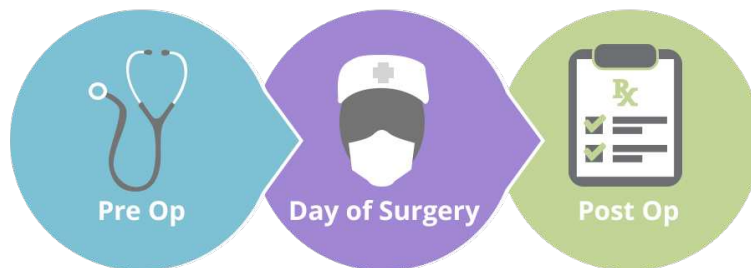


Expert Not Yet Engaged
Contact AccuMed if Expert is Required

Pro Medical Cost Projection

– Estimate of Reasonable Value of Future Medical Care –



Patient Name: Ron Burgundy
Treatment according to Dr. Swanson's IME dated February 3rd, 2021

Prepared For: AccuMed Healthcare Research LLC
6400 S Fiddlers Green Circle, Suite 1320
Greenwood Village, CO 80111

Date: November 13, 2023

AccuMed HealthCare Research, LLC
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844.307.4487

Confidential: This report, along with the data, analysis, and conclusions herein, contains sensitive and proprietary information and is protected under agreements between AccuMed and the above referenced party. This report is for use exclusively in the matter involving the above referenced patient. This report may not be altered or reproduced, in part or in whole, in any way. Breaches of the confidentiality of this report are subject to legal recourse.



This report is a full estimate of the reasonable value of billed charges for the indicated treatment. In the development of this report, 191,319 historical records of providers performing procedures related to this treatment were identified. For information on data sources, assumptions, and methodologies – including the calculation of the reasonable value – please reference the appendices.

Treatment according to Dr. Swanson's IME dated February 3rd, 2021


Reasonable Value


Option #1: Non-Surgical Treatment

 **Cervical: Radiofrequency Ablation (RFA) - 2 Level**

 Pre-Op	Bill #1 Pre-Op Consultation	\$ 286
	Bill #2 Anesthesiology	\$ 1,190
 Sx	Bill #3 Physician	3,413
	Bill #4 Ambulatory Surgery Center	9,288


Once every 18 Months for 42 Years is \$ 14,177 x 28 **\$ 396,956**

 **Trigger Point Injections; One or Two Muscle Groups**

 DOS	Bill #5 Physician	\$ 510
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Once a Month for 2 Years is \$ 510 x 24 **\$ 12,240**

