Sept 2026			SPINE SYNC RATES		
E&M	**CPT Code**	**Time**	**Description**	**Cash**	**INS***
Straightforward	99202-25	15-29	1 self-limited/minor problem	98	205
Low	99203-25	30-44	2 or more self-limited/ + review external test and notes	128	290
Moderate	99204-25	45-59	acute managed care ~ MVA/ 911	158	395
Consultation Only	99211	15	different day without Tx	90	90
Review Of Records	99358	60	different day, non-face to face	125	400
Therapy	**CPT Code**		**Description**		
Chiropractic	98940		1-2 areas/ adjacent (no extremities)	55	80
Manipulative	98941		3-4 areas/ adjacent (no extremities)	65	80
Therapy	98942		full spine (no extremities)	75	110
(adjusting)	98943		Extremity (one: left or right/full)	55	70
Palliative Care	97026-59	7-15	Infra-red Heat	15	30
7-15 min	97010-59	7-15	Cryotherapy/ Vapocoolant application	15	30
(attended/ 1 area)	97018-59	7-15	Paraffin Bath	30	35
(max of 4/claim)	97032-59	7-15	TENs	30	35
	97032-59	7-15	NMS/EMS/Russian	40	40
	95992-59	1	Epley Maneuver 1-3 rounds	120	155
	97124-59	7-15	Massage	40	50
Manual Therapy	97140-59	7-15	Mobilization/ PNF/PIR/Trigger point/NMR	45	65
(attended/ 1 area)	97140-59	7-15	IASTM	40	65
(max of 4/claim)	23650-59	unit	Reduce shoulder GHJ (per occurrence)	750	1380
	95992-59	Unit	Epley Maneuver	120	155
Exercise/Occ/ADL	97110-59	7-15	Direct deficit Strength Exercise	45	65
(one required)	97112-59	7-15	Neuromuscular re-ed: coordination/posture/balance	45	55
	97116-59	7-15	Gait correction/ rehab	45	50
	97530-59	7-15	Direct Function/performance/skill instruction	45	60
	97535-59	7-15	ADL management/ adaptive equipment	45	55
(max of 2/Dx)	97799-59	7-15	(unlisted) Stretch sequence	45	45
Other	0552T-59	10	LLLT (low level laser) 1 area/Dx	45	45
	0101T-59	unit	ESWT (shock wave) 2000 clicks/1 area/Dx	135	135
	97760-59	unit	Orthopedic fitting: Sports Tape (one diagnosis/area)	35	105
	97750-59	15	MSK functional capacity testing with written report	120	85
	97129-59	15	Cognitive Function/ Performance priorities Mgt	120	305

* Spine Sync will bill your insurance plan using these rates. This is the minimum acceptable reimbursement allowable by our office when insurance settles any claim. This rate is determined by Fair Health Consumer (www.fairhealthconsumer.org) by calculating recent local claims in the 90278 zip code area, and using payout information provided by insurers. Spine Sync uses the 50 percentile value when we file your claim, meaning 50 % of claims are paid higher, and 50% of claims are paid lower. The patient is responsible for any underpaid claim codes below the INS billed rate. Spine Sync updates the INS rate every 180 days.