D1999	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2014
D2140	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D2150	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D2160	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D2161	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D2330	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D2331	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D2332	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D2335	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D2390	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D2391	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D2392	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D2393	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D2394	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D2410	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D2420	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
D2430	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D2510	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D2520	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D2530	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D2542	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D2543	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D2544	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D2610	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D2620	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D2630	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D2642	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D2643	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D2644	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D2650	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D2651	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D2652	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D2662	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D2663	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D2664	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D2710	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D2712	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D2720	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D2721	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D2722	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D2740	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D2750	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D2751	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D2752	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D2753	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
D2780	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D2781	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D2782	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D2783	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
D2790	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D2791	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D2792	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D2794	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D2799	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D2910	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D2915	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D2920	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D2921	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2014
D2928	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2021
D2929	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D2930	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D2931	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D2932	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D2933	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D2934	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D2940	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D2941	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2014
D2949	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2014
D2950	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D2951	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D2952	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D2953	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D2954	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D2955	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D2956	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2025
D2957	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D2960	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D2961	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D2962	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D2971	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D2975	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D2976	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2024

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
D2980	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D2981	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2013
D2982	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2013
D2983	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2013
D2989	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2024
D2990	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2013
D2991	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2024
D2999	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D3110	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D3120	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D3220	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D3221	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D3222	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D3230	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D3240	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D3310	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D3320	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D3330	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D3331	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D3332	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D3333	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D3346	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D3347	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D3348	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D3351	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D3352	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D3353	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D3355	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2014
D3356	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2014
D3357	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2014
D3410	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D3421	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D3425	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
D3426	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D3428	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2014
D3429	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2014
D3430	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D3431	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2014
D3432	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2014
D3450	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D3460	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D3470	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D3471	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2021
D3472	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2021
D3473	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2021
D3501	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2021
D3502	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2021
D3503	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2021
D3910	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D3911	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2022
D3920	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D3921	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2022
D3950	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D3999	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D4210	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D4211	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D4212	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2013
D4230	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D4231	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D4240	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D4241	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D4245	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D4249	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D4260	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D4261	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D4263	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
D4264	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D4265	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D4266	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D4267	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D4268	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D4270	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D4273	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D4274	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D4275	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D4276	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D4277	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D4278	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D4283	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2016
D4285	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2016
D4286	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2023
D4322	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2022
D4323	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2022
D4341	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D4342	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D4346	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2017
D4355	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D4381	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D4910	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D4920	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D4921	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2014
D4999	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5110	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5120	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5130	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5140	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5211	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5212	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5213	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
D5214	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5221	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2016
D5222	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2016
D5223	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2016
D5224	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2016
D5225	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5226	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5227	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2022
D5228	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2022
D5282	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2019
D5283	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2019
D5284	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
D5286	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
D5410	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5411	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5421	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5422	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5511	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
D5512	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
D5520	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5611	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
D5612	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
D5621	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
D5622	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
D5630	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5640	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5650	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5660	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5670	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5671	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5710	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5711	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5720	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
D5721	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5725	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2022
D5730	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5731	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5740	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5741	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5750	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5751	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5760	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5761	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5765	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2022
D5810	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5811	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5820	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5821	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5850	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5851	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5862	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5863	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
D5864	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
D5865	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
D5866	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
D5867	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5875	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5876	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2019
D5899	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5911	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5912	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5913	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5914	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5915	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5916	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5919	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
D5922	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5923	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5924	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5925	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5926	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5927	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5928	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5929	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5931	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5932	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5933	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5934	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5935	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5936	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5937	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5951	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5952	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5953	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5954	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5955	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5958	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5959	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5960	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5982	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5983	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5984	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5985	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5986	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5987	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5988	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5991	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D5992	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2011
D5993	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2011

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
D5995	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2021
D5996	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2021
D5999	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6010	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6011	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2014
D6012	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6013	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2014
D6040	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6050	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6051	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
D6055	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6056	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6057	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6058	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6059	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6060	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6061	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6062	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6063	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6064	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6065	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6066	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6067	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6068	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6069	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6070	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6071	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6072	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6073	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6074	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6075	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6076	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6077	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
D6080	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6081	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2017
D6082	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
D6083	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
D6084	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
D6085	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2017
D6086	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
D6087	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
D6088	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
D6089	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2024
D6090	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6091	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6092	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6093	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6094	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6095	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6096	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
D6097	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
D6098	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
D6099	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
D6100	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6101	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
D6102	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
D6103	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
D6104	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
D6105	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
D6106	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
D6107	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
D6110	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
D6111	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
D6112	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
D6113	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
D6114	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
D6115	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
D6116	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
D6117	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
D6118	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
D6119	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
D6120	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
D6121	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
D6122	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
D6123	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
D6180	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2025
D6190	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6191	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2021
D6192	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2021
D6193	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2025
D6194	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6195	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
D6197	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2023
D6198	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2022
D6199	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6205	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6210	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6211	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6212	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6214	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6240	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6241	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6242	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6243	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
D6245	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6250	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6251	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6252	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6253	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
D6545	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6548	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6549	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
D6600	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6601	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6602	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6603	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6604	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6605	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6606	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6607	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6608	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6609	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6610	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6611	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6612	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6613	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6614	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6615	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6624	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6634	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6710	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6720	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6721	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6722	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6740	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6750	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6751	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6752	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6753	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
D6780	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6781	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6782	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
D6783	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6784	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
D6790	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6791	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6792	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6793	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6794	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6920	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6930	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6940	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6950	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6980	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6985	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D6999	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7111	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7140	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7210	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7220	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7230	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7240	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7241	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7250	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7251	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2011
D7252	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2025
D7259	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2025
D7260	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7261	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7270	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7272	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7280	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7282	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7283	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7284	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2024

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
D7285	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7286	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7287	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7288	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7290	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7291	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7292	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7293	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7294	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7295	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2011
D7298	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2022
D7299	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2022
D7300	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2022
D7310	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7311	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7320	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7321	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7340	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7350	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7410	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7411	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7412	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7413	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7414	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7415	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7440	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7441	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7450	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7451	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7460	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7461	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7465	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7471	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
D7472	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7473	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7485	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7490	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7509	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2023
D7510	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7511	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7520	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7521	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7530	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7540	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7550	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7560	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7610	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7620	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7630	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7640	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7650	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7660	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7670	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7671	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7680	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7710	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7720	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7730	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7740	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7750	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7760	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7770	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7771	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7780	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7810	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7820	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
D7830	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7840	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7850	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7852	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7854	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7856	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7858	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7860	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7865	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7870	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7871	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7872	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7873	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7874	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7875	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7876	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7877	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7880	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7881	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2016
D7899	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7910	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7911	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7912	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7920	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7921	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
D7922	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
D7939	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2024
D7940	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7941	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7943	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7944	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7945	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7946	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
D7947	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7948	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7949	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7950	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7951	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7952	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
D7953	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7955	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7956	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
D7957	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
D7961	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2021
D7962	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2021
D7963	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7970	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7971	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7972	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7979	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
D7980	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7981	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7982	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7983	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7990	Y	$230.00	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		12/1/2015
D7991	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7993	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2021
D7994	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2021
D7995	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7996	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7997	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7998	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D7999	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D8010	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D8020	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D8030	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
D8040	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D8070	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D8080	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D8090	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D8091	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2025
D8210	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D8220	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D8660	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D8670	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D8671	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2025
D8680	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D8681	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2016
D8695	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
D8696	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
D8697	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
D8698	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
D8699	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
D8701	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
D8702	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
D8703	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
D8704	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
D8999	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D9110	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D9120	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D9130	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2019
D9210	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D9211	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D9212	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D9215	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D9219	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
D9222	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
D9223	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2016
D9230	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
D9239	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
D9243	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2016
D9248	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D9310	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D9311	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2017
D9410	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D9420	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D9430	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D9440	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D9450	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D9610	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D9612	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D9613	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2019
D9630	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D9910	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D9911	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D9912	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2022
D9913	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2025
D9914	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2025
D9920	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D9930	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D9932	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2016
D9933	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2016
D9934	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2016
D9935	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2016
D9938	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2024
D9939	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2024
D9941	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D9942	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D9943	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2016
D9944	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2019
D9945	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2019
D9946	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2019

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
D9947	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2022
D9948	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2022
D9949	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2022
D9950	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D9951	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D9952	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D9953	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
D9954	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2024
D9955	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2024
D9956	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2024
D9957	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2024
D9959	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2025
D9961	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2019
D9970	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D9971	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D9972	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D9973	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D9974	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
D9975	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
D9985	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2014
D9986	Y	$0.00	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2015
D9987	Y	$0.00	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2015
D9990	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2019
D9991	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2017
D9992	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2017
D9993	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2017
D9994	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2017
D9996	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
D9997	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
D9999	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
E0100	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0105	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0110	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
E0111	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0112	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0113	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0114	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0116	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0117	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0118	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
E0130	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0135	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0140	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0141	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0143	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0144	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0147	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0148	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0149	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0152	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		4/1/2024
E0153	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0154	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0155	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0156	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0157	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0158	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0159	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0160	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0161	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0162	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0163	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0165	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0167	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0168	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0170	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0171	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
E0172	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E0175	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0181	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0182	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0183	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		10/1/2022
E0184	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0185	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0186	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0187	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0188	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0189	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0190	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E0191	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0193	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0194	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0196	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0197	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0198	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0199	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0200	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0201	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2025
E0202	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0203	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E0205	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0210	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0215	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0217	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0218	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0221	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0225	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0231	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E0232	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
E0235	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0236	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0239	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0240	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E0241	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E0242	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E0243	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E0244	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E0245	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E0246	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E0247	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E0248	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E0249	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0250	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0251	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0255	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0256	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0260	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0261	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0265	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0266	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0270	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E0271	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0272	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0273	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E0274	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E0275	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0276	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0277	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0280	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0290	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0291	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0292	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
E0293	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0294	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0295	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0296	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0297	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0300	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0301	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0302	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0303	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0304	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0305	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0310	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0315	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E0316	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0325	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0326	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0328	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0329	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0350	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E0352	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E0370	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E0371	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0372	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0373	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0424	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0425	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E0430	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E0431	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0433	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0434	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0435	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E0439	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0440	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
E0441	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0442	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0443	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0444	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0445	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
E0446	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
E0447	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2019
E0455	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0457	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
E0459	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
E0462	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0465	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2016
E0466	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2016
E0467	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2023
E0468	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2025
E0469	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		10/1/2024
E0470	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0471	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0472	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0480	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0481	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E0482	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0483	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0484	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0485	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0486	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0487	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
E0490	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		10/1/2023
E0491	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		10/1/2023
E0492	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2024
E0493	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2024
E0500	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0530	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2024

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
E0550	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0555	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0560	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0561	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0562	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0565	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0570	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0572	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0574	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0575	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0580	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0585	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0600	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0601	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0602	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0603	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
E0604	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
E0605	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0606	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0607	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0610	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0615	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0616	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
E0617	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0618	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0619	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0620	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0621	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0625	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E0627	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0629	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0630	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0635	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
E0636	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0637	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E0638	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E0639	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E0640	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E0641	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E0642	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E0650	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0651	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0652	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0655	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0656	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0657	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0660	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0665	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0666	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0667	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0668	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0669	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0670	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2014
E0671	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0672	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0673	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0675	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0676	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0677	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		4/1/2023
E0678	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2024
E0679	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2024
E0680	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2024
E0681	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2024
E0682	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2024
E0683	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		10/1/2024
E0691	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
E0692	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0693	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0694	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0700	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E0705	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2014
E0710	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E0711	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		4/1/2023
E0715	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
E0716	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
E0720	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0721	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
E0730	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0731	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0732	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2024
E0733	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2024
E0734	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2024
E0735	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2024
E0736	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2024
E0737	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
E0738	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2024
E0739	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2024
E0740	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0743	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		10/1/2024
E0744	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0745	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0746	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
E0747	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0748	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0749	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
E0755	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E0760	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0761	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E0762	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
E0764	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0765	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0766	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2014
E0767	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
E0769	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
E0770	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0776	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0779	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0780	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0781	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0782	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
E0783	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
E0784	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0785	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
E0786	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
E0787	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2020
E0791	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0830	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
E0840	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0849	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0850	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0855	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0856	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0860	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0870	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0880	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0890	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0900	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0910	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0911	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0912	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0920	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0930	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
E0935	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0936	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E0940	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0941	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0942	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0944	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0945	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0946	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0947	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0948	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0950	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0951	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0952	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0953	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2021
E0954	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2021
E0955	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0956	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0957	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0958	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0959	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2014
E0960	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0961	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2014
E0966	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2014
E0967	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0968	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0969	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0970	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E0971	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2014
E0973	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2014
E0974	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2014
E0978	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2014
E0980	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0981	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
E0982	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0983	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0984	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0985	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0986	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0988	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2012
E0990	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2014
E0992	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2014
E0994	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E0995	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2014
E1002	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1003	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1004	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1005	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1006	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1007	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1008	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1009	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1010	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1011	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1012	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2016
E1014	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1015	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1016	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1017	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1018	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1020	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1022	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		4/1/2025
E1023	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		4/1/2025
E1028	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1029	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1030	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1031	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
E1032	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		4/1/2025
E1033	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		4/1/2025
E1034	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		4/1/2025
E1035	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1036	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1037	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1038	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1039	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1050	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1060	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1070	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1083	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1084	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1085	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E1086	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E1087	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1088	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1089	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E1090	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E1092	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1093	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1100	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1110	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1130	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E1140	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E1150	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1160	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1161	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1170	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1171	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1172	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1180	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1190	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
E1195	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1200	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1220	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1221	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1222	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1223	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1224	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1225	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1226	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2014
E1227	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1228	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1229	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1230	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1231	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1232	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1233	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1234	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1235	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1236	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1237	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1238	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1239	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1240	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1250	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E1260	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E1270	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1280	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1285	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E1290	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E1295	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1296	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1297	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1298	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
E1300	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E1301	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2024
E1310	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1352	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2014
E1353	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1354	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1355	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1356	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1357	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1358	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1372	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1390	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1391	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1392	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1399	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1405	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1406	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1500	N	$100.00	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		11/1/2010
E1510	N	$100.00	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		11/1/2010
E1520	N	$100.00	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		11/1/2010
E1530	N	$100.00	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		11/1/2010
E1540	N	$100.00	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		11/1/2010
E1550	N	$100.00	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		11/1/2010
E1560	N	$100.00	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		11/1/2010
E1570	N	$100.00	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		11/1/2010
E1575	N	$25.00	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		11/1/2010
E1580	N	$100.00	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		11/1/2010
E1590	N	$1,850.00	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		11/1/2010
E1592	N	$500.00	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		11/1/2010
E1594	N	$500.00	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		11/1/2010
E1600	N	$100.00	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		11/1/2010
E1610	N	$100.00	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		11/1/2010
E1615	N	$150.00	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
E1620	N	$100.00	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		11/1/2010
E1625	N	$100.00	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		11/1/2010
E1629	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2022
E1630	N	$100.00	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		11/1/2010
E1632	N	$250.00	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		11/1/2010
E1634	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
E1635	N	$100.00	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		11/1/2010
E1636	N	$25.00	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		11/1/2010
E1637	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
E1639	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
E1699	N	$50.00	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		11/1/2010
E1700	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1701	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1702	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1800	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1801	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1802	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1803	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2025
E1804	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2025
E1805	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1806	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1807	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2025
E1808	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2025
E1810	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1811	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1812	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1813	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2025
E1814	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2025
E1815	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1816	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1818	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1820	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1821	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
E1822	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2025
E1823	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2025
E1825	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1826	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2025
E1827	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2025
E1828	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2025
E1829	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2025
E1830	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1831	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2014
E1832	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		4/1/2025
E1840	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1841	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1902	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E1905	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		4/1/2023
E2000	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2001	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2024
E2100	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2101	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2102	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		4/1/2022
E2103	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2023
E2104	Y	$52.86	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
E2120	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2201	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2202	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2203	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2204	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2205	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2206	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2207	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2208	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2209	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2210	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
E2211	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2212	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2213	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2214	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2215	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2216	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2217	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2218	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2219	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2220	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2221	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2222	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2224	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2225	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2226	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2227	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2228	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2230	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2015
E2231	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2291	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2292	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2293	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2294	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2295	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2298	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		4/1/2024
E2301	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2310	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2311	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2312	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2313	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2321	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2322	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2323	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
E2324	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2325	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2326	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2327	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2328	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2329	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2330	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2331	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2340	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2341	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2342	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2343	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2351	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2358	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2014
E2359	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2014
E2360	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2361	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2362	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2363	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2364	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2365	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2366	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2367	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2368	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2369	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2370	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2371	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2372	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2373	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2374	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2375	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2376	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2377	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
E2378	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2014
E2381	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2382	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2383	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2384	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2385	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2386	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2387	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2388	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2389	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2390	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2391	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2392	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2394	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2395	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2396	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2397	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2398	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2020
E2402	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2500	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2502	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2504	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2506	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2508	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2510	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2511	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2512	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2513	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		10/1/2024
E2599	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2601	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2602	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2603	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2604	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
E2605	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2606	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2607	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2608	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2609	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2610	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
E2611	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2612	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2613	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2614	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2615	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2616	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2617	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2619	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2620	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2621	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
E2622	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2011
E2623	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2011
E2624	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2011
E2625	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2011
E2626	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2014
E2627	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2014
E2628	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2014
E2629	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2014
E2630	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2014
E2631	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2014
E2632	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2014
E2633	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2014
E3000	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2024
E3200	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
E8000	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E8001	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
E8002	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
G0008	Y	$25.67	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
G0009	Y	$25.67	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
G0010	Y	$25.67	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
G0011	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/2/2024
G0012	Y	$45.26	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/2/2024
G0013	Y	$84.93	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/2/2024
G0017	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2024
G0018	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2024
G0019	Y	$84.93	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2024
G0022	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2024
G0023	Y	$84.93	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2024
G0024	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2024
G0027	Y	$6.11	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2020
G0029	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G0030	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G0031	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G0032	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G0033	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G0034	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G0035	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G0036	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G0037	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G0038	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G0039	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G0040	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G0041	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G0042	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G0043	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G0044	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G0045	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G0046	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G0047	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
G0048	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G0049	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G0050	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G0051	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G0052	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G0053	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G0054	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G0055	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G0057	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G0058	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G0059	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G0060	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G0061	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G0062	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G0063	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G0064	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G0065	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G0066	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G0067	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G0068	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2019
G0069	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2019
G0070	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2019
G0071	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2019
G0076	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2019
G0077	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2019
G0078	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2019
G0079	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2019
G0080	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2019
G0081	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2019
G0082	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2019
G0083	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2019
G0084	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2019
G0085	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2019

