

EXHIBIT B-1

**Rady Children's Health Network
COMMERCIAL Fee For Service Schedule - Primary Care**

Effective 07/01/2023

CPT / HCPC Code	Description		Reimbursement Rate
VACCINES			
90619	MenQuadfi (MenAWCY)		\$ 159.10
90620	Meningococcal B Vaccine-Bexsero		\$ 215.42
90621	Meningococcal B Vaccine-Trumenba		\$ 182.54
90632	Hepatitis A - Adult dosage		\$ 78.10
90633	Hepatitis A		\$ 37.54
90647	Hib		\$ 29.32
90648	Hib-ActHib & Hiberix		\$ 19.19
90651	9-Valent Human Papillomavirus Vaccine		\$ 274.02
90670	Pevnar 13		\$ 230.83
90671	Pevnar 15		\$ 220.28
90672	FluMist-Quadrivalent		\$ 23.41
90674	Flucelvax Quad		\$ 28.88
90675	Rabies Vaccine		\$ 433.94
90677	Pevnar 20		\$ 303.86
90680	Rotavirus vaccine (Rotateq)		\$ 94.93
90681	Rotavirus vaccine (Rotarix)		\$ 137.29
90686	Fluzone-3 years and above-Quadrivalent		\$ 19.64
90687	Alfuria Quad Influenza		\$ 18.76
90688	Influenza Virus, quadrivalent (3 years and above)		\$ 18.33
90691	typhoid vaccine		\$ 124.64
90696	Kinrix		\$ 60.06
90697	Vaxelis		\$ 175.01
90698	Pentacel		\$ 107.66
90700	DTaP		\$ 36.08
90707	MMR		\$ 91.28
90710	measles, mumps, rubella, varicella vaccine (MMRV)		\$ 267.10
90713	Polio (IPV)		\$ 41.33
90714	Td (preservative free)		\$ 40.28
90715	Tdap		\$ 53.07
90716	Varicella		\$ 163.06
90723	Pediarix		\$ 93.85
90732	Pneumococcal Polysaccharide, adult dose		\$ 119.04
90734	Meningococcal polysaccharide diphtheria toxoid		\$ 151.60
90744	Hepatitis B, pediatric dose		\$ 26.73
90746	Hepatitis B, adult dose		\$ 68.06
VACCINE ADMINISTRATION			

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90460	Immunization Admin through 18 yrs old with counseling	\$ 20.00
90461	Each additional vaccine/toxoid component	\$ 10.00
90471	Immunization Admin, inc. perq, subq, intramuscular injection, one vaccine	\$ 22.00
90472	Immunization Admin, inc. perq, subq, intramuscular injection, subsequent vaccine	\$ 11.00
90473	Immunization Admin, intranasal or oral, one vaccine	\$ 18.00
90474	Immunization Admin, intranasal or oral, subsequent vaccine	\$ 9.00
PROCEDURES & SUPPLIES		
10060	I&D simple abscess	\$ 111.00
12001	Laceration repair < 2.5 cm	\$ 136.00
12002	Laceration repair 2.5cm - 7.5 cm	\$ 145.00
12011	Laceration repair, face < 2.5cm	\$ 145.00
16020	Burn treatment (dressings and/or debridement, small	\$ 77.00
17110	Destruction of benign lesions (including warts)	\$ 110.00
36415	Venipuncture (for send out labs only)	\$ 5.00
41010	Incision of Lingual Frenum (Frenotomy)	\$ 200.00
54150	Circumcision using clamp or other device	\$ 245.00
81002	Urinalysis, non-automated, without microscopy	\$ 4.00
81003	Urinalysis, automated without microscopy	\$ 3.00
81025	Urine Pregnancy Test	\$ 7.00
82270	Blood, occult, qualitative feces	\$ 4.00
82948	Glucose, blood, reagent strip	\$ 4.00
83655	Lead Test	\$ 14.00
85014	Blood Count, hematocrit	\$ 3.00
85018	Blood Count; hemoglobin	\$ 3.00
86308	Heterophile antibodies, screening (rapid mono)	\$ 7.00
86580	TB, intradermal	\$ 9.00
87804	Flu (types A&B), nasal swab	\$ 13.00
87880	Streptococcus, optical method	\$ 14.00
88720	Bilirubin, total, transcutaneous	\$ 6.00
94010	Spirometry	\$ 34.00
94060	Bronchospasm evaluation	\$ 60.00
94375	Flow Volume Loop	\$ 38.00
94640	Inhalation therapy	\$ 20.00
96372	Therapeutic Injection	\$ 23.00
G0168	Dermabond	\$ 40.00
J0696	Ceftriaxone 250 mg (Rocephin)	\$ 20.00

