

**FSY 2008
MINNESOTA
REVISED CLINICAL SOCIAL WORKER FEES**

SPECIALTY 80

CODE	FEE	*Facility Setting FEE
90801	108.88	92.69
90802	115.25	99.92
90804	45.61	39.36
90806	64.54	60.28
90808	95.24	90.71
90810	48.27	42.88
90812	70.23	63.70
90814	100.37	94.70
90816	42.77	42.77
90818	63.69	63.69
90821	94.40	94.40
90823	46.20	46.20
90826	67.78	67.78
90828	98.39	98.39
90845	59.13	57.71
90846	62.83	61.70
90847	78.32	74.06
90849	23.56	21.29
90853	22.33	20.91
90857	25.17	22.34
96150	16.64	16.35
96151	16.07	15.78
96152	15.50	15.21
96153	3.52	3.23
96154	15.21	14.93

*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.