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
G0086	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2019
G0087	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2019
G0088	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2021
G0089	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2021
G0090	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2021
G0101	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
G0102	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
G0103	Y	$23.17	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
G0104	Y	$250.93	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
G0105	Y	$545.40	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
G0106	Y	$84.33	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
G0108	Y	$51.91	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2015
G0109	Y	$13.95	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2015
G0117	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
G0118	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
G0120	Y	$84.33	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
G0121	Y	$545.40	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
G0122	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
G0123	Y	$24.31	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
G0124	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
G0127	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
G0128	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
G0129	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
G0130	Y	$59.34	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
G0136	Y	$27.34	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2024
G0137	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
G0138	Y	$650.50	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		4/1/2024
G0140	Y	$84.93	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2024
G0141	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
G0143	Y	$27.05	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
G0144	Y	$43.97	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
G0145	Y	$24.90	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2020
G0146	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2024
G0147	Y	$17.76	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
G0148	Y	$31.94	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
G0151	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
G0152	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
G0153	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
G0155	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
G0156	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
G0157	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2011
G0158	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2011
G0159	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2011
G0160	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2011
G0161	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2011
G0162	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2011
G0166	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
G0168	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
G0175	Y	$113.44	OPPS Price Mcare APC St Ind V	Ambulatory Payment Classificat		11/1/2010
G0176	Y	$105.27	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2019
G0177	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2015
G0179	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G0180	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G0181	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G0182	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G0183	Y	$88.05	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		4/1/2025
G0186	Y	$394.31	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
G0219	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
G0235	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
G0237	Y	$52.35	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016
G0238	Y	$52.35	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2016

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
G0239	Y	$29.23	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
G0245	Y	$57.92	OPPS Price Mcare APC St Ind V	Ambulatory Payment Classificat		11/1/2010
G0246	Y	$69.68	OPPS Price Mcare APC St Ind V	Ambulatory Payment Classificat		11/1/2010
G0247	Y	$98.46	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
G0248	Y	$113.44	OPPS Price Mcare APC St Ind V	Ambulatory Payment Classificat		11/1/2010
G0249	Y	$113.44	OPPS Price Mcare APC St Ind V	Ambulatory Payment Classificat		11/1/2010
G0250	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G0252	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
G0255	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
G0257	Y	$459.79	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
G0259	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
G0260	Y	$485.34	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
G0268	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
G0269	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
G0270	Y	$28.99	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2015
G0271	Y	$15.60	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2015
G0276	Y	$4,111.56	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2015
G0277	Y	$109.24	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2016
G0278	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
G0279	Y	$23.78	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2015
G0281	Y	$16.41	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2010
G0282	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
G0283	Y	$16.41	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		11/1/2010
G0288	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
G0289	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
G0293	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
G0294	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
G0295	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
G0296	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2019
G0299	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2016

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
G0300	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2016
G0302	Y	$770.55	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
G0303	Y	$770.55	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
G0304	Y	$162.06	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
G0305	Y	$162.06	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
G0306	Y	$7.77	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
G0307	Y	$9.71	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
G0310	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		12/2/2021
G0311	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		12/2/2021
G0312	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		12/2/2021
G0313	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		12/2/2021
G0314	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		12/2/2021
G0315	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		12/2/2021
G0316	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2023
G0317	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2023
G0318	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2023
G0320	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
G0321	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
G0322	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
G0323	Y	$29.68	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2023
G0327	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		7/1/2021
G0328	Y	$21.66	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
G0329	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
G0330	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
G0333	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G0337	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
G0339	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2014
G0340	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2015
G0341	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
G0342	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
G0343	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
G0372	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G0378	Y	$28.28	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2015
G0379	Y	$57.92	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
G0380	Y	$45.81	OPPS Price Mcare APC St Ind V	Ambulatory Payment Classificat		11/1/2010
G0381	Y	$62.21	OPPS Price Mcare APC St Ind V	Ambulatory Payment Classificat		11/1/2010
G0382	Y	$98.22	OPPS Price Mcare APC St Ind V	Ambulatory Payment Classificat		11/1/2010
G0383	Y	$141.83	OPPS Price Mcare APC St Ind V	Ambulatory Payment Classificat		11/1/2010
G0384	Y	$232.32	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		11/1/2010
G0390	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
G0396	Y	$40.53	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
G0397	Y	$40.53	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
G0398	Y	$162.06	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
G0399	Y	$162.06	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
G0400	Y	$162.06	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		11/1/2010
G0402	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
G0403	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G0404	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
G0405	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
G0406	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2012
G0407	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2012
G0408	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2012
G0409	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2014
G0410	Y	$29.10	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2019
G0411	Y	$32.60	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2019
G0412	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
G0413	Y	$2,141.60	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		11/1/2010
G0414	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
G0415	Y	$0.00	OPPS NotCvrd Inpt APC St Ind C	Ambulatory Payment Classificat		11/1/2010
G0416	Y	$294.14	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
G0420	Y	$80.91	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2014
G0421	Y	$24.62	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2015
G0422	Y	$38.36	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
G0423	Y	$38.36	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
G0425	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2012
G0426	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2012
G0427	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2012
G0428	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
G0429	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2014
G0432	Y	$19.57	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
G0433	Y	$18.29	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
G0435	Y	$11.98	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
G0438	Y	$113.44	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		10/1/2011
G0439	Y	$113.44	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		10/1/2011
G0442	Y	$42.40	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		10/1/2013
G0443	Y	$42.40	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		10/1/2013
G0444	Y	$42.40	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		10/1/2013
G0445	Y	$42.40	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		10/1/2013
G0446	Y	$42.40	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		10/1/2013
G0447	Y	$42.40	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
G0448	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2014
G0451	Y	$42.40	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2013
G0452	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2024
G0453	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
G0454	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2014
G0455	Y	$131.69	OPPS Price Mcare APC St Ind Q1	Ambulatory Payment Classificat		1/1/2015
G0458	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2014
G0459	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2014
G0460	Y	$67.62	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		10/1/2013
G0463	Y	$85.82	OPPS Price Mcare APC St Ind Q3	Ambulatory Payment Classificat		1/1/2015
G0465	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/13/2021
G0466	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2015
G0467	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
G0468	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2015
G0469	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2015
G0470	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2015
G0471	Y	$9.94	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2023
G0472	Y	$55.62	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
G0473	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
G0475	Y	$36.12	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
G0476	Y	$35.09	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
G0480	Y	$171.65	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
G0481	Y	$234.89	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
G0482	Y	$298.11	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
G0483	Y	$370.38	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
G0490	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		10/1/2016
G0491	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2017
G0492	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2017
G0493	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2017
G0494	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2017
G0495	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2017
G0496	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2017
G0498	Y	$179.45	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2017
G0499	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		9/28/2016
G0500	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2017
G0501	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2017
G0506	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2017
G0508	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2017
G0509	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2017
G0511	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G0512	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
G0513	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G0514	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G0516	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G0517	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G0518	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G0519	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2024
G0520	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2024
G0521	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2024
G0522	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2024
G0523	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2024
G0524	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2024
G0525	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2024
G0526	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2024
G0527	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2024
G0528	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2024
G0529	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2024
G0530	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2024
G0531	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2024
G0532	N	$51.94	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
G0533	N	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
G0534	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
G0535	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
G0536	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
G0537	Y	$29.79	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2025
G0538	Y	$92.50	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2025
G0539	Y	$50.52	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
G0540	Y	$24.90	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
G0541	Y	$50.52	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
G0542	Y	$24.90	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
G0543	Y	$20.74	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
G0544	Y	$92.50	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2025
G0545	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2025
G0546	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
G0547	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
G0548	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
G0549	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
G0550	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
G0551	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
G0552	Y	$128.87	OPPS Price Mcare APC St Ind V	Ambulatory Payment Classificat		1/1/2025
G0553	Y	$128.87	OPPS Price Mcare APC St Ind V	Ambulatory Payment Classificat		1/1/2025
G0554	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2025
G0555	Y	$1,017.39	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2025
G0556	Y	$29.79	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2025
G0557	Y	$29.79	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2025
G0558	Y	$92.50	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2025
G0559	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2025
G0560	Y	$41.09	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
G0561	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2025
G0562	Y	$1,950.50	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2025
G0563	Y	$3,750.50	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2025
G0564	Y	$3,250.50	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2025
G0565	Y	$3,250.50	OPPS Multi Reduct APC St Ind T	Ambulatory Payment Classificat		1/1/2025
G0566	Y	$156.46	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		4/1/2025
G0567	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2025
G0659	Y	$62.14	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
G0913	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G0914	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G0915	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
G0916	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G0917	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G0918	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G1000	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
G1001	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
G1002	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
G1003	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
G1004	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
G1007	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
G1008	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
G1010	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
G1011	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
G1012	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		4/1/2020
G1013	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		4/1/2020
G1014	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		4/1/2020
G1015	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		4/1/2020
G1016	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		4/1/2020
G1017	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		4/1/2020
G1018	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		4/1/2020
G1019	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		4/1/2020
G1020	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		10/1/2020
G1021	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		10/1/2020
G1022	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		10/1/2020
G1023	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		10/1/2020
G1024	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2022
G1025	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G1026	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G1027	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G1028	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
G2000	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		8/1/2018
G2001	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		4/1/2019
G2002	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		4/1/2019
G2003	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		4/1/2019

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
G2004	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		4/1/2019
G2005	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		4/1/2019
G2006	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		4/1/2019
G2007	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		4/1/2019
G2008	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		4/1/2019
G2009	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		4/1/2019
G2010	Y	$11.69	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
G2011	Y	$17.17	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2019
G2012	Y	$13.85	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
G2013	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		4/1/2019
G2014	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		4/1/2019
G2015	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		4/1/2019
G2020	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2021
G2021	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
G2022	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
G2061	Y	$11.52	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
G2062	Y	$19.21	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		2/1/2020
G2063	Y	$31.89	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
G2067	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
G2068	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
G2069	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
G2070	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
G2071	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
G2072	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
G2073	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
G2074	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
G2075	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
G2076	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
G2077	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
G2078	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
G2079	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
G2080	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020
G2081	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
G2082	Y	$650.50	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2020
G2083	Y	$950.50	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2020
G2086	Y	$131.36	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2020
G2087	Y	$131.36	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2020
G2088	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2020
G2090	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
G2091	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
G2092	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
G2093	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
G2094	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
G2096	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
G2097	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
G2098	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
G2099	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
G2100	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
G2101	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
G2105	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
G2106	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
G2107	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
G2112	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
G2113	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
G2115	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
G2116	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
G2118	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
G2121	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
G2122	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
G2125	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
G2126	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
G2127	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
G2128	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
G2129	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
G2136	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
G2137	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
G2138	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
G2139	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
G2140	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
G2141	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
G2142	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
G2143	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
G2144	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
G2145	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
G2146	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
G2147	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
G2148	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
G2149	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
G2150	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
G2151	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
G2152	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
G2167	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
G2168	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2020
G2169	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2020
G2172	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2021
G2173	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2021
G2174	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2021
G2175	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2021
G2176	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2021
G2177	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2021
G2178	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2021
G2179	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2021
G2180	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2021
G2181	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2021
G2182	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2021
G2183	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2021

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
G2184	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2021
G2185	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2021
G2186	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2021
G2187	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2021
G2188	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2021
G2189	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2021
G2190	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2021
G2191	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2021
G2192	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2021
G2193	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2021
G2194	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2021
G2195	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2021
G2196	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2021
G2197	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2021
G2199	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2021
G2200	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2021
G2202	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2021
G2204	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2021
G2205	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2021
G2206	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2021
G2207	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2021
G2208	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2021
G2209	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2021
G2210	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2021
G2211	Y	$16.00	OPPS Not Payable APC St Ind B	Not Available		1/1/2024
G2212	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2021
G2213	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2021
G2214	Y	$74.87	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2021
G2215	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2021
G2216	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2021
G2250	Y	$11.69	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
G2251	Y	$13.85	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
G2252	Y	$26.17	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
G3002	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2023
G3003	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2023
G4000	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G4001	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G4002	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G4003	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G4004	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G4005	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G4006	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G4007	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G4008	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G4009	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G4010	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G4011	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G4012	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G4013	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G4014	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G4015	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G4016	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G4017	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G4018	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G4019	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G4020	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G4021	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G4022	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G4023	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G4024	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G4025	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G4026	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G4027	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G4028	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
G4029	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G4030	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G4031	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G4032	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G4033	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G4034	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G4035	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G4036	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G4037	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G4038	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G6001	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2015
G6002	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2015
G6003	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2015
G6004	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2015
G6005	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2015
G6006	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2015
G6007	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2015
G6008	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2015
G6009	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2015
G6010	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2015
G6011	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2015
G6012	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2015
G6013	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2015
G6014	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2015
G6015	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2015
G6016	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2015
G6017	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2015
G8395	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8396	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8397	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8399	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8400	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8404	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
G8405	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8410	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8415	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8416	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8417	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8418	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8419	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8420	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8421	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8427	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8428	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8430	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8431	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8432	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8433	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8450	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8451	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8452	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8465	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8473	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8474	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8475	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8476	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8477	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8478	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8482	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8483	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8484	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8510	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8511	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8535	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8536	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8539	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
G8540	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8541	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8542	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8543	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8559	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8560	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8561	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8562	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8563	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8564	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8565	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8566	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8567	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8568	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8569	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8570	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8575	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8576	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8577	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8578	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8598	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8599	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8600	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8601	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8602	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G8633	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2011
G8635	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2011
G8647	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2011
G8648	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2011
G8650	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2011
G8651	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2011
G8652	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2011
G8654	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2011

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
G8655	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2011
G8656	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2011
G8658	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2011
G8659	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2011
G8660	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2011
G8661	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2011
G8662	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2011
G8663	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2011
G8664	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2011
G8666	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2011
G8667	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2011
G8668	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2011
G8670	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2011
G8694	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8708	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8709	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8710	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8711	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8712	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8721	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8722	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8723	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8724	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8733	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8734	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8735	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8749	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8752	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8753	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8754	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8755	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8756	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8783	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
G8785	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8797	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8798	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8806	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8807	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8808	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8815	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8816	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8817	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8826	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8833	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8834	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8838	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8839	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8840	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8841	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8842	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8843	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8844	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8845	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8846	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8849	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8850	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8851	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8854	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8855	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8856	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8857	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8858	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8863	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8864	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8865	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8866	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
G8867	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8869	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8875	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8876	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8877	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8878	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8880	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8881	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8882	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2012
G8907	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2013
G8908	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2013
G8909	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2013
G8910	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2013
G8911	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2013
G8912	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2013
G8913	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2013
G8914	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2013
G8915	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2013
G8916	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2013
G8917	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2013
G8918	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2013
G8923	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2013
G8924	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2013
G8934	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2013
G8935	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2013
G8936	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2013
G8937	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2013
G8942	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2013
G8944	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2013
G8946	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2013
G8950	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2013
G8952	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2013
G8955	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2013