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99354	Prolonged Services (medical records must be submitted with claim)		\$ 98.00
P9612	Bladder catheterization for specimen collection		\$ 71.00
HOSPITAL CARE & VISITS			
99222	Hospital Care, initial mod complexity		\$ 120.00
99223	Hospital Care, initial high complexity		\$ 178.00
99231	Hospital Care, subsequent		\$ 36.00
99232	Hospital Care, subsequent		\$ 67.00
99233	Hospital Care, subsequent		\$ 97.00
99238	Hospital Discharge < 30 minutes		\$ 68.00
99239	Hospital Discharge > 30 minutes		\$ 100.00
99460	History & Physical, newborn		\$ 87.00
99462	Normal newborn, per day		\$ 37.00
99463	History & Physical, newborn - discharged same day		\$ 112.00

PHYSICIAN E&M VISITS			
Category	Diagnosis	ICD-10 Co	Reimbursement
<i>ADD/ADHD, diagnosis and treatment (uncomplicated/single drug)</i>			
	Attention-deficit hyperactivity disorder, predominantly inattentive type	F90.0	\$75.00
	Attention-deficit hyperactivity disorder, predominantly hyperactive type	F90.1	\$75.00
	Attention-deficit hyperactivity disorder, combined type	F90.2	\$75.00
	Attention-deficit hyperactivity disorder, other type	F90.8	\$75.00
	Attention-deficit hyperactivity disorder, unspecified type	F90.9	\$75.00
<i>Depression/Anxiety</i>			
	Major depressive disorder, single episode	F32.0 - F32.9	\$75.00
	Major depressive disorder, recurrent	F33.0 - F33.9	\$75.00
	Dysthymic disorder	F34.1	\$75.00
	Generalized anxiety, disorder	F41.1	\$75.00
	Anxiety disorder, unspecified	F41.9	\$75.00
<i>Simple fractures, diagnosis and treatment</i>			
	Fracture of forearm	S52.0 - S52.9	\$75.00
	Fracture of wrist and hand	S62.0 - S62.9	\$75.00

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CPT / HCPC Code	Description		Reimbursement Rate
	Dislocation of elbow	S53.00 - S53.006	\$75.00
	Dislocation of finger	S63.1 - S63.29	\$75.00
	Dislocation of shoulder	S43.082A S43.001A	\$75.00
<i>Gynecology</i>			
	Encounter for management of contraceptive pills	Z30.41	\$75.00
	Encounter for initiation prescription of contraceptive pills	Z30.011	\$75.00
	Encounter for initiation of injectable contraceptive	Z30.013	\$75.00
	Encounter for initiation of vaginal ring hormonal contraceptive	Z30.015	\$75.00
	Encounter for initiation of transdermal patch hormonal contraceptive device	Z30.016	\$75.00
	Encounter for initiation of implantable subdermal contraceptive	Z30.017	\$75.00
	Encounter for insertion of intrauterine contraceptive device	Z30.430	\$75.00
	Encounter for management of injectable contraceptive	Z30.42	\$75.00
	Encounter for management of vaginal ring hormonal contraceptive	Z30.44	\$75.00
	Encounter for management of transdermal patch hormonal contraceptive	Z30.45	\$75.00
	Encounter for management of implantable subdermal contraceptive	Z30.46	\$75.00
<i>STDs, diagnosis and treatment</i>			
	Chlamydial cystitis and urethritis	A56.01	\$75.00
	Chlamydial vulvovaginitis	A56.02	\$75.00
<i>Pre-Admission H&P's</i>			
	Pre-admission H & P (pre-op)	Z01.818	\$75.00
	Pre-admission H & P (residential facility)	Z02.2	\$75.00

*Should these E&M services require a supply charge be billed in addition to the service provided, the