

**WPS Medicare**  
**Missouri Western - Localities 02 and 99**  
**REVISED Mental Health Fee Schedule**  
**Effective July 1, 2008 - December 31, 2008**

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LOCALITY	NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
02		90804		64.03	60.83	69.95
02	#	90804		55.58	52.80	60.72
02		90805		70.78	67.24	77.33
02	#	90805		62.33	59.21	68.09
02		90806		90.70	86.17	99.10
02	#	90806		84.95	80.70	92.81
02		90807		100.18	95.17	109.45
02	#	90807		92.12	87.51	100.64
02		90808		133.94	127.24	146.33
02	#	90808		127.80	121.41	139.62
02		90809		142.65	135.52	155.85
02	#	90809		134.59	127.86	147.04
02		90810		68.05	64.65	74.35
02	#	90810		60.75	57.71	66.37
02		90811		78.26	74.35	85.50
02	#	90811		67.50	64.13	73.75
02		90812		98.52	93.59	107.63
02	#	90812		89.69	85.21	97.99
02		90813		108.01	102.61	118.00
02	#	90813		97.27	92.41	106.27
02		90814		140.99	133.94	154.03
02	#	90814		133.32	126.65	145.65
02		90815		149.71	142.22	163.55
02	#	90815		138.96	132.01	151.81
02		90816		60.24	57.23	65.81
02		90817		66.22	62.91	72.35
02		90818		89.59	85.11	97.88
02		90819		96.00	91.20	104.88
02		90821		132.84	126.20	145.13
02		90822		138.90	131.96	151.75
02		90823		65.01	61.76	71.02
02		90824		71.80	68.21	78.44
02		90826		95.56	90.78	104.40
02		90827		100.37	95.35	109.65
02		90828		138.37	131.45	151.17
02		90829		143.24	136.08	156.49
99		90804		60.81	57.77	66.44
99	#	90804		53.66	50.98	58.63
99		90805		67.38	64.01	73.61

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LOCALITY	NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
99	#	90805		60.23	57.22	65.80
99		90806		86.90	82.56	94.94
99	#	90806		82.03	77.93	89.62
99		90807		95.79	91.00	104.65
99	#	90807		88.98	84.53	97.21
99		90808		128.55	122.12	140.44
99	#	90808		123.36	117.19	134.77
99		90809		136.80	129.96	149.45
99	#	90809		129.98	123.48	142.00
99		90810		64.77	61.53	70.76
99	#	90810		58.61	55.68	64.03
99		90811		74.28	70.57	81.16
99	#	90811		65.18	61.92	71.21
99		90812		94.07	89.37	102.78
99	#	90812		86.59	82.26	94.60
99		90813		103.04	97.89	112.57
99	#	90813		93.94	89.24	102.63
99		90814		135.08	128.33	147.58
99	#	90814		128.58	122.15	140.47
99		90815		143.33	136.16	156.58
99	#	90815		134.23	127.52	146.65
99		90816		57.78	54.89	63.12
99		90817		63.70	60.52	69.60
99		90818		86.07	81.77	94.04
99		90819		92.44	87.82	100.99
99		90821		127.81	121.42	139.63
99		90822		133.83	127.14	146.21
99		90823		62.43	59.31	68.21
99		90824		69.05	65.60	75.44
99		90826		91.82	87.23	100.31
99		90827		96.69	91.86	105.64
99		90828		133.11	126.45	145.42
99		90829		138.11	131.20	150.88

# - THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING.  
C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.  
LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.