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
G8956	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2013
G8958	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2013
G8961	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2013
G8962	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2013
G8965	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2013
G8966	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2013
G8967	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2013
G8968	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2013
G8969	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2013
G8970	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2013
G9001	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
G9002	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
G9003	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
G9004	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
G9005	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
G9006	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
G9007	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
G9008	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
G9009	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
G9010	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
G9011	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
G9012	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
G9013	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
G9014	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
G9016	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
G9037	Y	$36.45	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		7/1/2024
G9038	Y	$45.64	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		7/1/2024
G9050	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
G9051	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
G9052	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
G9053	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
G9054	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
G9055	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
G9056	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
G9057	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
G9058	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
G9059	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
G9060	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
G9061	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
G9062	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
G9063	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9064	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9065	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9066	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9067	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9068	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9069	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9070	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9071	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9072	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9073	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9074	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9075	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9077	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9078	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9079	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9080	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9083	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9084	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9085	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9086	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9087	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9088	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9089	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9090	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
G9091	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9092	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9093	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9094	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9095	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9096	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9097	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9098	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9099	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9100	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9101	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9102	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9103	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9104	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9105	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9106	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9107	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9108	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9109	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9110	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9111	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9112	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9113	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9114	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9115	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9116	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9117	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9123	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9124	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9125	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9126	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9128	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9129	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
G9130	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9131	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9132	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9133	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9134	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9135	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9136	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9137	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9138	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9139	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
G9140	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
G9143	Y	$0.00	OPPS PackagdServ APC St Ind N	APC Medicare CLAB NM FEE		11/1/2024
G9147	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
G9148	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2013
G9149	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2013
G9150	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2013
G9151	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2013
G9152	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2013
G9153	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2013
G9156	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9157	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2014
G9187	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		10/1/2013
G9188	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9189	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9190	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9191	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9212	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9213	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9223	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9225	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9226	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9227	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9228	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
G9230	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9231	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9242	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9243	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9246	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9247	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9254	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9255	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9273	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9274	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9275	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9276	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9277	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9278	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9279	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9280	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9281	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9282	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9283	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9284	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9285	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9286	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9287	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9288	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9289	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9290	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9291	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9292	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9293	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9294	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9295	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9296	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9297	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
G9298	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9299	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9305	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9306	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9307	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9308	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9309	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9310	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9311	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9312	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9313	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9314	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9315	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9316	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9317	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9318	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9319	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9321	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9322	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9341	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9342	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9344	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9345	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9347	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9351	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9352	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9353	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9354	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9355	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9356	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9357	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9358	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014
G9361	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
G9364	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9367	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9368	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9380	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9382	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9383	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9384	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9385	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9386	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9393	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9394	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9395	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9396	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9402	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9403	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9404	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9405	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9406	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9407	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9408	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9409	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9410	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9411	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9412	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9413	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9414	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9415	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9416	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9417	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9418	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9419	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9420	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9421	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
G9422	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9423	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9424	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9425	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9426	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9427	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9428	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9429	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9430	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9431	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9432	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9434	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9452	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9455	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9456	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9457	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9458	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9459	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9460	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9468	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9470	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9471	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2015
G9473	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2016
G9474	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2016
G9475	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2016
G9476	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2016
G9477	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2016
G9478	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2016
G9479	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2016
G9480	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2016
G9481	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2016
G9482	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2016
G9483	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2016

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
G9484	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		4/1/2016
G9485	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2016
G9486	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2016
G9487	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		4/1/2016
G9488	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/1/2016
G9489	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2016
G9490	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2016
G9497	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9498	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9500	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9501	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9502	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9504	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9505	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9507	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9508	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9509	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9510	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9511	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9512	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9513	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9514	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9515	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9516	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9517	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9518	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9519	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9520	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9521	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9522	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9529	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9530	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9531	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
G9533	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9537	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9539	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9540	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9541	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9542	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9543	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9544	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9547	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9548	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9549	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9550	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9551	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9552	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9553	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9554	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9555	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9556	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9557	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9580	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9582	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9593	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9594	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9595	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9597	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9598	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9599	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9603	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9604	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9605	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9606	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9607	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9608	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
G9609	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9610	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9611	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9621	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9622	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9624	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9625	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9626	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9627	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9628	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9629	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9630	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9637	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9638	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9642	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9643	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9644	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9645	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9646	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9648	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9649	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9651	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9654	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9655	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9656	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9658	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9659	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9660	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9661	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9662	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9663	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9664	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9665	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
G9674	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9675	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9676	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2016
G9678	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		4/1/2016
G9679	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		10/1/2016
G9680	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		10/1/2016
G9681	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		10/1/2016
G9682	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		10/1/2016
G9683	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		10/1/2016
G9684	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		10/1/2016
G9685	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		10/1/2018
G9687	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9688	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9689	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9690	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9691	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9692	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9693	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9694	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9695	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9696	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9698	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9699	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9700	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9702	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9703	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9704	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9705	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9706	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9707	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9708	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9709	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9710	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
G9711	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9712	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9713	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9714	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9716	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9717	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9719	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9720	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9721	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9722	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9723	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9724	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9726	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9727	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9728	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9729	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9730	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9731	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9732	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9733	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9734	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9735	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9736	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9737	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9740	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9741	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9744	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9745	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9746	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9751	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9752	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9753	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9754	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
G9755	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9756	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9757	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9758	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9760	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9761	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9762	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9763	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9764	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9765	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9766	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9767	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9768	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9769	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9770	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9771	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9772	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9773	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9775	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9776	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9777	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9779	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9780	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9781	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9782	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9784	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9785	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9786	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9787	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9788	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9789	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9790	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9791	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
G9792	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9793	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9794	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9795	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9796	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9797	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9805	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9806	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9807	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9812	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9813	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9818	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9819	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9820	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9821	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9822	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9823	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9824	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9830	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9831	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9832	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9838	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9839	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9840	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9841	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9842	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9843	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9844	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9845	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9846	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9847	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9848	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9858	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
G9859	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9860	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9861	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9862	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2017
G9868	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9869	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9870	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9873	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		4/1/2018
G9874	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		4/1/2018
G9875	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		4/1/2018
G9876	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		4/1/2018
G9877	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		4/1/2018
G9878	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		4/1/2018
G9879	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		4/1/2018
G9880	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		4/1/2018
G9881	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		4/1/2018
G9882	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		4/1/2018
G9883	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		4/1/2018
G9884	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		4/1/2018
G9885	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		4/1/2018
G9886	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
G9887	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
G9888	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
G9890	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		4/1/2018
G9891	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		4/1/2018
G9892	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9893	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9894	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9895	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9896	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9897	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9898	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9899	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
G9900	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9901	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9902	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9903	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9905	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9906	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9908	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9910	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9911	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9912	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9913	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9914	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9915	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9916	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9917	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9918	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9919	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9920	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9921	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9922	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9923	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9925	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9926	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9928	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9929	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9930	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9931	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9938	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9939	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9940	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9943	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9945	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9946	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
G9949	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9954	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9955	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9956	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9957	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9958	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9959	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9960	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9961	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9962	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9963	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9964	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9965	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9968	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9969	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9970	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9974	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9975	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9976	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9977	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2018
G9978	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		10/1/2018
G9979	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		10/1/2018
G9980	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		10/1/2018
G9981	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		10/1/2018
G9982	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		10/1/2018
G9983	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		10/1/2018
G9984	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		10/1/2018
G9985	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		10/1/2018
G9986	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		10/1/2018
G9987	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		10/1/2018
G9988	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G9990	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G9991	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
G9992	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G9993	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G9994	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G9996	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G9997	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G9998	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
G9999	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2022
H0025	Y	$40.05	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2019
H0031	Y	$130.00	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2019
H0033	Y	$300.00	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2019
H0038	Y	$12.00	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2019
H0049	Y	$27.00	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2019
H0050	Y	$54.00	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2019
H0051	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		4/1/2024
H0052	Y	$0.00	OPPS Not Payable APC St Ind M	Not Available		1/1/2025
H0053	Y	$0.00	OPPS Not Payable APC St Ind M	Not Available		1/1/2025
H2038	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2022
H2040	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2023
H2041	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2023
J0120	N	$97.97	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2015
J0121	N	$3.49	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		10/1/2019
J0122	N	$0.96	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		10/1/2019
J0129	N	$34.92	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J0130	N	$823.78	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J0131	N	$0.11	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2015
J0132	N	$0.99	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		7/1/2023
J0133	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
J0134	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2023
J0135	N	$658.71	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J0136	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2023
J0137	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2023
J0138	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2024
J0139	N	$91.73	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
J0153	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
J0171	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2011
J0172	N	$5.98	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		7/1/2022
J0173	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2023
J0174	N	$1.35	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J0175	N	$4.09	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J0177	N	$339.94	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J0178	N	$980.50	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2015
J0179	N	$338.89	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J0180	N	$152.34	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J0184	N	$9.19	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J0185	N	$2.59	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J0190	N	$4.17	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
J0200	N	$18.05	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
J0202	N	$1,743.19	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2016
J0205	N	$44.55	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
J0206	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2023
J0207	N	$361.77	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J0208	N	$95.27	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J0209	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2024
J0210	N	$44.94	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J0211	N	$2.17	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		7/1/2024
J0215	N	$39.10	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2015
J0216	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2023
J0217	N	$429.34	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J0218	N	$381.58	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J0219	N	$77.86	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J0220	N	$206.63	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J0221	N	$153.61	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2015
J0222	N	$98.32	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		10/1/2019
J0223	N	$115.47	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
J0224	N	$319.56	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J0225	N	$4,774.05	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2023
J0248	N	$6.35	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		7/1/2024
J0256	N	$4.33	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J0257	N	$4.02	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J0270	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
J0275	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2015
J0278	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
J0280	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
J0282	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J0283	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2023
J0285	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J0287	N	$11.65	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J0288	N	$14.70	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2014
J0289	N	$17.10	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J0290	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J0291	N	$3.22	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		10/1/2019
J0295	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J0300	N	$23.95	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2015
J0330	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J0348	N	$0.54	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		10/1/2017
J0349	N	$10.25	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J0350	N	$2,401.37	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
J0360	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
J0364	N	$34.65	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
J0365	N	$2.80	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
J0380	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J0390	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J0391	N	$48.22	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J0395	N	$172.99	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
J0400	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
J0401	N	$3.98	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J0402	N	$5.88	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J0456	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
J0457	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2023
J0461	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J0470	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2011
J0475	N	$169.81	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J0476	N	$76.50	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J0480	N	$2,718.40	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J0485	N	$3.80	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J0490	N	$40.02	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J0491	N	$17.76	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J0500	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
J0515	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2012
J0517	N	$170.56	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		10/1/2023
J0520	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J0558	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
J0561	N	$7.84	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2016
J0565	N	$40.23	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2018
J0567	N	$93.62	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2019
J0570	N	$1,311.75	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2017
J0571	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
J0572	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
J0573	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
J0574	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
J0575	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
J0577	Y	$432.35	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J0578	Y	$1,729.41	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J0583	N	$3.50	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J0584	N	$353.40	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2019
J0585	N	$5.57	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J0586	N	$7.95	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J0587	N	$11.29	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
J0588	N	$4.61	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2016
J0589	Y	$4.38	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J0591	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2020
J0592	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J0593	N	$76.34	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		10/1/2019
J0594	N	$33.23	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J0595	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J0596	N	$23.29	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2016
J0597	N	$38.57	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J0598	N	$51.90	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J0599	N	$9.67	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2019
J0600	N	$5,594.42	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2016
J0601	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2025
J0602	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2025
J0603	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2025
J0604	N	$0.95	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J0605	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2025
J0606	N	$2.88	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2019
J0607	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2025
J0608	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2025
J0609	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2025
J0611	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2023
J0612	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2023
J0613	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2023
J0615	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2025
J0620	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J0630	N	$2,369.13	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2016
J0636	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J0637	N	$11.84	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J0638	N	$91.09	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J0640	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J0641	N	$1.80	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J0642	N	$1.35	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
J0650	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2024
J0651	N	$8.53	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J0652	N	$4.02	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J0665	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2023
J0666	N	$1.45	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J0670	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J0687	N	$1.11	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J0688	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2024
J0689	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2023
J0690	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J0691	N	$0.73	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J0692	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J0694	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J0695	N	$0.42	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2016
J0696	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J0697	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
J0698	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J0699	N	$2.28	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		10/1/2024
J0701	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2023
J0702	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J0703	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2023
J0706	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
J0710	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
J0712	N	$2.14	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2016
J0713	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J0714	N	$75.53	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2016
J0715	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J0716	N	$1,210.30	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2015
J0717	N	$6.05	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J0720	N	$50.89	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J0725	N	$23.29	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2024
J0735	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
J0736	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
J0737	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2023
J0739	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2022
J0740	N	$553.01	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J0741	N	$23.17	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J0742	N	$2.20	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		7/1/2020
J0743	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J0744	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J0745	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
J0750	N	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/2/2024
J0751	N	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/2/2024
J0770	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
J0775	N	$38.42	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J0780	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
J0791	N	$128.68	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J0795	N	$7.74	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J0799	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/2/2024
J0801	N	$3,672.33	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J0802	N	$3,468.85	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J0834	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2012
J0840	N	$2,493.12	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J0841	N	$1,256.60	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2019
J0850	N	$1,013.87	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J0870	N	$55.47	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J0872	N	$0.04	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J0873	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2024
J0874	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		10/1/2023
J0875	N	$14.28	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2016
J0877	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2023
J0878	N	$0.71	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J0879	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		4/1/2022
J0881	N	$3.73	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J0882	N	$3.73	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
J0883	N	$2.14	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2017
J0884	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2017
J0885	N	$11.84	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J0887	N	$1.63	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		10/1/2017
J0888	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
J0889	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		10/1/2023
J0890	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
J0891	N	$1.82	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J0892	N	$1.82	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J0893	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2023
J0894	N	$26.11	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J0895	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
J0896	N	$36.38	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		7/1/2020
J0897	N	$14.71	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J0898	N	$2.10	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2023
J0899	N	$2.10	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2023
J0901	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2025
J0911	N	$0.86	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		7/1/2024
J0945	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
J1000	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
J1010	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2024
J1050	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
J1071	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
J1094	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J1095	N	$1.11	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2019
J1096	N	$151.41	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		10/1/2019
J1097	N	$112.35	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		10/1/2019
J1100	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J1105	N	$0.73	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J1110	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J1120	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J1130	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2017
J1160	N	$14.11	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
J1162	N	$2,361.31	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J1165	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
J1170	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J1171	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2024
J1180	N	$8.53	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
J1190	N	$137.57	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J1200	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J1201	N	$15.45	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		7/1/2020
J1202	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		4/1/2024
J1203	N	$89.25	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J1205	N	$122.24	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J1212	N	$211.57	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		10/1/2015
J1230	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J1240	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
J1245	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J1250	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J1260	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J1265	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J1267	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2011
J1270	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J1290	N	$375.78	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J1300	N	$211.89	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2016
J1301	N	$22.14	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		10/1/2024
J1302	N	$18.13	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		10/1/2024
J1303	N	$222.68	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		7/1/2023
J1304	N	$155.34	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J1305	N	$186.31	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		10/1/2024
J1306	N	$12.28	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J1307	N	$535.90	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J1320	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J1322	N	$222.13	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2015
J1323	N	$182.19	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
J1324	N	$0.51	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2012
J1325	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J1327	N	$22.23	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		10/1/2011
J1330	N	$91.15	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2016
J1335	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J1364	N	$50.75	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		10/1/2015
J1380	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J1410	N	$190.66	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J1411	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		4/1/2023
J1412	N	$12,159.16	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J1413	N	$3,337,544.74	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J1414	N	$3,710,000.00	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J1426	N	$168.57	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J1427	N	$63.37	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J1428	N	$169.60	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2018
J1429	N	$166.24	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		7/1/2020
J1430	N	$404.09	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2016
J1434	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		4/1/2024
J1435	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
J1436	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2011
J1437	N	$25.38	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		10/1/2020
J1438	N	$302.37	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J1439	N	$1.07	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2016
J1440	N	$63.60	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J1442	N	$0.99	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2015
J1443	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2016
J1444	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2019
J1445	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		10/1/2021
J1447	N	$0.71	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2017
J1448	N	$5.37	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J1449	N	$29.68	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J1450	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J1451	N	$6.97	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		10/1/2011

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
J1452	N	$85.00	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2014
J1453	N	$1.73	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J1454	N	$708.35	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		4/1/2024
J1455	N	$13.32	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2014
J1456	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2023
J1457	N	$2.21	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
J1458	N	$362.37	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J1459	N	$37.45	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J1460	N	$33.34	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2016
J1551	N	$14.51	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J1552	N	$146.89	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J1554	N	$491.41	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J1555	N	$18.07	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		7/1/2023
J1556	N	$38.49	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2016
J1557	N	$36.38	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J1558	N	$14.26	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J1559	N	$8.18	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J1560	N	$333.44	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2016
J1561	N	$39.91	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J1562	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
J1566	N	$28.95	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J1568	N	$49.30	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J1569	N	$39.21	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J1570	N	$44.92	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J1571	N	$53.86	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2016
J1572	N	$35.54	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J1573	N	$52.61	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		10/1/2011
J1574	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2023
J1575	N	$10.96	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2016
J1576	N	$69.10	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J1580	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J1595	N	$110.35	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		10/1/2011

