

ATTACHMENT 1 - Aerosol Treatments

TOS*	Procedure Code	Long Description	Age Range	CURRENT		PROPOSED			
				Current Medicaid Fee	Current Adjusted Fee	Proposed Medicaid RVU**	Proposed Medicaid Conversion Factor	Proposed Medicaid Fee	Proposed Adjusted Fee
5	95012	***	0-20	Not a Benefit	Not a Benefit	0.61	\$28.0672	\$17.12	\$17.12
5	95012	***	21-999	Not a Benefit	Not a Benefit	0.61	\$26.7305	\$16.31	\$16.31

*Type of Service (TOS)	
5	Laboratory Services
**RVU	Relative Value Unit

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