

Arkansas Medicaid Portable X-Ray Fee Schedule

This fee schedule does not address the various coverage limitations routinely applied by Arkansas Medicaid before final payment is determined (e.g., beneficiary and provider eligibility, benefit limits, billing instructions, frequency of services, third party liability, age restrictions, prior authorization, co-payments/coinsurance where applicable). Procedure codes and/or fee schedule amounts listed do not guarantee payment, coverage or amount allowed.

Although every effort is made to ensure the accuracy of this information, discrepancies may occur. This fee schedule may be changed or updated at any time to correct such discrepancies. The reimbursement rates reflected in this fee schedule are in effect as of the date of this report. The reimbursement rate applied to a claim depends on the claim's date of service because Arkansas Medicaid's reimbursement rates are date-of-service effective. This fee schedule reflects only procedure codes that are currently payable. Any procedure code reflecting a Medicaid maximum of \$0.00 is manually priced.

Please note that Arkansas Medicaid will reimburse the lesser of the amount billed or the Medicaid maximum. For a full explanation of the procedure codes and modifiers listed here, refer to your Arkansas Medicaid provider manual and provider notices.

Run Date 4/9/24

Provider Type: 10

Procedure Code	Place of Service	Mod 1	Mod 2	Mod 3	Mod 4	Medicaid Maximum Allowed Amount
70100	12	TC				\$19.20
70110	12	TC				\$28.56
70120	12	TC				\$25.30
70130	12	TC				\$39.16
70134	12	TC				\$29.32
70140	12	TC				\$23.70
70150	12	TC				\$21.60
70160	12	TC				\$24.30
70200	12	TC				\$15.70
70210	12	TC				\$17.20
70220	12	TC				\$33.00
70240	12	TC				\$18.70
70250	12	TC				\$26.10
70260	12	TC				\$35.92
70328	12	TC				\$15.80
70330	12	TC				\$27.68
71045	12	TC				\$11.86
71046	12	TC				\$21.87
71047	12	TC				\$27.87

71048	12	TC				\$28.67
71100	12	TC				\$21.60
71101	12	TC				\$22.20
71110	12	TC				\$30.80
71111	12	TC				\$37.40
71120	12	TC				\$15.40
71130	12	TC				\$20.28
72020	12	TC				\$27.04
72040	12	TC				\$28.00
72050	12	TC				\$37.30
72052	12	TC				\$55.00
72070	12	TC				\$28.09
72072	12	TC				\$32.60
72074	12	TC				\$37.20
72080	12	TC				\$30.02
72081	12	TC				\$23.51
72082	12	TC				\$42.82
72083	12	TC				\$46.48
72084	12	TC				\$55.80
72100	12	TC				\$31.28
72110	12	TC				\$45.49
72114	12	TC				\$49.50
72120	12	TC				\$38.30
72170	12	TC				\$23.54
72190	12	TC				\$33.00
72200	12	TC				\$15.80
72202	12	TC				\$23.10
72220	12	TC				\$20.20
73000	12	TC				\$16.78
73010	12	TC				\$21.00
73020	12	TC				\$15.50
73030	12	TC				\$23.50
73050	12	TC				\$30.10
73060	12	TC				\$25.40
73070	12	TC				\$21.00
73080	12	TC				\$23.20
73090	12	TC				\$21.00
73092	12	TC				\$30.89
73100	12	TC				\$21.00
73110	12	TC				\$25.77
73120	12	TC				\$18.80
73130	12	TC				\$25.00

73140	12	TC				\$18.17
73501	12	TC				\$18.85
73502	12	TC				\$27.84
73503	12	TC				\$38.63
73521	12	TC				\$26.17
73522	12	TC				\$31.17
73523	12	TC				\$37.49
73551	12	TC				\$17.85
73552	12	TC				\$21.18
73560	12	TC				\$32.81
73562	12	TC				\$35.00
73564	12	TC				\$37.00
73565	12	TC				\$24.71
73590	12	TC				\$25.30
73592	12	TC				\$27.00
73600	12	TC				\$21.81
73610	12	TC				\$21.40
73620	12	TC				\$23.90
73630	12	TC				\$28.00
73650	12	TC				\$14.30
73660	12	TC				\$15.60
74018	12	TC				\$20.26
74019	12	TC				\$24.26
74021	12	TC				\$28.27
74022	12	TC				\$35.75
R0070	12	TC				\$53.00