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
J1596	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2024
J1597	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2024
J1598	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2024
J1599	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
J1600	N	$4.27	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2015
J1602	N	$24.20	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J1610	N	$196.57	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2016
J1611	N	$111.91	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J1620	N	$191.12	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
J1626	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J1627	N	$7.73	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2021
J1628	N	$97.92	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2019
J1630	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J1631	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J1632	N	$76.91	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		10/1/2020
J1640	N	$20.73	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J1642	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2013
J1643	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2023
J1644	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2013
J1645	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J1650	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J1652	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2011
J1655	N	$3.70	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
J1670	N	$325.95	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J1675	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
J1700	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J1710	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J1720	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J1726	N	$2.71	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2018
J1729	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2018
J1730	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
J1738	N	$3.26	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		10/1/2020

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
J1740	N	$124.12	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J1741	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
J1742	N	$114.69	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J1743	N	$497.69	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2016
J1744	N	$235.05	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2015
J1745	N	$76.51	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J1746	N	$58.64	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2019
J1747	N	$61.43	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		10/1/2024
J1748	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2024
J1749	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		10/1/2024
J1750	N	$12.12	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J1756	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2013
J1786	N	$42.00	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2016
J1790	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J1800	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J1805	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2023
J1806	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2023
J1810	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
J1811	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2023
J1812	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		7/1/2023
J1813	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2023
J1814	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		7/1/2023
J1815	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J1817	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2011
J1823	N	$449.77	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2021
J1826	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2011
J1830	N	$213.62	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		10/1/2011
J1833	N	$0.68	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2016
J1835	N	$44.82	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
J1836	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2023
J1885	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J1890	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
J1920	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2023
J1921	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2023
J1930	N	$46.67	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J1931	N	$29.45	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2016
J1932	N	$48.78	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J1939	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2024
J1940	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J1941	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2023
J1943	N	$3.19	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		10/1/2024
J1944	N	$3.23	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		10/1/2024
J1945	N	$349.51	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		10/1/2011
J1950	N	$813.38	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J1951	N	$140.62	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		10/1/2024
J1952	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2022
J1953	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2011
J1954	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2023
J1955	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2015
J1956	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J1960	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J1961	N	$21.93	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J1980	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J1990	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J2001	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
J2002	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2024
J2003	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2024
J2004	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2024
J2010	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J2020	N	$3.65	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		10/1/2023
J2021	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2023
J2060	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J2062	N	$14.71	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2019
J2150	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J2170	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2013

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
J2175	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J2180	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J2182	N	$25.93	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2017
J2183	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2024
J2184	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2023
J2185	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J2186	N	$1.66	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2019
J2210	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J2212	N	$0.37	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2015
J2246	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2024
J2247	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2023
J2248	N	$1.10	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		7/1/2023
J2249	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		7/1/2023
J2250	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J2251	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2023
J2252	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2024
J2253	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2024
J2260	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J2265	N	$0.58	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2015
J2267	N	$45.39	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J2270	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J2272	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2023
J2274	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
J2277	N	$25.54	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J2278	N	$6.97	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J2280	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016
J2281	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2023
J2290	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2025
J2300	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J2305	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2023
J2310	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J2311	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2023
J2315	N	$2.97	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
J2320	N	$122.78	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2015
J2323	N	$15.82	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J2325	N	$46.80	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		10/1/2011
J2326	N	$1,103.79	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2018
J2327	N	$15.36	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J2329	N	$69.03	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J2350	N	$71.58	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		7/1/2023
J2353	N	$144.69	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J2354	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J2355	N	$439.87	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2016
J2356	N	$18.59	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J2357	N	$28.79	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J2358	N	$2.92	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J2359	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2023
J2360	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J2371	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2023
J2372	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2023
J2373	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2024
J2401	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2023
J2402	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2023
J2403	N	$0.68	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J2404	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2024
J2405	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J2406	N	$43.32	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J2407	N	$25.07	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2016
J2410	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J2425	N	$15.61	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J2426	N	$8.13	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2016
J2427	N	$12.62	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J2430	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2011
J2440	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J2460	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
J2468	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2024

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
J2469	N	$19.95	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J2470	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2024
J2471	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2024
J2472	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2025
J2501	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J2502	N	$251.26	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2016
J2503	N	$1,040.51	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J2504	N	$275.40	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J2506	N	$19.98	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J2507	N	$1,379.99	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2016
J2508	N	$212.96	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2024
J2510	N	$21.59	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2016
J2513	N	$13.49	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
J2515	N	$43.20	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2016
J2540	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J2543	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J2545	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
J2547	N	$1.68	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2016
J2550	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J2560	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J2561	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		7/1/2023
J2562	N	$304.00	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J2590	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
J2597	N	$8.97	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2016
J2598	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2023
J2599	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2023
J2601	N	$3.77	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		10/1/2024
J2650	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J2670	N	$40.01	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2014
J2675	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J2679	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2024
J2680	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
J2690	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
J2700	N	$1.28	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		7/1/2023
J2704	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
J2710	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J2720	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
J2724	N	$15.10	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J2725	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
J2730	N	$97.41	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J2765	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J2770	N	$262.20	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J2777	N	$36.09	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J2778	N	$395.54	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2016
J2779	N	$80.78	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J2781	N	$151.46	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J2782	N	$111.85	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J2783	N	$223.35	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J2785	N	$64.89	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		7/1/2023
J2786	N	$8.67	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2017
J2787	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2019
J2788	N	$35.70	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J2790	N	$121.74	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J2791	N	$4.76	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		10/1/2019
J2792	N	$18.90	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J2793	N	$23.86	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2015
J2794	N	$6.53	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J2795	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016
J2796	N	$55.27	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J2797	N	$0.94	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2019
J2798	N	$12.21	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		7/1/2024
J2799	N	$24.72	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J2800	N	$8.10	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		7/1/2024
J2801	N	$12.59	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J2802	N	$10.54	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
J2805	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2012
J2806	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		7/1/2023
J2810	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J2820	N	$31.76	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J2840	N	$530.00	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2017
J2850	N	$36.87	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J2860	N	$8.90	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2016
J2910	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J2916	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J2919	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2024
J2940	N	$42.30	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2017
J2941	N	$62.41	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2015
J2950	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J2993	N	$2,440.01	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J2995	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2013
J2997	N	$68.44	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J2998	N	$30.48	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J3000	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J3010	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
J3030	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
J3031	N	$2.51	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		10/1/2019
J3032	N	$15.40	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		10/1/2020
J3055	Y	$68.46	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J3060	N	$36.48	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2016
J3070	N	$117.99	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J3090	N	$0.12	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2016
J3095	N	$4.55	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J3101	N	$86.21	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J3105	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J3110	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
J3111	N	$11.49	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J3121	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
J3145	N	$1.15	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2016
J3230	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J3240	N	$1,420.44	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J3241	N	$347.10	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J3243	N	$2.08	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J3244	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2023
J3245	N	$133.18	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J3246	N	$9.01	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		10/1/2011
J3247	N	$17.72	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J3250	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J3260	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J3262	N	$3.77	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2016
J3263	N	$39.32	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J3265	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J3280	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J3285	N	$61.24	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J3299	N	$48.58	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J3300	N	$3.72	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J3301	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J3302	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J3303	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J3304	N	$20.34	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		7/1/2023
J3305	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
J3310	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2013
J3315	N	$180.19	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J3316	N	$2,875.19	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2019
J3320	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
J3350	N	$64.74	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
J3355	N	$66.29	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		10/1/2011
J3357	N	$163.47	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J3358	N	$12.97	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		10/1/2024
J3360	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
J3364	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J3365	N	$262.79	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2016
J3370	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J3371	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2023
J3372	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2023
J3380	N	$17.03	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2016
J3385	N	$350.59	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J3392	N	$2,332,000.00	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J3393	N	$2,968,000.00	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		7/1/2024
J3394	N	$3,286,000.00	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		7/1/2024
J3396	N	$10.89	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J3397	N	$218.77	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2019
J3398	N	$2,941.50	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2019
J3399	N	$2,222,890.60	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		7/1/2020
J3400	N	$17.74	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
J3401	N	$2,497.75	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2024
J3410	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J3411	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J3415	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J3420	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J3424	N	$2,080.17	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J3425	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2024
J3430	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J3465	N	$3.71	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J3470	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J3471	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J3472	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J3473	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
J3475	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J3480	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J3485	N	$1.51	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J3486	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
J3489	N	$13.37	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		7/1/2023
J3490	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J3520	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
J3530	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J3535	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
J3570	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		5/1/2015
J3590	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2011
J3591	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2019
J7030	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J7040	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J7042	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J7050	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J7060	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J7070	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J7100	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
J7110	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
J7120	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J7121	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2022
J7131	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2012
J7165	N	$3,285.90	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J7168	N	$2.36	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J7169	N	$308.99	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J7170	N	$52.82	OPPS Price Mcare APC St Ind F	Ambulatory Payment Classificat		10/1/2024
J7171	N	$34.57	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J7175	N	$6.51	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2017
J7177	N	$1.07	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2019
J7178	N	$0.91	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2014
J7179	N	$2.30	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2017
J7180	N	$7.05	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J7181	N	$13.69	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2015
J7182	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
J7183	N	$0.98	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J7185	N	$1.18	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
J7186	N	$0.96	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J7187	N	$0.99	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J7188	N	$4.90	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2016
J7189	N	$1.76	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J7190	N	$0.94	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J7191	N	$0.20	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2014
J7192	N	$1.15	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J7193	N	$1.05	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J7194	N	$1.13	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J7195	N	$1.37	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J7196	N	$102.38	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2015
J7197	N	$3.27	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J7198	N	$1.77	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J7199	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
J7200	N	$1.24	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		4/1/2015
J7201	N	$2.82	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		4/1/2015
J7202	N	$4.18	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2017
J7203	N	$3.65	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2019
J7204	N	$2.52	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		7/1/2020
J7205	N	$1.90	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2016
J7207	N	$1.55	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2017
J7208	N	$2.45	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J7209	N	$1.50	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2017
J7210	N	$1.41	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2018
J7211	N	$1.24	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2018
J7212	N	$2.59	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2021
J7213	N	$1.82	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J7214	N	$4.64	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J7294	N	$2,243.32	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2025
J7295	N	$174.56	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2025
J7296	N	$1,431.25	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2025
J7297	N	$1,097.90	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2025
J7298	N	$1,431.25	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
J7300	Y	$1,331.61	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2025
J7301	N	$1,191.76	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2025
J7304	Y	$19.29	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2025
J7306	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
J7307	Y	$1,419.28	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2025
J7308	N	$294.15	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J7309	N	$75.23	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		10/1/2011
J7310	N	$17,977.51	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J7311	N	$19,710.73	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J7312	Y	$201.21	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J7313	N	$490.95	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2016
J7314	N	$529.00	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J7315	N	$379.48	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2015
J7316	N	$1,046.75	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2016
J7318	N	$7.09	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		7/1/2023
J7320	N	$6.25	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		7/1/2018
J7321	N	$89.21	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J7322	N	$16.41	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2017
J7323	N	$148.51	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J7324	N	$177.07	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J7325	N	$12.66	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J7326	N	$561.43	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J7327	N	$979.01	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J7328	N	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2017
J7329	N	$6.99	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2019
J7330	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
J7331	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		10/1/2019
J7332	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		10/1/2019
J7336	N	$3.15	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2018
J7340	N	$201.84	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2017
J7342	N	$30.00	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2017
J7345	N	$1.37	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2019

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
J7351	N	$200.85	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		10/1/2020
J7352	N	$3,218.90	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2021
J7353	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2023
J7354	N	$728.65	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J7355	N	$191.58	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		7/1/2024
J7402	N	$10.25	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		4/1/2021
J7500	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J7501	N	$217.30	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J7502	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2011
J7503	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2016
J7504	N	$901.42	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J7505	N	$1,122.28	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		10/1/2011
J7507	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2011
J7508	N	$0.43	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		10/1/2017
J7509	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J7510	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J7511	N	$594.06	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2016
J7512	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016
J7513	N	$521.38	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		10/1/2011
J7514	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2025
J7515	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2011
J7516	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
J7517	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2011
J7518	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J7519	N	$0.73	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J7520	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2011
J7525	N	$149.11	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J7527	N	$8.62	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		10/1/2018
J7599	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J7601	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2025
J7604	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7605	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7606	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
J7607	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7608	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7609	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7610	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7611	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7612	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7613	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7614	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7615	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7620	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7622	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7624	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7626	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7627	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7628	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7629	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7631	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7632	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7633	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7634	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7635	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7636	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7637	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7638	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7639	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7640	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
J7641	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7642	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7643	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7644	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7645	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7647	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7648	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
J7649	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7650	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7657	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7658	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7659	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7660	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7665	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
J7667	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7668	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7669	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7670	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7674	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J7676	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7677	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		7/1/2019
J7680	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7681	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7682	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7683	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7684	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7685	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7686	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2011
J7699	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		11/1/2010
J7799	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J7999	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016
J8498	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
J8499	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2011
J8501	N	$8.48	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J8510	N	$12.62	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		10/1/2015
J8515	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
J8520	N	$0.32	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2024
J8521	N	$5.36	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2018
J8522	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2024
J8530	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
J8540	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J8541	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2024
J8560	N	$57.50	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J8562	N	$86.68	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
J8565	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2017
J8597	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J8600	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J8610	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J8611	N	$19.36	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		7/1/2024
J8612	N	$20.26	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		7/1/2024
J8650	N	$25.78	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2013
J8655	N	$474.85	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2016
J8670	N	$12.65	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2017
J8700	N	$3.37	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J8705	N	$97.67	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J8999	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
J9000	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J9015	N	$978.93	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		10/1/2011
J9017	N	$53.85	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J9019	N	$364.32	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J9020	N	$68.43	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J9021	N	$45.22	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2022
J9022	N	$88.22	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J9023	N	$96.95	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J9025	N	$3.46	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J9026	N	$1,575.42	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J9027	N	$134.31	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J9028	N	$94.87	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J9029	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2023
J9030	N	$2.82	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		7/1/2019
J9032	N	$31.64	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2016
J9033	N	$23.29	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
J9034	N	$23.79	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2017
J9035	N	$68.48	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J9036	N	$23.49	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		7/1/2019
J9037	N	$42.97	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		4/1/2021
J9039	N	$96.00	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2016
J9040	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J9041	N	$46.57	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J9042	N	$115.17	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J9043	N	$145.55	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J9045	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J9046	N	$49.16	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J9047	N	$31.06	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2016
J9048	N	$2.71	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J9049	N	$1.44	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J9050	N	$3,860.63	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2016
J9051	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		10/1/2023
J9052	N	$18.40	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J9055	N	$53.27	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J9056	N	$33.45	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J9057	N	$77.46	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2019
J9058	N	$20.78	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J9059	N	$20.78	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J9060	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J9061	N	$21.56	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J9063	N	$68.11	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J9064	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		10/1/2023
J9065	N	$22.96	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J9071	N	$3.76	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		4/1/2022
J9072	N	$3.76	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2024
J9073	N	$0.99	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J9074	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		4/1/2024
J9075	N	$0.93	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J9076	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
J9098	N	$560.53	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J9100	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J9118	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		10/1/2019
J9119	N	$28.24	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		10/1/2024
J9120	N	$1,164.57	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2016
J9130	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J9144	N	$43.85	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2021
J9145	N	$46.85	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2017
J9150	N	$26.27	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J9151	N	$57.12	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		10/1/2011
J9153	N	$248.41	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J9155	N	$3.48	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J9165	N	$13.66	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
J9171	N	$2.77	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J9172	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2024
J9173	N	$94.68	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		7/1/2023
J9175	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J9176	N	$6.25	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2017
J9177	N	$36.65	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J9178	N	$1.53	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		7/1/2020
J9179	N	$100.42	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J9181	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J9185	N	$168.30	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J9190	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J9196	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2023
J9198	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2020
J9200	N	$47.45	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2016
J9201	N	$5.48	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J9202	N	$269.92	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J9203	N	$193.16	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		7/1/2018
J9204	N	$243.32	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J9205	N	$39.55	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2017

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
J9206	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2013
J9207	N	$70.99	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J9208	N	$32.44	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J9209	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2011
J9210	N	$780.05	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		10/1/2019
J9211	N	$40.15	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J9212	N	$6.95	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
J9213	N	$53.66	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2015
J9214	N	$22.58	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J9215	N	$7.45	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
J9216	N	$588.19	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2015
J9217	N	$228.17	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J9218	N	$19.08	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2016
J9219	N	$168.48	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2016
J9223	N	$170.80	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2021
J9225	N	$2,980.19	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J9226	N	$21,173.64	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J9227	N	$79.35	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J9228	N	$135.59	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J9229	N	$2,208.27	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2019
J9230	N	$241.99	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2016
J9245	N	$1,292.39	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J9246	N	$30.79	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		7/1/2020
J9247	N	$509.85	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J9248	N	$702.24	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J9249	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		4/1/2024
J9255	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2024
J9258	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2024
J9259	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		7/1/2023
J9260	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J9261	N	$142.66	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J9262	N	$2.48	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2016

