

**APPENDIX E
EMERGENCY ROOM FACILITY FEE SCHEDULE**

<u>CPT CODE</u>	<u>Effective 4/30/2015</u>			<u>Effective 1/1/2016*</u>		
	<u>LEVEL 1</u>	<u>LEVEL 2</u>	<u>LEVEL 3</u>	<u>LEVEL 1</u>	<u>LEVEL 2</u>	<u>LEVEL 3</u>
99281	\$54.10	\$40.98	\$27.09	\$40.98	\$25.74	\$51.40
99282	\$92.27	\$58.92	\$41.69	\$58.92	\$39.61	\$87.66
99283	\$142.49	\$110.55	\$73.69	\$110.55	\$70.01	\$135.37
99284	\$220.65	\$209.70	\$123.51	\$209.70	\$117.33	\$209.62
99285	\$344.44	\$337.90	\$223.93	\$337.90	\$212.73	\$327.22

See rule 5160-2-07.2 in the Administrative Code for definitions of hospitals

Effective 4/30/2015

LEVEL 1 -- TEACHING HOSPITALS

LEVEL 2 -- CHILDREN'S HOSPITALS

LEVEL 3 -- ALL OTHER HOSPITALS SUBJECT TO PROSPECTIVE PAYMENT

***Effective 1/1/2016**

LEVEL 1 -- CHILDREN'S HOSPITALS

LEVEL 2 -- ALL OTHER HOSPITALS SUBJECT TO PROSPECTIVE PAYMENT

LEVEL 3 -- TEACHING HOSPITAL