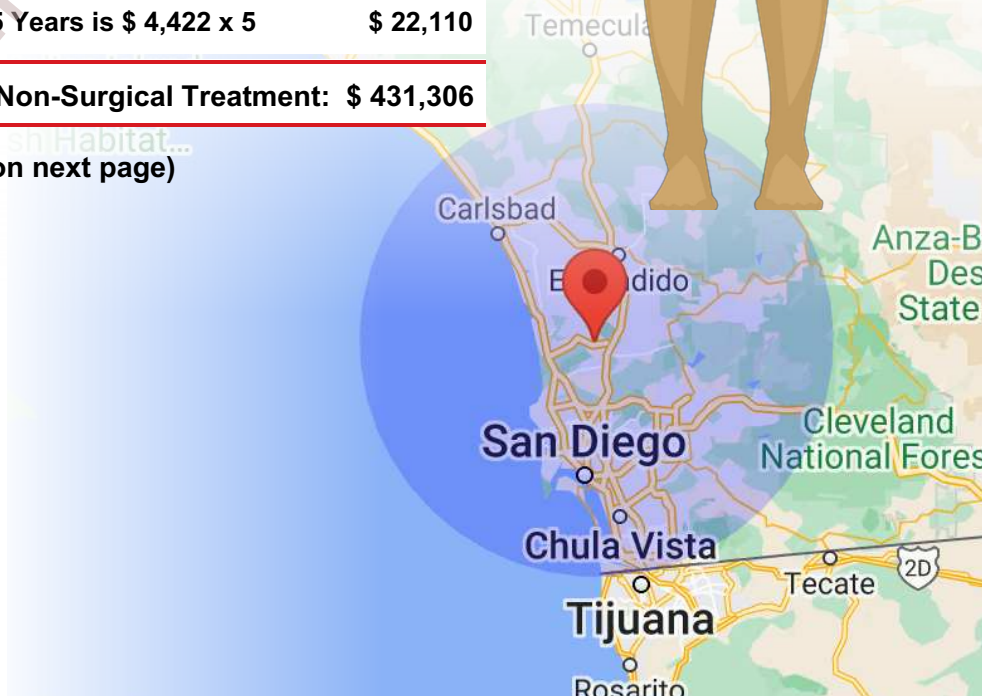
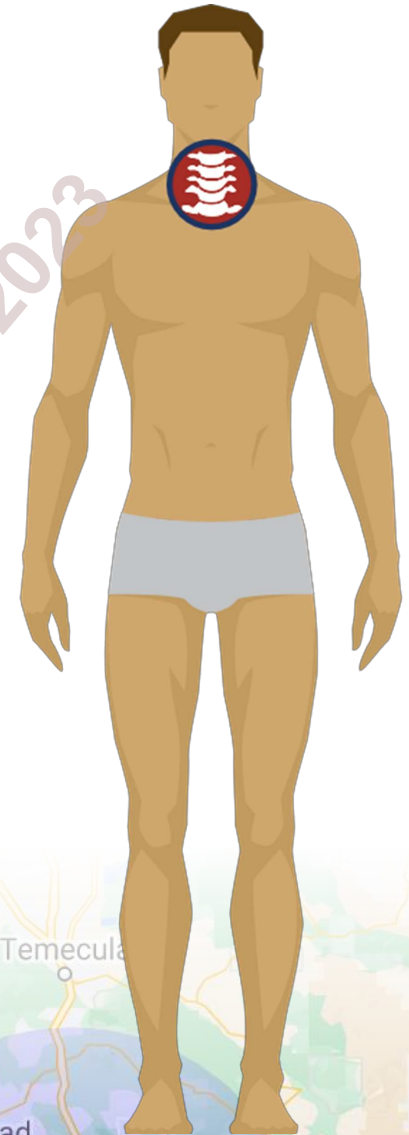
 **Physical Therapy: Initial Evaluation w/ 12 Visits**

 Post-Op	Bill #6 Physical Therapy - Initial Eval	\$ 186
	Bill #7 Physical Therapy - 12 Visits	4,236

Once a Year for 5 Years is \$ 4,422 x 5 **\$ 22,110**

Option #1: Non-Surgical Treatment: \$ 431,306

(Continued on next page)



Records are pulled starting from a 30 mile radius of San Diego, CA.