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
J9263	N	$0.52	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J9264	N	$9.68	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J9266	N	$6,218.44	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J9267	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016
J9268	N	$1,489.23	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J9269	N	$258.96	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		10/1/2019
J9270	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J9271	N	$45.69	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2016
J9272	N	$240.06	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J9273	N	$181.87	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J9274	N	$214.76	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		10/1/2024
J9280	N	$65.85	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J9281	N	$282.17	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2021
J9285	N	$55.20	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J9286	N	$2,770.91	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J9292	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2025
J9293	N	$31.95	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J9294	N	$10.55	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J9295	N	$5.28	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2017
J9296	N	$9.86	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J9297	N	$1.30	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J9298	N	$193.86	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J9299	N	$25.38	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2016
J9301	N	$54.21	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		4/1/2015
J9302	N	$48.32	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J9303	N	$97.27	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J9304	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		10/1/2020
J9305	N	$60.84	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J9306	N	$10.22	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2015
J9307	N	$204.81	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J9308	N	$53.97	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2016
J9309	N	$132.92	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J9311	N	$37.41	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
J9312	N	$118.80	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J9313	N	$23.39	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J9314	N	$13.29	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2023
J9316	N	$72.71	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2021
J9317	N	$35.44	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J9318	N	$34.34	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J9319	N	$31.96	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J9320	N	$336.91	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J9321	N	$55.19	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J9322	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		7/1/2023
J9323	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		7/1/2023
J9324	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2024
J9325	N	$46.28	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2017
J9328	N	$6.23	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J9329	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		10/1/2024
J9330	N	$60.08	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J9331	N	$117.45	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J9332	N	$32.45	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J9333	N	$22.54	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J9334	N	$32.65	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J9340	N	$132.44	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		10/1/2011
J9345	N	$29.83	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J9347	N	$136.09	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J9348	N	$642.29	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J9349	N	$12.66	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		4/1/2021
J9350	N	$641.07	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J9351	N	$1.98	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2016
J9352	N	$283.34	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2017
J9353	N	$49.40	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J9354	N	$29.21	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2016
J9355	N	$85.22	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J9356	N	$66.02	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J9357	N	$1,100.04	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
J9358	N	$28.81	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J9359	N	$212.12	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J9360	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
J9361	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2024
J9370	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
J9376	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		4/1/2024
J9380	N	$32.55	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J9381	N	$37.24	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
J9390	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2013
J9393	N	$21.47	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J9394	N	$53.00	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
J9395	N	$92.35	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
J9400	N	$8.32	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2016
J9600	N	$19,534.15	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2015
J9999	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
K0001	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0002	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0003	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0004	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0005	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0006	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0007	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0008	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		10/1/2013
K0009	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0010	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0011	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0012	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0013	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		10/1/2013
K0014	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0015	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0017	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0018	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0019	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
K0020	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0037	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0038	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0039	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0040	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0041	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0042	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0043	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0044	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0045	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0046	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0047	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0050	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0051	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0052	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0053	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0056	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0065	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0069	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0070	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0071	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0072	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0073	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0077	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0098	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2023
K0105	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0108	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0195	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0455	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0462	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0552	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0601	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0602	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
K0603	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2023
K0604	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0605	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0606	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0607	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0608	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0609	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0669	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0672	N	$102.70	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
K0730	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0733	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0738	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0739	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0740	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
K0743	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2014
K0744	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		10/1/2011
K0745	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		7/1/2011
K0746	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		7/1/2011
K0800	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0801	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0802	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0806	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0807	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0808	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0812	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0813	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0814	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0815	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0816	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0820	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0821	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0822	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
K0823	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0824	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0825	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0826	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0827	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0828	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0829	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0830	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0831	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0835	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0836	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0837	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0838	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0839	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0840	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0841	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0842	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0843	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0848	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0849	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0850	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0851	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0852	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0853	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0854	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0855	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0856	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0857	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0858	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0859	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0860	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0861	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0862	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
K0863	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0864	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0868	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0869	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0870	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0871	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0877	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0878	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0879	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0880	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0884	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0885	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0886	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0890	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0891	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0898	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0899	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
K0900	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		10/1/2013
K1004	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2020
K1007	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		10/1/2020
K1027	Y	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		10/1/2021
K1030	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		4/1/2022
K1034	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		7/1/2022
K1035	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		4/1/2023
K1036	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		10/1/2023
K1037	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		4/1/2024
L0112	Y	$1,695.33	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0113	Y	$345.45	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0120	Y	$43.80	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0130	Y	$183.80	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0140	Y	$73.58	OPPS NM Fee Sched APC St Ind	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
			A			
L0150	Y	$121.74	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0160	Y	$235.26	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0170	Y	$770.60	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0172	Y	$158.78	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0174	Y	$309.48	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0180	Y	$463.73	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0190	Y	$600.50	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0200	Y	$671.01	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0220	Y	$183.97	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0450	Y	$150.32	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		7/1/2023
L0452	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
L0454	Y	$420.10	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0455	Y	$247.34	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0456	Y	$1,764.69	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0457	Y	$840.72	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		7/1/2023
L0458	Y	$1,080.27	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0460	Y	$1,215.95	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0462	Y	$1,512.39	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0464	Y	$1,800.47	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0466	Y	$482.28	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0467	Y	$277.39	OPPS NM Fee Sched APC St Ind	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
			A			
L0468	Y	$558.34	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0469	Y	$353.45	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0470	Y	$718.26	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0472	Y	$501.36	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0480	Y	$1,727.51	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0482	Y	$2,559.12	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0484	Y	$2,002.10	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0486	Y	$2,160.40	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0488	Y	$1,215.95	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0490	Y	$342.63	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0491	Y	$930.26	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0492	Y	$602.90	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0621	Y	$102.30	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0622	Y	$291.04	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0623	Y	$125.91	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0624	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
L0625	Y	$57.24	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0626	Y	$138.32	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0627	Y	$497.92	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0628	Y	$87.14	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0629	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
L0630	Y	$287.31	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0631	Y	$1,821.54	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0632	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
L0633	Y	$347.36	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0634	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
L0635	Y	$1,198.47	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0636	Y	$1,624.70	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0637	Y	$1,471.59	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0638	Y	$1,597.56	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0639	Y	$1,471.59	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0640	Y	$1,267.43	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0641	Y	$80.97	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0642	Y	$347.53	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		7/1/2023
L0643	Y	$136.91	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		7/1/2023
L0648	Y	$1,066.41	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0649	Y	$204.55	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0650	Y	$1,012.37	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		7/1/2023
L0651	Y	$1,012.37	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		7/1/2023
L0700	Y	$2,311.88	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0710	Y	$2,490.50	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0720	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2025
L0810	Y	$3,085.42	OPPS NM Fee Sched APC St Ind	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
			A			
L0820	Y	$2,602.74	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0830	Y	$4,170.20	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0859	Y	$1,829.93	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0861	Y	$261.09	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0970	Y	$163.79	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0972	Y	$149.77	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0974	Y	$226.41	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0976	Y	$212.02	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0978	Y	$222.14	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0980	Y	$26.23	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0982	Y	$24.46	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0984	Y	$100.20	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L0999	Y	$100.00	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		11/1/2010
L1000	Y	$2,486.66	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1001	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2014
L1005	Y	$3,876.84	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1006	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		10/1/2024
L1010	Y	$89.12	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1020	Y	$123.48	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1025	Y	$140.49	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1030	Y	$95.55	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
L1040	Y	$99.89	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1050	Y	$120.92	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1060	Y	$117.35	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1070	Y	$114.80	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1080	Y	$64.58	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1085	Y	$195.01	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1090	Y	$115.49	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1100	Y	$199.05	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1110	Y	$290.27	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1120	Y	$52.61	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1200	Y	$2,030.10	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1210	Y	$431.81	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1220	Y	$417.89	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1230	Y	$640.41	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1240	Y	$138.38	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1250	Y	$134.24	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1260	Y	$135.06	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1270	Y	$129.87	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1280	Y	$97.19	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1290	Y	$129.71	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1300	Y	$3,177.54	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
L1310	Y	$2,089.61	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1320	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2024
L1499	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
L1600	Y	$193.57	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1610	Y	$51.29	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1620	Y	$150.94	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1630	Y	$279.65	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1640	Y	$598.63	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1650	Y	$274.90	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1652	Y	$431.80	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1653	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		10/1/2024
L1660	Y	$257.07	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1680	Y	$1,622.70	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1681	N	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		10/1/2023
L1685	Y	$1,340.06	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1686	Y	$1,027.67	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1690	Y	$2,342.32	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1700	Y	$1,932.48	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1710	Y	$2,484.98	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1720	Y	$1,843.50	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1730	Y	$1,459.25	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1755	Y	$1,783.67	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
L1810	Y	$120.49	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1812	Y	$82.06	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		7/1/2023
L1820	Y	$162.09	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1821	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		10/1/2024
L1830	Y	$89.60	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1831	Y	$356.49	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1832	Y	$684.93	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1833	Y	$508.43	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		7/1/2023
L1834	Y	$874.53	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1836	Y	$106.56	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		7/1/2023
L1840	Y	$1,272.82	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1843	Y	$1,086.84	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1844	Y	$1,880.12	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1845	Y	$1,055.22	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1846	Y	$1,937.03	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1847	Y	$696.71	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1848	Y	$696.71	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1850	Y	$246.13	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		7/1/2023
L1851	Y	$716.61	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		7/1/2023
L1852	Y	$688.22	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		7/1/2023
L1860	Y	$1,232.08	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
L1900	Y	$390.28	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1902	Y	$175.65	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1904	Y	$529.76	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1906	Y	$135.49	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1907	Y	$998.42	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1910	Y	$339.42	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1920	Y	$407.80	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1930	Y	$520.52	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1932	Y	$1,583.40	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1933	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2025
L1940	Y	$835.65	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1945	Y	$1,527.65	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1950	Y	$841.99	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1951	Y	$1,017.26	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1952	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2025
L1960	Y	$914.73	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1970	Y	$1,174.29	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1971	Y	$567.75	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1980	Y	$432.23	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L1990	Y	$502.18	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2000	Y	$1,142.69	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
L2005	Y	$4,963.44	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2006	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2025
L2010	Y	$1,115.86	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2020	Y	$1,926.95	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2030	Y	$1,153.85	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2034	Y	$2,543.66	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2035	Y	$209.85	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2036	Y	$3,217.28	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2037	Y	$1,876.44	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2038	Y	$1,610.72	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2040	Y	$200.02	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2050	Y	$932.52	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2060	Y	$736.55	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2070	Y	$152.65	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2080	Y	$432.95	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2090	Y	$524.73	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2106	Y	$942.75	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2108	Y	$1,309.74	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2112	Y	$638.11	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2114	Y	$738.69	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2116	Y	$884.99	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
L2126	Y	$1,349.05	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2128	Y	$1,931.80	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2132	Y	$1,025.23	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2134	Y	$1,282.27	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2136	Y	$1,451.75	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2180	Y	$175.92	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2182	Y	$129.23	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2184	Y	$167.92	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2186	Y	$169.61	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2188	Y	$394.68	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2190	Y	$112.78	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2192	Y	$444.34	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2200	Y	$104.61	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2210	Y	$110.93	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2220	Y	$144.18	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2230	Y	$90.95	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2232	Y	$117.04	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2240	Y	$94.23	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2250	Y	$586.40	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2260	Y	$233.06	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2265	Y	$259.14	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
L2270	Y	$88.62	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2275	Y	$215.61	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2280	Y	$747.27	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2300	Y	$592.44	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2310	Y	$184.79	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2320	Y	$252.92	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2330	Y	$686.79	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2335	Y	$255.93	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2340	Y	$914.63	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2350	Y	$1,069.69	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2360	Y	$113.84	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2370	Y	$330.62	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2375	Y	$169.73	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2380	Y	$184.93	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2385	Y	$285.38	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2387	Y	$186.44	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2390	Y	$123.32	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2395	Y	$235.03	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2397	Y	$193.43	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2405	Y	$154.71	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2415	Y	$215.52	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
L2425	Y	$254.36	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2430	Y	$173.64	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2492	Y	$128.23	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2500	Y	$414.44	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2510	Y	$939.99	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2520	Y	$593.41	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2525	Y	$1,373.30	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2526	Y	$771.65	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2530	Y	$266.86	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2540	Y	$506.66	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2550	Y	$473.97	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2570	Y	$715.47	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2580	Y	$522.86	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2600	Y	$308.51	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2610	Y	$356.25	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2024
L2620	Y	$352.47	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2622	Y	$460.64	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2624	Y	$400.58	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2627	Y	$1,931.31	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2628	Y	$1,887.48	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2630	Y	$329.88	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
L2640	Y	$433.66	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2650	Y	$162.87	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2660	Y	$253.61	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2670	Y	$256.23	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2680	Y	$235.06	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2750	Y	$181.38	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2755	Y	$158.31	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2760	Y	$91.27	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2768	Y	$231.12	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2780	Y	$111.69	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2785	Y	$52.31	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2795	Y	$110.35	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2800	Y	$176.03	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2810	Y	$97.94	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2820	Y	$143.31	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2830	Y	$155.04	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2840	Y	$96.14	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2850	Y	$75.06	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L2861	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
L2999	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
L3000	Y	$557.39	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3001	Y	$160.19	OPPS NM Fee Sched APC St Ind	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
			A			
L3002	Y	$195.60	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3003	Y	$211.06	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3010	Y	$211.06	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3020	Y	$240.31	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3030	Y	$92.45	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3031	Y	$148.34	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3040	Y	$57.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3050	Y	$57.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3060	Y	$89.34	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3070	Y	$38.50	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3080	Y	$38.50	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3090	Y	$49.32	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3100	Y	$52.36	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3140	Y	$107.87	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3150	Y	$98.59	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3160	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
L3161	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2024
L3170	Y	$61.61	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3201	Y	$80.73	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3202	Y	$80.73	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3203	Y	$167.06	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
L3204	Y	$80.73	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3206	Y	$80.73	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3207	Y	$80.73	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3208	Y	$10.00	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		11/1/2010
L3209	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
L3211	Y	$100.00	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		11/1/2010
L3212	Y	$80.73	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3213	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
L3214	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
L3215	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
L3216	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
L3217	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
L3219	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
L3221	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
L3222	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
L3224	Y	$66.25	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3225	Y	$113.78	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3230	Y	$100.00	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		11/1/2010
L3250	Y	$277.85	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3251	Y	$346.23	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3252	Y	$224.96	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3253	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
L3254	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
L3255	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
L3257	Y	$100.00	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		11/1/2010
L3260	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
L3265	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
L3300	Y	$63.15	OPPS NM Fee Sched APC St Ind	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
			A			
L3310	Y	$98.59	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3320	Y	$72.11	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3330	Y	$685.52	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3332	Y	$89.34	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3334	Y	$46.21	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3340	Y	$103.19	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3350	Y	$40.59	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3360	Y	$43.14	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3370	Y	$60.08	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3380	Y	$60.08	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3390	Y	$88.01	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3400	Y	$49.32	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3410	Y	$112.49	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3420	Y	$66.23	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3430	Y	$194.11	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3440	Y	$92.45	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3450	Y	$127.84	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3455	Y	$49.32	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3460	Y	$41.58	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3465	Y	$70.86	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
L3470	Y	$75.48	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3480	Y	$75.48	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3485	Y	$22.82	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3500	Y	$35.47	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3510	Y	$35.47	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3520	Y	$38.50	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3530	Y	$38.50	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3540	Y	$90.26	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3550	Y	$10.80	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3560	Y	$27.71	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3570	Y	$103.19	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3580	Y	$78.57	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3590	Y	$64.72	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3595	Y	$50.82	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3600	Y	$92.45	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3610	Y	$121.69	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3620	Y	$92.45	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3630	Y	$121.69	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3640	Y	$52.36	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3649	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
L3650	Y	$71.65	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
L3660	Y	$113.31	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3670	Y	$129.43	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3671	Y	$993.31	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3674	Y	$1,908.78	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3675	Y	$193.46	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3677	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2011
L3678	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2014
L3702	Y	$318.34	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3710	Y	$163.77	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3720	Y	$1,225.23	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3730	Y	$1,223.41	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3740	Y	$1,570.95	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3760	Y	$551.28	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3761	Y	$551.28	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3762	Y	$118.56	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3763	Y	$771.77	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3764	Y	$838.58	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3765	Y	$1,413.50	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3766	Y	$1,496.80	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3806	Y	$500.75	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3807	Y	$403.80	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3808	Y	$368.38	OPPS NM Fee Sched APC St Ind	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
			A			
L3809	Y	$275.66	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3891	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
