

**FSY 2008
IOWA
CLINICAL SOCIAL WORKER FEES**

SPECIALTY 80

CODE	FEE	*Facility Setting FEE
90801	104.44	90.29
90802	110.72	97.31
90804	43.91	38.45
90806	62.57	58.85
90808	92.48	88.52
90810	46.62	41.90
90812	67.87	62.16
90814	97.29	92.33
90816	41.54	41.54
90818	61.90	61.90
90821	91.85	91.85
90823	44.89	44.89
90826	65.93	65.93
90828	95.70	95.70
90845	57.63	56.39
90846	60.97	59.97
90847	75.79	72.06
90849	22.59	20.60
90853	21.45	20.21
90857	24.05	21.56
96150	16.19	15.94
96151	15.62	15.37
96152	15.08	14.84
96153	3.46	3.21
96154	14.80	14.55

*These amounts apply when the service is performed in a facility setting. Inclusion or exclusion of a fee schedule amount for an item or service does not imply any health insurance coverage.