

Top 25 Ambulatory Surgical Center Procedure Codes Ranked by Paid Amounts for Alaska (55.0% of total ASC payments)

Rank	Code	Description	AK WC Fee Schedule	Medicare Fee Schedule	Washington WC Fee Schedule	Oregon WC Fee Schedule	Idaho WC Fee Schedule	AK Median Healthcare Allowance
1	29881	Arthroscopy knee surgical; with meniscectomy including debridement	\$ 11,264.22	\$ 2,457.12	\$ 2,015.88	\$ 2,295.48	\$ 2,664.95	\$5,945.52
2	23412	Repair of ruptured musculotendinous cuff (e.g. rotator cuff) open; chronic	\$ 14,369.52	\$ 4,000.05	\$ 3,281.73	\$ 3,104.21	\$ 4,338.38	\$6,122.59
3	29826	Arthroscopy shoulder surgical; decompression of subacromial space with partial acromioplasty with coracoacromial ligament (i.e., arch) release when performed	\$ 12,288.24	\$ 2,457.12	\$ 2,015.88	\$ 2,295.48	\$ 2,664.95	\$5,277.96
4	29822	Arthroscopy shoulder surgical; debridement limited	\$ 12,288.24	\$ 2,457.12	\$ 2,015.88	\$ 2,295.48	\$ 2,664.95	\$3,569.26
5	23430	Tenodesis of long tendon of biceps	\$ 12,932.57	\$ 4,000.05	\$ 3,281.73	\$ 3,104.21	\$ 4,338.38	\$5,368.94
6	23120	Claviclectomy; partial	\$ 15,806.47	\$ 2,684.20	\$ 2,202.18	\$ 2,263.26	\$ 2,911.24	\$5,555.09
7	490	Ambulatory surgical care	***	***	***	***	***	N/A
8	23130	Acromioplasty or acromionectomy partial with or without coracoacromial ligament release	\$ 17,243.42	\$ 4,000.05	\$ 3,281.73	\$ 3,104.21	\$ 4,338.38	\$6,052.06
9	29888	Arthroscopically aided anterior cruciate ligament repair/augmentation or reconstruction	\$ 12,288.24	\$ 6,821.70	\$ 5,596.68	\$ 4,771.39	\$ 7,398.70	\$9,003.29
10	23410	Repair of ruptured musculotendinous cuff (eg rotator cuff) open; acute	\$ 12,932.57	\$ 4,000.05	\$ 3,281.73	\$ 3,104.21	\$ 4,338.38	\$6,469.33
11	63030	Laminotomy (hemilaminectomy) with decompression of nerve root(s) including partial facetectomy foraminotomy and/or excision of herniated intervertebral disc; 1 interspace lumbar	\$ 17,505.05	\$ 4,373.57	\$ 3,467.58	\$ 3,989.49	\$ 4,743.50	\$8,640.00
12	29807	Arthroscopy shoulder surgical; repair of superior labral tear from anterior to posterior (SLAP) lesion	\$ 12,288.24	\$ 4,515.10	\$ 3,704.29	\$ 3,687.22	\$ 4,897.00	\$5,685.80
13	64483	Injection(s) anesthetic agent and/or steroid transforaminal epidural with imaging guidance (fluoroscopy or computed tomography (CT)); lumbar or sacral single level	\$ 2,917.51	\$ 658.32	\$ 540.10	\$ 616.68	\$ 714.00	\$1,706.48
14	63650	Percutaneous implantation of neurostimulator electrode array epidural	\$ 14,322.31	\$ 5,119.66	n/a	\$ 2,111.11	\$ 5,552.69	\$11,880.16
15	20680	Removal of implant; deep (eg buried wire pin screw metal band nail rod or plate)	\$ 12,193.94	\$ 1,932.86	\$ 1,585.77	\$ 1,800.64	\$ 2,096.35	\$3,179.50
16	62311	Injection(s) of diagnostic or therapeutic substance(s) (including anesthetic antispasmodic opioid steroid other solution) not including neurolytic substances including needle or catheter placement includes contrast for localization when performed epidural or subarachnoid	\$ 2,254.44	\$ 658.32	\$ 540.10	\$ 616.68	\$ 714.00	\$1,705.20
17	64721	Neuroplasty and/or transposition; median nerve at carpal tunnel	\$ 9,548.21	\$ 1,564.74	\$ 1,283.75	\$ 1,464.45	\$ 1,697.09	\$4,070.22
18	64493	Injection(s) diagnostic or therapeutic agent paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or computed tomography (CT)) lumbar or sacral; single level	\$ 3,978.42	\$ 658.32	\$ 540.10	\$ 616.68	\$ 714.00	\$ 2,015.04
19	29824	Arthroscopy shoulder surgical; distal claviclectomy including distal articular surface (Mumford procedure)	\$ 12,288.24	\$ 2,457.12	\$ 2,015.88	\$ 2,295.48	\$ 2,664.95	\$4,755.06
20	64416	Injection anesthetic agent; brachial plexus continuous infusion by catheter (including catheter placement)	\$ 2,254.44	\$ 658.32	\$ 540.10	\$ 616.68	\$ 714.00	\$1,305.77
21	29880	Arthroscopy knee surgical; with meniscectomy (medial and lateral including any meniscal shaving) including debridement/shaving of articular cartilage	\$ 11,264.22	\$ 2,457.12	\$ 2,015.88	\$ 2,295.48	\$ 2,664.95	\$6,174.00
22	29877	Arthroscopy knee surgical; debridement/shaving of articular cartilage	\$ 11,264.22	\$ 2,457.12	\$ 2,015.88	\$ 2,295.48	\$ 2,664.95	\$5,325.03
23	29875	Arthroscopy knee surgical; synovectomy limited (eg plica or shelf resection) (separate procedure)	\$ 11,264.22	\$ 2,457.12	\$ 2,015.88	\$ 2,295.48	\$ 2,664.95	\$4,986.61
24	64415	Injection anesthetic agent; brachial plexus single	\$ 2,254.44	\$ 339.47	\$ 278.51	\$ 318.07	\$ 368.19	\$1,409.28
25	64494	Injection(s) diagnostic or therapeutic agent paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT) lumbar or sacral; second level (List separately in addition to code for primary procedure)	\$ 3,978.42	\$ 212.49	\$ 174.93	\$ 199.21	\$ 230.46	\$ 2,629.20

*** Alaska's Fee Schedule combines revenue codes into the surgical CPT code, which is used to determine the outpatient facility allowance

Top 25 procedures based on NCCI 2011 Medical Data Call for the State of Alaska

The Alaska Healthcare allowance is based on data obtained from Premera, Aetna, ASEA Health Trust, and the State of Alaska - AlaskaCare