L3900	Y	$1,441.02	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3901	Y	$1,771.62	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3904	Y	$3,228.39	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3905	Y	$1,093.19	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3906	Y	$435.61	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3908	Y	$96.75	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3912	Y	$137.44	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3913	Y	$298.58	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3915	Y	$586.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3916	Y	$586.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3917	Y	$116.42	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3918	Y	$116.42	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3919	Y	$437.37	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3921	Y	$354.06	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3923	Y	$95.90	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3924	Y	$95.90	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3925	Y	$59.24	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3927	Y	$56.51	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3929	Y	$101.40	OPPS NM Fee Sched APC St Ind	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
			A			
L3930	Y	$101.40	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3931	Y	$226.45	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3933	Y	$235.21	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3935	Y	$243.59	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3956	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
L3960	Y	$987.86	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3961	Y	$1,852.10	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3962	Y	$790.98	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3967	Y	$2,186.77	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3971	Y	$2,075.70	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3973	Y	$2,186.77	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3975	Y	$1,852.10	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3976	Y	$1,852.10	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3977	Y	$2,075.70	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3978	Y	$2,186.77	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3980	Y	$405.82	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3981	Y	$1,109.63	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3982	Y	$457.96	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3984	Y	$398.42	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3995	Y	$47.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L3999	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
L4000	Y	$1,518.03	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L4002	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
L4010	Y	$775.80	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L4020	Y	$1,134.52	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L4030	Y	$741.91	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L4040	Y	$483.56	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L4045	Y	$369.55	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L4050	Y	$465.10	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L4055	Y	$306.80	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L4060	Y	$358.03	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L4070	Y	$399.10	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L4080	Y	$113.95	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L4090	Y	$128.71	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L4100	Y	$132.17	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L4110	Y	$105.72	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L4130	Y	$651.44	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L4205	Y	$26.11	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L4210	Y	$200.00	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		11/1/2010
L4350	Y	$103.57	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L4360	Y	$311.94	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L4361	Y	$456.95	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L4370	Y	$212.68	OPPS NM Fee Sched APC St Ind	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
			A			
L4386	Y	$192.04	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L4387	Y	$281.31	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L4392	Y	$28.53	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L4394	Y	$20.82	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L4396	Y	$203.33	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L4397	Y	$297.84	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L4398	Y	$93.58	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L4631	Y	$1,791.67	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5000	Y	$1,184.43	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5010	Y	$1,835.99	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5020	Y	$2,758.11	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5050	Y	$3,472.04	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5060	Y	$3,923.23	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5100	Y	$3,411.85	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5105	Y	$4,169.58	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5150	Y	$4,970.07	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5160	Y	$5,229.10	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5200	Y	$4,544.48	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5210	Y	$3,359.12	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5220	Y	$4,220.06	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
L5230	Y	$5,001.93	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5250	Y	$6,771.68	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5270	Y	$6,434.44	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5280	Y	$7,004.30	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5301	Y	$4,848.87	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5312	Y	$4,418.12	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5321	Y	$4,618.17	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5331	Y	$6,952.47	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5341	Y	$7,255.33	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5400	Y	$1,711.73	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5410	Y	$668.64	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5420	Y	$2,192.12	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5430	Y	$805.31	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5450	Y	$651.98	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5460	Y	$872.63	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5500	Y	$1,722.39	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5505	Y	$2,783.46	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5510	Y	$2,047.69	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5520	Y	$2,301.34	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5530	Y	$2,378.32	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5535	Y	$2,382.99	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
L5540	Y	$2,555.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5560	Y	$3,072.83	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5570	Y	$3,033.88	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5580	Y	$3,387.54	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5585	Y	$3,398.71	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5590	Y	$3,325.38	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5595	Y	$4,832.77	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5600	Y	$5,336.83	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5610	Y	$2,880.03	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5611	Y	$1,933.80	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5613	Y	$2,978.62	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5614	Y	$2,047.94	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5615	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2024
L5616	Y	$2,173.49	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5617	Y	$679.02	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5618	Y	$362.60	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5620	Y	$651.74	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5622	Y	$580.16	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5624	Y	$581.81	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5626	Y	$638.91	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5628	Y	$689.53	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
L5629	Y	$744.98	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5630	Y	$620.84	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5631	Y	$703.15	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5632	Y	$266.50	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5634	Y	$365.10	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5636	Y	$305.82	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5637	Y	$677.22	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5638	Y	$605.83	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5639	Y	$1,345.68	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5640	Y	$767.47	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5642	Y	$766.96	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5643	Y	$2,009.21	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5644	Y	$845.68	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5645	Y	$1,405.68	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5646	Y	$853.66	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5647	Y	$1,398.56	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5648	Y	$931.13	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5649	Y	$2,916.25	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5650	Y	$687.59	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5651	Y	$1,921.85	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5652	Y	$610.50	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
L5653	Y	$715.04	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5654	Y	$473.15	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5655	Y	$539.19	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5656	Y	$456.24	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5658	Y	$436.40	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5661	Y	$730.41	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5665	Y	$656.78	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5666	Y	$112.02	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5668	Y	$236.73	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5670	Y	$434.25	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5671	Y	$1,010.87	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5672	Y	$357.90	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5673	Y	$1,288.05	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5676	Y	$566.43	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5677	Y	$789.04	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5678	Y	$63.54	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5679	Y	$1,073.33	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5680	Y	$391.80	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5681	Y	$1,596.41	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5682	Y	$765.83	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5683	Y	$1,596.41	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
L5684	Y	$64.61	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5685	Y	$227.67	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5686	Y	$64.84	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5688	Y	$92.17	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5690	Y	$129.48	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5692	Y	$212.64	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5694	Y	$290.32	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5695	Y	$260.98	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5696	Y	$266.41	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5697	Y	$96.35	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5698	Y	$143.64	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5699	Y	$223.79	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5700	Y	$3,438.61	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5701	Y	$4,129.52	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5702	Y	$5,224.47	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5703	Y	$3,198.89	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5704	Y	$942.33	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5705	Y	$1,149.41	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5706	Y	$1,126.76	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5707	Y	$1,485.50	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5710	Y	$513.72	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
L5711	Y	$650.70	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5712	Y	$681.93	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5714	Y	$576.12	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5716	Y	$1,018.36	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5718	Y	$1,123.52	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5722	Y	$1,092.22	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5724	Y	$2,415.55	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5726	Y	$2,783.86	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5728	Y	$2,974.22	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5780	Y	$1,583.27	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5781	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
L5782	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
L5783	Y	$3,015.92	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5785	Y	$695.28	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5790	Y	$1,150.66	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5795	Y	$1,718.25	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5810	Y	$645.18	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5811	Y	$955.72	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5812	Y	$723.20	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5814	Y	$4,507.31	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5816	Y	$1,163.29	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5818	Y	$1,166.41	OPPS NM Fee Sched APC St Ind	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
			A			
L5822	Y	$2,043.89	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5824	Y	$2,192.66	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5826	Y	$3,790.07	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5827	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2025
L5828	Y	$3,389.41	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5830	Y	$2,499.62	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5840	Y	$4,210.69	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5841	Y	$3,023.20	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5845	Y	$2,175.31	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5848	Y	$1,305.05	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5850	Y	$204.71	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5855	Y	$412.54	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5856	Y	$29,134.51	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5857	Y	$10,338.04	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5858	Y	$22,555.79	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5859	Y	$17,609.11	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5910	Y	$849.02	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5920	Y	$849.12	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5925	Y	$537.72	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5926	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		1/1/2024
L5930	Y	$4,084.99	OPPS NM Fee Sched APC St Ind	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
			A			
L5940	Y	$1,175.88	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5950	Y	$1,245.07	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5960	Y	$1,542.77	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5961	Y	$5,722.76	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5962	Y	$761.44	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5964	Y	$1,124.06	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5966	Y	$1,432.32	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5968	Y	$6,460.34	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5969	Y	$14,609.02	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5970	Y	$273.18	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5971	Y	$273.18	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5972	Y	$753.35	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5973	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
L5974	Y	$318.16	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5975	Y	$562.67	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5976	Y	$728.57	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5978	Y	$408.49	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5979	Y	$2,738.66	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5980	Y	$4,707.08	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5981	Y	$5,265.78	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5982	Y	$751.24	OPPS NM Fee Sched APC St Ind	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
			A			
L5984	Y	$806.92	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5985	Y	$342.69	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5986	Y	$1,176.17	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5987	Y	$8,730.64	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5988	Y	$2,424.49	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5990	Y	$2,201.77	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5991	N	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L5999	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
L6000	Y	$1,796.47	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6010	Y	$1,807.46	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6020	Y	$1,797.87	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6026	Y	$4,499.94	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6028	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2025
L6029	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2025
L6030	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2025
L6031	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2025
L6032	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2025
L6033	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2025
L6037	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2025
L6050	Y	$2,761.92	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6055	Y	$3,407.06	OPPS NM Fee Sched APC St Ind	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
			A			
L6100	Y	$2,833.67	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6110	Y	$3,007.98	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6120	Y	$3,391.51	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6130	Y	$3,142.64	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6200	Y	$3,823.62	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6205	Y	$4,370.76	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6250	Y	$3,965.12	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6300	Y	$4,774.81	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6310	Y	$3,833.78	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6320	Y	$2,306.48	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6350	Y	$4,701.26	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6360	Y	$3,822.98	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6370	Y	$2,665.30	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6380	Y	$1,575.58	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6382	Y	$1,869.17	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6384	Y	$2,317.16	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6386	Y	$536.57	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6388	Y	$599.65	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6400	Y	$3,010.47	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6450	Y	$3,700.45	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
L6500	Y	$3,733.81	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6550	Y	$4,576.82	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6570	Y	$5,253.31	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6580	Y	$1,972.29	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6582	Y	$1,829.11	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6584	Y	$2,672.10	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6586	Y	$2,629.02	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6588	Y	$3,619.53	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6590	Y	$3,549.76	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6600	Y	$300.18	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6605	Y	$296.40	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6610	Y	$242.74	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6611	Y	$499.69	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6615	Y	$233.03	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6616	Y	$99.05	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6620	Y	$402.65	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6621	Y	$2,775.96	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6623	Y	$808.48	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6624	Y	$4,570.70	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6625	Y	$851.13	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6628	Y	$619.54	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
L6629	Y	$213.02	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6630	Y	$344.90	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6632	Y	$77.98	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6635	Y	$265.54	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6637	Y	$517.46	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6638	Y	$3,034.99	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6640	Y	$432.91	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6641	Y	$234.13	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6642	Y	$278.72	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6645	Y	$483.43	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6646	Y	$3,827.79	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6647	Y	$630.19	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6648	Y	$3,947.86	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6650	Y	$507.58	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6655	Y	$111.12	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6660	Y	$123.90	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6665	Y	$73.70	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6670	Y	$76.74	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6672	Y	$213.54	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6675	Y	$149.75	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6676	Y	$157.43	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
L6677	Y	$360.05	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6680	Y	$371.28	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6682	Y	$363.57	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6684	Y	$418.37	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6686	Y	$777.86	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6687	Y	$692.31	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6688	Y	$818.25	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6689	Y	$856.23	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6690	Y	$929.03	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6691	Y	$414.31	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6692	Y	$854.02	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6693	Y	$3,445.50	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6694	Y	$879.31	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6695	Y	$732.72	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6696	Y	$1,596.41	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6697	Y	$1,596.41	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6698	Y	$690.08	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6700	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2025
L6703	Y	$396.94	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6704	Y	$930.88	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6706	Y	$482.93	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
L6707	Y	$1,718.43	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6708	Y	$1,154.92	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6709	Y	$1,694.49	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6711	Y	$815.95	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6712	Y	$1,502.35	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6713	Y	$1,896.06	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6714	Y	$1,605.97	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6715	Y	$3,831.64	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6721	Y	$2,854.45	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6722	Y	$2,460.73	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6805	Y	$510.75	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6810	Y	$298.51	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6880	Y	$28,996.90	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6881	Y	$4,961.67	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6882	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
L6883	Y	$2,239.60	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6884	Y	$3,361.23	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6885	Y	$3,822.98	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6890	Y	$221.28	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6895	Y	$670.20	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6900	Y	$1,855.75	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
L6905	Y	$1,762.21	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6910	Y	$1,736.52	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6915	Y	$751.38	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6920	Y	$8,795.48	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6925	Y	$9,287.27	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6930	Y	$9,442.96	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6935	Y	$10,387.18	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6940	Y	$11,801.69	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6945	Y	$13,350.47	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6950	Y	$12,547.46	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6955	Y	$15,745.30	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6960	Y	$15,525.65	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6965	Y	$22,680.77	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6970	Y	$23,053.46	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L6975	Y	$23,177.19	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L7007	Y	$5,506.82	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L7008	Y	$8,667.15	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L7009	Y	$5,618.69	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L7040	Y	$4,511.59	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L7045	Y	$2,586.65	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L7170	Y	$9,383.51	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
L7180	Y	$49,026.62	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L7181	Y	$48,628.26	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L7185	Y	$9,502.06	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L7186	Y	$13,713.78	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L7190	Y	$12,089.57	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L7191	Y	$14,577.32	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L7259	Y	$4,608.61	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L7360	Y	$289.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L7362	Y	$347.61	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L7364	Y	$633.19	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L7366	Y	$858.99	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L7367	Y	$472.48	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L7368	Y	$612.54	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L7400	Y	$371.97	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L7401	Y	$416.42	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L7402	Y	$449.69	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L7403	Y	$446.94	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L7404	Y	$674.54	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L7405	Y	$882.24	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L7406	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2025
L7499	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
L7510	Y	$93.55	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L7520	Y	$30.64	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L7600	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
L7700	Y	$135.46	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L7900	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
L7902	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		7/5/2013
L8000	Y	$45.02	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8001	Y	$152.23	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8002	Y	$200.23	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8010	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
L8015	Y	$72.74	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8020	Y	$272.69	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8030	Y	$400.37	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8031	Y	$400.37	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8032	Y	$47.54	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8033	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2020
L8035	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
L8039	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
L8040	Y	$2,892.73	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8041	Y	$3,486.72	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8042	Y	$3,917.66	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8043	Y	$4,387.76	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8044	Y	$4,857.88	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8045	Y	$3,041.98	OPPS NM Fee Sched APC St Ind	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
			A			
L8046	Y	$3,134.11	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8047	Y	$1,606.25	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8048	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2015
L8049	Y	$23.06	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8300	Y	$101.25	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8310	Y	$159.85	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8320	Y	$73.81	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8330	Y	$79.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8400	Y	$18.89	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8410	Y	$27.61	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8415	Y	$28.08	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8417	Y	$91.26	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8420	Y	$36.56	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8430	Y	$27.40	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8435	Y	$28.94	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8440	Y	$53.01	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8460	Y	$92.24	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8465	Y	$65.73	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8470	Y	$14.07	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8480	Y	$12.62	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8485	Y	$13.35	OPPS NM Fee Sched APC St Ind	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
			A			
L8499	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
L8500	Y	$933.10	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8501	Y	$212.39	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8505	Y	$6.56	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8507	Y	$50.83	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8509	Y	$132.55	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8510	Y	$306.70	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8511	Y	$88.26	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8512	Y	$2.65	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8513	Y	$6.34	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8514	Y	$114.44	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8515	Y	$76.61	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8600	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
L8603	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2021
L8604	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
L8605	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
L8606	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
L8607	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016
L8608	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2019
L8609	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
L8610	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
L8612	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
L8613	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
L8614	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
L8615	Y	$547.39	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
L8616	Y	$127.50	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8617	Y	$111.39	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8618	Y	$31.82	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8619	Y	$9,972.82	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8621	Y	$0.75	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8622	Y	$0.39	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8623	Y	$78.48	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8624	Y	$195.70	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8625	Y	$229.22	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8627	Y	$8,471.44	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8628	Y	$1,501.40	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8629	Y	$217.30	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8630	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
L8631	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
L8641	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
L8642	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
L8658	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
L8659	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
L8670	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
L8678	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2023
L8679	Y	$10,126.67	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8680	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
L8681	Y	$1,294.82	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8682	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
L8683	Y	$6,368.72	OPPS NM Fee Sched APC St Ind	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
			A			
L8684	Y	$937.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8685	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
L8686	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
L8687	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
L8688	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
L8689	Y	$2,093.50	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8690	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
L8691	Y	$2,090.09	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8692	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
L8693	Y	$1,840.31	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8694	Y	$1,146.18	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8695	Y	$20.21	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8696	Y	$263.05	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
L8698	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2019
L8699	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
L8701	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2019
L8702	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2019
L8720	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
L8721	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2024
L9900	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
M0001	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M0002	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M0003	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M0004	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M0005	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M0010	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2023
M0075	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
M0076	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
M0100	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
M0201	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		5/12/2023
M0220	Y	$152.40	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2025
M0221	Y	$253.66	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2025
M0222	Y	$354.92	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2025
M0223	Y	$557.44	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2025
M0224	N	$450.50	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		3/22/2024
M0240	Y	$455.67	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2025
M0241	Y	$759.45	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2025
M0243	Y	$477.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
M0244	Y	$795.52	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2025
M0245	Y	$477.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
M0246	Y	$795.52	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2025
M0247	Y	$455.67	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2025
M0248	Y	$759.45	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2025
M0249	Y	$455.67	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2025
M0250	Y	$455.67	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2025
M0300	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
M0301	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
M1003	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
M1004	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
M1005	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
M1006	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
M1007	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
M1008	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
M1009	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
M1010	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
M1011	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
M1012	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
M1013	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
M1014	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
M1016	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
M1018	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
M1019	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
M1020	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
M1021	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
M1027	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
M1028	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
M1029	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
M1032	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
M1034	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
M1035	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
M1036	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
M1037	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
M1038	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
M1039	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
M1040	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
M1041	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
M1043	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
M1045	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
M1046	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
M1049	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
M1051	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
M1052	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
M1054	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
M1055	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
M1056	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
M1057	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
M1058	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
M1059	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
M1060	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
M1067	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
M1068	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
M1069	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019
M1070	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2019

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
M1072	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
M1073	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
M1074	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
M1075	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
M1076	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
M1077	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
M1078	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
M1079	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
M1080	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
M1081	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
M1082	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
M1083	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
M1084	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
M1085	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
M1086	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
M1087	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
M1088	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
M1089	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
M1094	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
M1095	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
M1096	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
M1097	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
M1098	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
M1099	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
M1100	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
M1101	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
M1102	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
M1103	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
M1104	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
M1105	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2022
M1106	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
M1107	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
M1108	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
M1109	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
M1110	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
M1111	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
M1112	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
M1113	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
M1114	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
M1115	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
M1116	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
M1117	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
M1118	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
M1119	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
M1120	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
M1121	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
M1122	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
M1123	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
M1124	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
M1125	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
M1126	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
M1127	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
M1128	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
M1129	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
M1130	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
M1131	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
M1132	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
M1133	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
M1134	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
M1135	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
M1141	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
M1142	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
M1143	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2020
M1146	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2021
M1147	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2021
M1148	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2021

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
M1149	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2021
M1150	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1151	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1152	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1153	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1154	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1155	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1159	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1160	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1161	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1162	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1163	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1164	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1165	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1166	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1167	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1168	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1169	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1170	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1171	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1172	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1173	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1174	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1175	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1176	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1177	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1178	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1179	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1180	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1181	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1182	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1183	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1184	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
M1185	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1186	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1187	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1188	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1189	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1190	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1191	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1192	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1193	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1194	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1195	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1196	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1197	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1198	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1199	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1200	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1201	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1202	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1203	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1204	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1205	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1206	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1207	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1208	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1209	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1210	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2023
M1211	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1212	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1213	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1214	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1215	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1216	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1217	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
M1218	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1219	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1220	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1221	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1222	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1223	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1224	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1225	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1226	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1227	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1228	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1229	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1230	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1231	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1232	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1233	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1234	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1235	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1236	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1237	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1238	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1239	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1240	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1241	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1242	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1243	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1244	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1245	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1246	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1247	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1248	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1249	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1250	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
M1251	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1252	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1253	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1254	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1255	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1256	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1257	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1258	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1259	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1260	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1261	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1262	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1263	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1264	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1265	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1266	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1267	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1268	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1269	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1270	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1271	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1272	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1273	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1274	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1275	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1276	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1277	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1278	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1279	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1280	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1281	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1282	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1283	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
M1284	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1285	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1286	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1287	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1288	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1289	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1290	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1291	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1292	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1293	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1294	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1295	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1296	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1297	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1298	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1299	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1300	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1301	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1302	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1303	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1304	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1305	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1306	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1307	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1308	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1309	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1310	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1311	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1312	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1313	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1314	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1315	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1316	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
M1317	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1318	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1319	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1320	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1321	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1322	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1323	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1324	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1325	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1326	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1327	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1328	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1329	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1330	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1331	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1332	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1333	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1334	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1335	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1336	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1337	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1338	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1339	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1340	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1341	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1342	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1343	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1344	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1345	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1346	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1347	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1348	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1349	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
M1350	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1351	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1352	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1353	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1354	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1355	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1356	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1357	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1358	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1359	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1360	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1361	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1362	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1363	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1364	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1365	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1366	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1367	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1368	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1369	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1370	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2024
M1371	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1372	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1373	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1374	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1375	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1376	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1377	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1378	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1379	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1380	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1381	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1382	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
M1383	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1384	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1385	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1386	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1387	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1388	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1390	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1391	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1392	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1393	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1394	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1395	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1396	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1397	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1398	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1399	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1400	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1401	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1402	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1403	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1404	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1405	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1406	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1407	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1408	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1409	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1410	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1411	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1412	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1413	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1414	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1415	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1416	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
M1417	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1418	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1419	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1420	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1421	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1422	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1423	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1424	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
M1425	Y	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
P2028	Y	$4.95	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
P2029	Y	$4.95	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
P2031	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
P2033	Y	$4.95	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
P2038	Y	$4.95	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
P3000	Y	$17.76	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
P3001	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
P7001	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
P9010	Y	$206.25	OPPS Price Mcare APC St Ind R	Ambulatory Payment Classificat		11/1/2010
P9011	Y	$87.39	OPPS Price Mcare APC St Ind R	Ambulatory Payment Classificat		11/1/2010
P9012	Y	$46.58	OPPS Price Mcare APC St Ind R	Ambulatory Payment Classificat		11/1/2010
P9016	Y	$186.73	OPPS Price Mcare APC St Ind R	Ambulatory Payment Classificat		11/1/2010
P9017	Y	$76.02	OPPS Price Mcare APC St Ind R	Ambulatory Payment Classificat		11/1/2010
P9019	Y	$66.61	OPPS Price Mcare APC St Ind R	Ambulatory Payment Classificat		11/1/2010
P9020	Y	$136.79	OPPS Price Mcare APC St Ind R	Ambulatory Payment Classificat		11/1/2010
P9021	Y	$141.73	OPPS Price Mcare APC St Ind R	Ambulatory Payment Classificat		11/1/2010
P9022	Y	$246.00	OPPS Price Mcare APC St Ind R	Ambulatory Payment Classificat		11/1/2010
P9023	Y	$51.15	OPPS Price Mcare APC St Ind R	Ambulatory Payment Classificat		11/1/2010
P9025	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2021
P9026	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2021
P9027	Y	$53.08	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		10/1/2024

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
P9031	Y	$104.76	OPPS Price Mcare APC St Ind R	Ambulatory Payment Classificat		11/1/2010
P9032	Y	$150.45	OPPS Price Mcare APC St Ind R	Ambulatory Payment Classificat		11/1/2010
P9033	Y	$131.95	OPPS Price Mcare APC St Ind R	Ambulatory Payment Classificat		11/1/2010
P9034	Y	$469.11	OPPS Price Mcare APC St Ind R	Ambulatory Payment Classificat		11/1/2010
P9035	Y	$512.11	OPPS Price Mcare APC St Ind R	Ambulatory Payment Classificat		11/1/2010
P9036	Y	$357.96	OPPS Price Mcare APC St Ind R	Ambulatory Payment Classificat		11/1/2010
P9037	Y	$676.57	OPPS Price Mcare APC St Ind R	Ambulatory Payment Classificat		11/1/2010
P9038	Y	$225.80	OPPS Price Mcare APC St Ind R	Ambulatory Payment Classificat		11/1/2010
P9039	Y	$363.91	OPPS Price Mcare APC St Ind R	Ambulatory Payment Classificat		11/1/2010
P9040	Y	$245.02	OPPS Price Mcare APC St Ind R	Ambulatory Payment Classificat		11/1/2010
P9041	Y	$10.91	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
P9043	Y	$20.13	OPPS Price Mcare APC St Ind R	Ambulatory Payment Classificat		1/1/2015
P9044	Y	$94.60	OPPS Price Mcare APC St Ind R	Ambulatory Payment Classificat		11/1/2010
P9045	Y	$54.54	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
P9046	Y	$22.49	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
P9047	Y	$53.44	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
P9048	Y	$47.16	OPPS Price Mcare APC St Ind R	Ambulatory Payment Classificat		1/1/2015
P9050	Y	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2017
P9051	Y	$135.32	OPPS Price Mcare APC St Ind R	Ambulatory Payment Classificat		11/1/2010
P9052	Y	$736.68	OPPS Price Mcare APC St Ind R	Ambulatory Payment Classificat		11/1/2010
P9053	Y	$656.72	OPPS Price Mcare APC St Ind R	Ambulatory Payment Classificat		11/1/2010
P9054	Y	$103.62	OPPS Price Mcare APC St Ind R	Ambulatory Payment Classificat		11/1/2010
P9055	Y	$419.23	OPPS Price Mcare APC St Ind R	Ambulatory Payment Classificat		11/1/2010
P9056	Y	$165.16	OPPS Price Mcare APC St Ind R	Ambulatory Payment Classificat		11/1/2010
P9057	Y	$363.04	OPPS Price Mcare APC St Ind R	Ambulatory Payment Classificat		11/1/2010
P9058	Y	$293.92	OPPS Price Mcare APC St Ind R	Ambulatory Payment Classificat		11/1/2010
P9059	Y	$77.46	OPPS Price Mcare APC St Ind R	Ambulatory Payment Classificat		11/1/2010
P9060	Y	$71.88	OPPS Price Mcare APC St Ind R	Ambulatory Payment Classificat		11/1/2010
P9070	Y	$73.08	OPPS Price Mcare APC St Ind R	Ambulatory Payment Classificat		1/1/2016
P9071	Y	$72.56	OPPS Price Mcare APC St Ind R	Ambulatory Payment Classificat		1/1/2016
P9073	Y	$624.93	OPPS Price Mcare APC St Ind R	Ambulatory Payment Classificat		1/1/2019
P9099	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2020

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
P9100	Y	$25.50	OPPS Price Mcare APC St Ind R	Ambulatory Payment Classificat		1/1/2019
P9603	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
P9604	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
P9612	Y	$10.28	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
P9615	Y	$0.00	OPPS PackagdServ APC St Ind N	APC Medicare CLAB NM FEE		1/1/2021
Q0035	Y	$237.95	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
Q0081	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2015
Q0083	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2015
Q0084	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2015
Q0085	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q0091	Y	$29.23	OPPS Price Mcare APC St Ind S	Ambulatory Payment Classificat		1/1/2015
Q0092	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
Q0111	Y	$20.77	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
Q0112	N	$8.75	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
Q0113	Y	$4.27	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
Q0114	Y	$14.61	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		1/1/2025
Q0115	Y	$25.00	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
Q0138	N	$0.79	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2016
Q0139	N	$0.79	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2016
Q0144	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
Q0155	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2025
Q0161	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
Q0162	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2012
Q0163	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016
Q0164	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016
Q0166	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
Q0167	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016
Q0169	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016
Q0173	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
Q0174	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2017
Q0175	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016
Q0177	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016
Q0180	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
Q0181	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
Q0220	N	$0.01	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2025
Q0221	N	$0.01	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2025
Q0222	N	$2,424.18	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2025
Q0224	N	$0.00	OPPS Price Mcare APC St Ind L	Ambulatory Payment Classificat		3/22/2024
Q0240	N	$0.01	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2025
Q0243	N	$0.01	OPPS Price Mcare APC St Ind L	Ambulatory Payment Classificat		1/1/2025
Q0244	N	$0.01	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2025
Q0245	N	$0.01	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2025
Q0247	N	$2,424.18	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2025
Q0249	N	$6.65	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2025
Q0477	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2018
Q0478	Y	$223.03	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
Q0479	Y	$14,532.85	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
Q0480	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
Q0481	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
Q0482	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
Q0483	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
Q0484	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
Q0485	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
Q0486	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
Q0487	Y	$414.27	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
Q0488	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
Q0489	Y	$19,727.48	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
Q0490	Y	$853.35	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
Q0491	Y	$1,341.50	OPPS NM Fee Sched APC St Ind	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
			A			
Q0492	Y	$108.11	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
Q0493	Y	$307.68	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
Q0494	Y	$260.35	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
Q0495	Y	$5,069.46	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
Q0496	Y	$1,819.49	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
Q0497	Y	$568.13	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
Q0498	Y	$623.37	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
Q0499	Y	$202.56	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
Q0500	Y	$37.06	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
Q0501	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
Q0502	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
Q0503	Y	$1,578.21	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
Q0504	Y	$832.75	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
Q0506	Y	$1,036.61	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
Q0507	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2013
Q0508	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2013
Q0509	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2013
Q0510	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q0511	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q0512	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2015
Q0513	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q0514	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q0515	N	$1.90	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
Q0516	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/2/2024

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
Q0517	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/2/2024
Q0518	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/2/2024
Q0519	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		9/15/2024
Q0520	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		9/15/2024
Q0521	N	$0.00	OPPS Not Payable APC St Ind M	Ambulatory Payment Classificat		1/1/2025
Q1004	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
Q1005	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
Q2004	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2011
Q2009	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
Q2017	N	$319.35	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		10/1/2011
Q2026	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2015
Q2028	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2015
Q2033	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		7/1/2013
Q2034	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2014
Q2035	N	$17.69	OPPS Price Mcare APC St Ind L	Ambulatory Payment Classificat	VFC Antigen	10/1/2017
Q2036	N	$9.09	OPPS Price Mcare APC St Ind L	Ambulatory Payment Classificat	VFC Antigen	1/1/2025
Q2037	N	$18.75	OPPS Price Mcare APC St Ind L	Ambulatory Payment Classificat	VFC Antigen	1/1/2025
Q2038	N	$14.75	OPPS Price Mcare APC St Ind L	Ambulatory Payment Classificat	VFC Antigen	1/1/2025
Q2039	N	$13.78	OPPS Price Mcare APC St Ind L	Ambulatory Payment Classificat	VFC Antigen	1/1/2025
Q2041	N	$0.00	OPPS NM Medicaid Not Covered	Not Available		4/1/2018
Q2042	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2019
Q2043	N	$35,880.08	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
Q2049	N	$538.93	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
Q2050	N	$488.48	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
Q2052	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2015
Q2053	N	$488,051.51	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
Q2054	N	$516,485.97	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
Q2055	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2022
Q2056	N	$551,318.34	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
Q2057	Y	$770,620.00	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		4/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
Q3001	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q3014	Y	$30.43	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
Q3027	N	$38.50	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2015
Q3028	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
Q3031	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
Q4001	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4002	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4003	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4004	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4005	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4006	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4007	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4008	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4009	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4010	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4011	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4012	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4013	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4014	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4015	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4016	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4017	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4018	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4019	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4020	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4021	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4022	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4023	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4024	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4025	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4026	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4027	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
Q4028	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4029	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4030	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4031	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4032	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4033	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4034	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4035	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4036	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4037	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4038	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4039	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4040	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4041	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4042	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4043	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4044	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4045	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4046	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4047	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4048	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4049	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4050	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4051	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4074	N	$0.00	OPPS Not Payable APC St Ind Y	Ambulatory Payment Classificat		11/1/2010
Q4081	N	$0.69	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		7/1/2023
Q4082	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q4100	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
Q4101	Y	$30.48	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
Q4102	Y	$10.99	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		7/1/2017
Q4103	Y	$5.79	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2014
Q4104	Y	$44.22	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2017

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
Q4105	Y	$40.18	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2017
Q4106	Y	$44.94	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
Q4107	Y	$98.14	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
Q4108	Y	$45.48	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2017
Q4110	Y	$50.44	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2017
Q4111	Y	$7.44	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
Q4112	N	$924.40	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
Q4113	Y	$974.71	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
Q4114	Y	$1,568.86	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		10/1/2015
Q4115	Y	$19.56	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		4/1/2020
Q4116	Y	$32.98	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
Q4117	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2014
Q4118	Y	$2.97	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2015
Q4121	Y	$43.95	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2018
Q4122	Y	$32.42	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2015
Q4123	Y	$20.19	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		10/1/2018
Q4124	Y	$10.39	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2015
Q4125	Y	$134.24	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2015
Q4126	Y	$57.99	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2014
Q4127	Y	$0.55	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2015
Q4128	Y	$46.69	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2015
Q4130	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
Q4132	Y	$116.59	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2021
Q4133	Y	$147.66	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		10/1/2023
Q4134	Y	$31.48	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2015
Q4135	Y	$0.16	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2015
Q4136	Y	$0.15	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2015
Q4137	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
Q4138	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
Q4139	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
Q4140	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
Q4141	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
Q4142	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
Q4143	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
Q4145	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
Q4146	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
Q4147	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
Q4148	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
Q4149	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2014
Q4150	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
Q4151	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
Q4152	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
Q4153	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
Q4154	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
Q4155	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
Q4156	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
Q4157	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
Q4158	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
Q4159	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
Q4160	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
Q4161	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016
Q4162	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016
Q4163	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016
Q4164	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016
Q4165	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016
Q4166	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2017
Q4167	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2017
Q4168	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2017
Q4169	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2017
Q4170	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2017
Q4171	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2017
Q4173	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2017
Q4174	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2017
Q4175	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2017
Q4176	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2018
Q4177	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2018

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
Q4178	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2018
Q4179	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2018
Q4180	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2018
Q4181	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2018
Q4182	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2018
Q4183	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2019
Q4184	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2019
Q4185	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2019
Q4186	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2019
Q4187	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2019
Q4188	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2019
Q4189	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2019
Q4190	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2019
Q4191	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2019
Q4192	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2019
Q4193	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2019
Q4194	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2019
Q4195	Y	$71.23	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		7/1/2022
Q4196	Y	$102.28	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		7/1/2023
Q4197	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2019
Q4198	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2019
Q4199	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2022
Q4200	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2019
Q4201	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2019
Q4202	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2019
Q4203	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2019
Q4204	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2019
Q4205	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2019
Q4206	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2019
Q4208	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2019
Q4209	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2019
Q4211	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2019
Q4212	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2019

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
Q4213	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2019
Q4214	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2019
Q4215	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2019
Q4216	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2019
Q4217	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2019
Q4218	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2019
Q4219	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2019
Q4220	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2019
Q4221	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2019
Q4222	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2019
Q4224	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2022
Q4225	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2022
Q4226	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2019
Q4227	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2020
Q4229	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2020
Q4230	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2020
Q4231	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2020
Q4232	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2020
Q4233	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2020
Q4234	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2020
Q4235	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2020
Q4237	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2020
Q4238	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2020
Q4239	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2020
Q4240	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2020
Q4241	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2020
Q4242	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2020
Q4245	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2020
Q4246	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2020
Q4247	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2020
Q4248	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2020
Q4249	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2020
Q4250	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2020

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
Q4251	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2021
Q4252	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2021
Q4253	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2021
Q4254	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2020
Q4255	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2020
Q4256	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2022
Q4257	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2022
Q4258	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		4/1/2022
Q4259	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2022
Q4260	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2022
Q4261	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2022
Q4262	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2023
Q4263	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2023
Q4264	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2023
Q4265	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2023
Q4266	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2023
Q4267	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2023
Q4268	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2023
Q4269	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2023
Q4270	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2023
Q4271	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2023
Q4272	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		7/1/2023
Q4273	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		7/1/2023
Q4274	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		7/1/2023
Q4275	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		7/1/2023
Q4276	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		7/1/2023
Q4278	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		7/1/2023
Q4279	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2024
Q4280	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		7/1/2023
Q4281	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		7/1/2023
Q4282	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		7/1/2023
Q4283	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		7/1/2023
Q4284	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		7/10/2023

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
Q4285	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2023
Q4286	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2023
Q4287	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2024
Q4288	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2024
Q4289	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2024
Q4290	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2024
Q4291	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2024
Q4292	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2024
Q4293	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2024
Q4294	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2024
Q4295	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2024
Q4296	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2024
Q4297	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2024
Q4298	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2024
Q4299	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2024
Q4300	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2024
Q4301	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2024
Q4302	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2024
Q4303	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2024
Q4304	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2024
Q4305	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2024
Q4306	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2024
Q4307	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2024
Q4308	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2024
Q4309	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2024
Q4310	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2024
Q4311	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2024
Q4312	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2024
Q4313	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2024
Q4314	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2024
Q4315	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2024
Q4316	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2024
Q4317	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2024

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
Q4318	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2024
Q4319	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2024
Q4320	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2024
Q4321	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2024
Q4322	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2024
Q4323	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2024
Q4324	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2024
Q4325	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2024
Q4326	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2024
Q4327	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2024
Q4328	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2024
Q4329	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2024
Q4330	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2024
Q4331	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2024
Q4332	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2024
Q4333	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2024
Q4334	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2024
Q4335	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2024
Q4336	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2024
Q4337	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2024
Q4338	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2024
Q4339	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2024
Q4340	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2024
Q4341	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2024
Q4342	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2024
Q4343	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2024
Q4344	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2024
Q4345	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		10/1/2024
Q4346	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2025
Q4347	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2025
Q4348	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2025
Q4349	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2025
Q4350	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
Q4351	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2025
Q4352	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2025
Q4353	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2025
Q4354	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2025
Q4355	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2025
Q4356	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2025
Q4357	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2025
Q4358	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2025
Q4359	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2025
Q4360	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2025
Q4361	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2025
Q4362	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2025
Q4363	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2025
Q4364	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2025
Q4365	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2025
Q4366	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2025
Q4367	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		4/1/2025
Q5001	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q5002	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q5003	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q5004	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q5005	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q5006	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q5007	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q5008	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q5009	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q5010	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
Q5101	N	$0.97	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2016
Q5103	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2018
Q5104	N	$45.47	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		7/1/2023
Q5105	N	$1.14	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2019
Q5106	N	$11.36	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2019
Q5107	N	$69.77	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		10/1/2019

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
Q5108	N	$164.04	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		4/1/2024
Q5109	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2019
Q5110	N	$0.36	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		7/1/2023
Q5111	N	$166.05	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		7/1/2024
Q5112	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2019
Q5113	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2020
Q5114	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2019
Q5115	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2019
Q5116	N	$83.16	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		7/1/2020
Q5117	N	$34.69	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
Q5118	N	$63.18	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/13/2020
Q5119	N	$32.68	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		7/1/2023
Q5120	N	$91.07	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
Q5121	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2020
Q5122	N	$146.65	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		7/1/2023
Q5123	N	$49.75	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		7/1/2023
Q5124	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		4/1/2022
Q5125	N	$0.54	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
Q5126	N	$60.58	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
Q5127	N	$298.31	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
Q5128	N	$280.16	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		4/1/2023
Q5129	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		4/1/2023
Q5130	N	$201.97	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
Q5131	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2023
Q5132	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2024
Q5133	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		4/1/2024
Q5134	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		4/1/2024
Q5135	N	$5.04	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		10/1/2024
Q5136	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		10/1/2024
Q5137	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2024
Q5138	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2024
Q5139	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2025
Q5140	N	$87.14	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
Q5141	N	$43.57	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
Q5142	N	$10.54	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
Q5143	N	$10.43	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
Q5144	N	$15.02	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
Q5145	N	$128.07	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2025
Q5146	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2025
Q9001	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		10/1/2020
Q9002	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		10/1/2020
Q9003	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		10/1/2020
Q9004	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2021
Q9489	N	$44.17	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
Q9490	N	$40.28	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2025
Q9950	N	$33.06	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		1/1/2016
Q9951	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
Q9953	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
Q9954	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
Q9955	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
Q9956	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
Q9957	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
Q9958	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016
Q9959	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
Q9960	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
Q9961	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016
Q9962	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2015
Q9963	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016
Q9964	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
Q9965	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
Q9966	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016
Q9967	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2016
Q9968	N	$1.77	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2014
Q9969	N	$10.00	OPPS Price Mcare APC St Ind K	Ambulatory Payment Classificat		1/1/2013
Q9976	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		7/1/2015
Q9982	N	$989.33	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		7/1/2016

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
Q9983	N	$989.33	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		7/1/2016
Q9991	N	$0.00	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		7/1/2018
Q9992	N	$0.00	OPPS Price Mcare APC St Ind G	Ambulatory Payment Classificat		7/1/2018
Q9996	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2025
Q9997	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2025
Q9998	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2025
R0070	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
R0075	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
R0076	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
S0013	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2021
S0028	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		1/1/2011
S0119	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2021
S0285	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		7/1/2016
S0311	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		7/1/2016
S1034	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		7/1/2014
S1035	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		7/1/2014
S1036	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		7/1/2014
S1037	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		7/1/2014
S1091	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		4/1/2021
S2260	Y	$1,351.17	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		11/1/2010
S2265	Y	$1,351.17	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		11/1/2010
S2266	Y	$1,351.17	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		11/1/2010
S2267	Y	$1,351.17	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		11/1/2010
S3620	Y	$139.72	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2025
S4988	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2024
S5000	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2011
S5001	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		7/1/2011
S5551	Y	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		1/1/2021
S9002	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2024
S9432	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		10/1/2021
S9563	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2023
T1001	Y	$43.60	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		7/1/2019
T1007	Y	$110.80	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2019

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
T1026	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2019
T1032	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2022
T1033	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2022
T2047	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2020
T2050	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2022
T2051	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		4/1/2022
T2101	Y	$4.59	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		1/1/2025
U0001	Y	$37.60	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
U0002	Y	$53.71	OPPS NM Fee Sched APC St Ind A	APC Medicare CLAB NM FEE		7/1/2023
V2020	Y	$63.25	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2014
V2025	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
V2100	Y	$45.14	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2014
V2101	Y	$51.70	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2014
V2102	Y	$57.46	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2014
V2103	Y	$34.20	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2014
V2104	Y	$40.42	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2014
V2105	Y	$39.58	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2014
V2106	Y	$47.29	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2014
V2107	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
V2108	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
V2109	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
V2110	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
V2111	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
V2112	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
V2113	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
V2114	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
V2115	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
V2118	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
V2121	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
V2199	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
V2200	Y	$55.63	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2014
V2201	Y	$58.58	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2014
V2202	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
V2203	Y	$54.63	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2014
V2204	Y	$55.60	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2014
V2205	Y	$58.01	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2014
V2206	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
V2207	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
V2208	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
V2209	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
V2210	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
V2211	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
V2212	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
V2213	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
V2214	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
V2215	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
V2218	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
V2219	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
V2220	Y	$44.22	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2014
V2221	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
V2299	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
V2300	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
V2301	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
V2302	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
V2303	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
V2304	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
V2305	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
V2306	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
V2307	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
V2308	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
V2309	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
V2310	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
V2311	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
V2312	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
V2313	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
V2314	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
V2315	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
V2318	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
V2319	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
V2320	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
V2321	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
V2399	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
V2410	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
V2430	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
V2499	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
V2500	Y	$95.45	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2014
V2501	Y	$116.30	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2014
V2502	Y	$143.28	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2014
V2503	Y	$131.96	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2014
V2510	Y	$137.82	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2014
V2511	Y	$178.75	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2014
V2512	Y	$235.95	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2014
V2513	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
V2520	Y	$118.60	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2014

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
V2521	Y	$181.38	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2014
V2522	Y	$221.32	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2014
V2523	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
V2524	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		10/1/2020
V2525	N	$0.00	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		4/1/2022
V2526	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		10/1/2023
V2530	Y	$267.06	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2014
V2531	Y	$514.31	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2014
V2599	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2016
V2600	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
V2610	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
V2615	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
V2623	Y	$1,124.32	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2014
V2624	Y	$75.02	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2014
V2625	Y	$360.35	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2014
V2626	Y	$249.89	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2014
V2627	Y	$1,360.43	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2014
V2628	Y	$353.91	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2014
V2629	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
V2630	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
V2631	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
V2632	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
V2700	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
V2702	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
V2710	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
V2715	Y	$12.33	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2016

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
V2718	Y	$30.63	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2014
V2730	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
V2744	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
V2745	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		1/1/2016
V2750	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
V2755	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
V2756	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
V2760	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
V2761	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
V2762	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
V2770	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
V2780	N	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
V2781	N	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
V2782	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
V2783	N	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
V2784	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		1/1/2016
V2785	Y	$1,450.00	OPPS NM Mcaid Pay Price Revw	Ambulatory Payment Classificat		11/1/2010
V2786	Y	$0.00	OPPS NM Medicaid Not Covered	Ambulatory Payment Classificat		11/1/2010
V2787	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
V2788	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
V2790	N	$0.00	OPPS PackagdServ APC St Ind N	Ambulatory Payment Classificat		11/1/2010
V2797	N	$2.09	OPPS NM Fee Sched APC St Ind A	Ambulatory Payment Classificat		1/1/2025
V2799	Y	$0.00	OPPS NM Medicaid Price Review	Ambulatory Payment Classificat		11/1/2010
V5008	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
V5010	Y	$31.68	OPPS NM Medicaid Covered	Ambulatory Payment Classificat		11/1/2010
V5011	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
V5014	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
V5020	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
V5030	N	$0.00	OPPS NM Medicaid Special Revw	Ambulatory Payment Classificat		11/1/2010
V5040	N	$0.00	OPPS NM Medicaid Special Revw	Ambulatory Payment Classificat		11/1/2010
V5050	N	$0.00	OPPS NM Medicaid Special Revw	Ambulatory Payment Classificat		11/1/2010
V5060	N	$0.00	OPPS NM Medicaid Special Revw	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
V5070	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
V5080	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
V5090	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
V5095	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
V5100	N	$0.00	OPPS NM Medicaid Special Revw	Ambulatory Payment Classificat		11/1/2010
V5110	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
V5120	N	$0.00	OPPS NM Medicaid Special Revw	Ambulatory Payment Classificat		11/1/2010
V5130	N	$0.00	OPPS NM Medicaid Special Revw	Ambulatory Payment Classificat		11/1/2010
V5140	N	$0.00	OPPS NM Medicaid Special Revw	Ambulatory Payment Classificat		11/1/2010
V5150	N	$0.00	OPPS NM Medicaid Special Revw	Ambulatory Payment Classificat		11/1/2010
V5160	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
V5171	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2019
V5172	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2019
V5181	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2019
V5190	N	$0.00	OPPS NM Medicaid Special Revw	Ambulatory Payment Classificat		11/1/2010
V5200	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
V5211	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2019
V5212	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2019
V5213	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2019
V5214	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2019
V5215	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2019
V5221	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2019
V5230	N	$0.00	OPPS NM Medicaid Special Revw	Ambulatory Payment Classificat		11/1/2010
V5240	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
V5241	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
V5242	N	$0.00	OPPS NM Medicaid Special Revw	Ambulatory Payment Classificat		11/1/2010
V5243	N	$0.00	OPPS NM Medicaid Special Revw	Ambulatory Payment Classificat		11/1/2010
V5244	N	$0.00	OPPS NM Medicaid Special Revw	Ambulatory Payment Classificat		11/1/2010
V5245	N	$0.00	OPPS NM Medicaid Special Revw	Ambulatory Payment Classificat		11/1/2010
V5246	N	$0.00	OPPS NM Medicaid Special Revw	Ambulatory Payment Classificat		11/1/2010
V5247	N	$0.00	OPPS NM Medicaid Special Revw	Ambulatory Payment Classificat		11/1/2010
V5248	N	$0.00	OPPS NM Medicaid Special Revw	Ambulatory Payment Classificat		11/1/2010
V5249	N	$0.00	OPPS NM Medicaid Special Revw	Ambulatory Payment Classificat		11/1/2010

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
V5250	N	$0.00	OPPS NM Medicaid Special Revw	Ambulatory Payment Classificat		11/1/2010
V5251	N	$0.00	OPPS NM Medicaid Special Revw	Ambulatory Payment Classificat		11/1/2010
V5252	N	$0.00	OPPS NM Medicaid Special Revw	Ambulatory Payment Classificat		11/1/2010
V5253	N	$0.00	OPPS NM Medicaid Special Revw	Ambulatory Payment Classificat		11/1/2010
V5254	N	$0.00	OPPS NM Medicaid Special Revw	Ambulatory Payment Classificat		11/1/2010
V5255	N	$0.00	OPPS NM Medicaid Special Revw	Ambulatory Payment Classificat		11/1/2010
V5256	N	$0.00	OPPS NM Medicaid Special Revw	Ambulatory Payment Classificat		11/1/2010
V5257	N	$0.00	OPPS NM Medicaid Special Revw	Ambulatory Payment Classificat		11/1/2010
V5258	N	$0.00	OPPS NM Medicaid Special Revw	Ambulatory Payment Classificat		11/1/2010
V5259	N	$0.00	OPPS NM Medicaid Special Revw	Ambulatory Payment Classificat		11/1/2010
V5260	N	$0.00	OPPS NM Medicaid Special Revw	Ambulatory Payment Classificat		11/1/2010
V5261	N	$0.00	OPPS NM Medicaid Special Revw	Ambulatory Payment Classificat		11/1/2010
V5262	N	$0.00	OPPS NM Medicaid Special Revw	Ambulatory Payment Classificat		11/1/2010
V5263	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
V5264	N	$0.00	OPPS NM Medicaid Special Revw	Ambulatory Payment Classificat		11/1/2010
V5265	N	$0.00	OPPS NM Medicaid Special Revw	Ambulatory Payment Classificat		11/1/2010
V5266	N	$0.00	OPPS NM Medicaid Special Revw	Ambulatory Payment Classificat		11/1/2010
V5267	N	$0.00	OPPS NM Medicaid Special Revw	Ambulatory Payment Classificat		11/1/2010
V5268	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
V5269	N	$0.00	OPPS NM Medicaid Special Revw	Ambulatory Payment Classificat		11/1/2010
V5270	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
V5271	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
V5272	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
V5273	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
V5274	N	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
V5275	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
V5281	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
V5282	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
V5283	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
V5284	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
V5285	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
V5286	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
V5287	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013

NEW MEXICO MEDICAID FEE FOR SERVICE
MEDICAID HOSPITAL OUTPATIENT PAYMENT METHOD
PROCEDURE CODE PRICING

CODE	Tax	Rate	SOURCE	NOTE	VFC	START
V5288	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
V5289	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
V5290	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		1/1/2013
V5298	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
V5299	Y	$0.00	OPPS Not Payable APC St Ind B	Ambulatory Payment Classificat		11/1/2010
V5336	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
V5362	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
V5363	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010
V5364	Y	$0.00	OPPS Not Covered APC St Ind E	Ambulatory Payment Classificat		11/1/2010