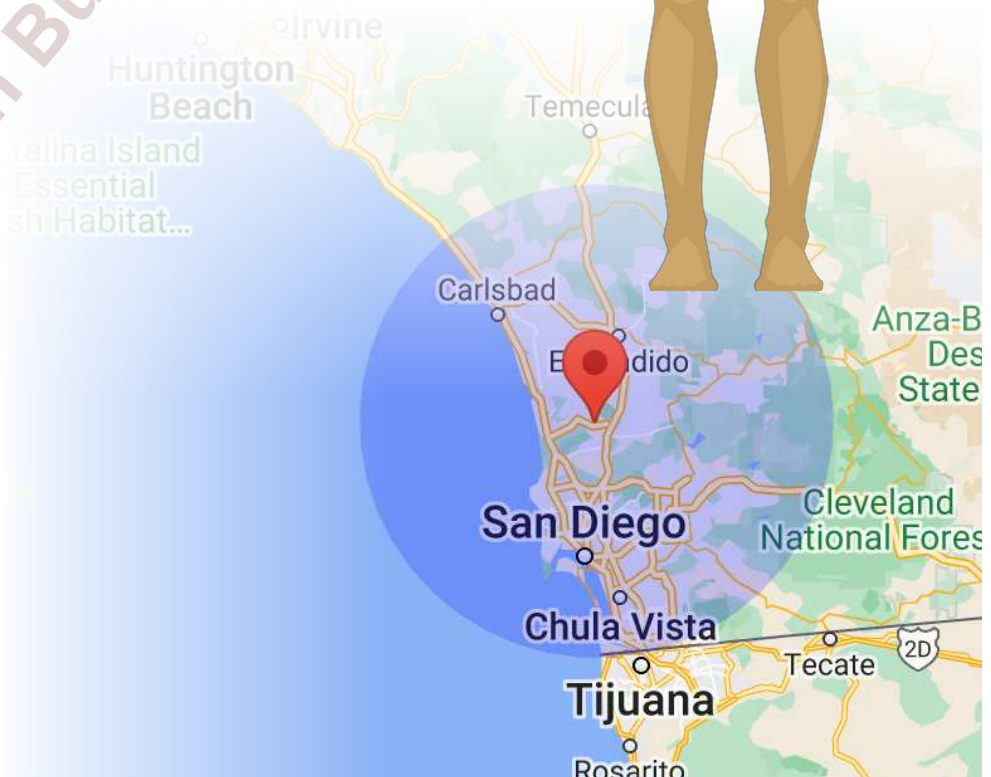
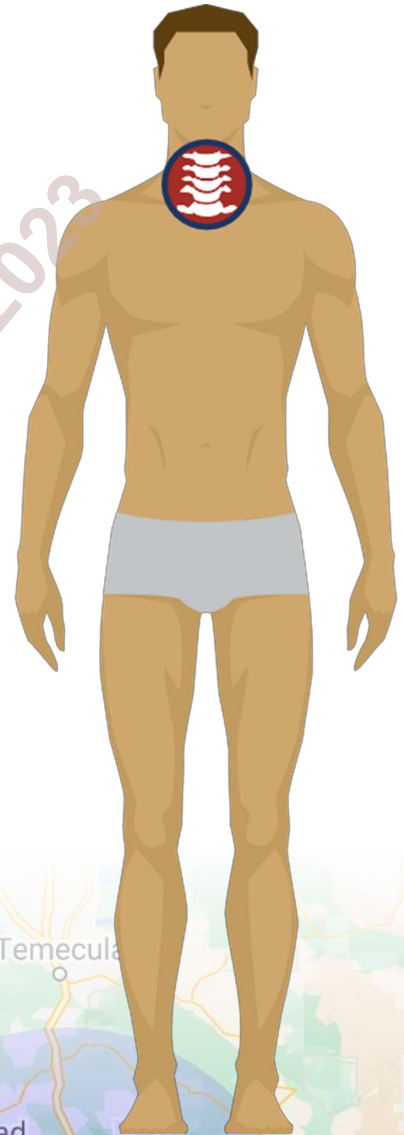
Option #2: Surgical Treatment

Treatment according to Dr. Swanson's IME dated February 3rd, 2021

Anterior Cervical Discectomy and Fusion (ACDF) - 2 Level		
Pre-Op	Bill #8 Pre-Op Consultation	\$ 242
	Bill #9 Radiology	2,367
Sx	Bill #10 Anesthesiology	\$ 4,105
	Bill #11 Surgical Assistant	13,429
	Bill #12 Surgeon	21,913
	Bill #13 Inpatient Hospital	179,178
Post-Op	Bill #14 Radiology	\$ 168
	Bill #15 Physical Therapy - Initial Eval	186
	Bill #16 Physical Therapy - 12 Visits	4,236
		\$ 225,824

Option #2: Surgical Treatment: \$ 225,824

Total Reasonable Value Ranges from \$ 225,824 - \$ 431,306



Records are pulled starting from a 30 mile radius of San Diego, CA.

Patient Name: Ron Burgundy
 Location: San Diego, CA 92129
 Report Title: Treatment according to Dr. Swanson's IME dated February 3rd, 2021

Summary of Itemized Bills

This section lists the bills that Ron Burgundy would expect to receive over the course of his treatment. Each bill details specific procedures and their reasonable value in the patient's area.



Cervical: Radiofrequency Ablation (RFA) - 2 Level



1

Pre-Op

Pre-Op Consultation

Appointment with physician to perform examination and discuss upcoming procedure.

<u>Code</u>	<u>Units</u>	<u>Description</u>	<u>Reasonable Value</u>
91919	1	Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and low level of medical decision making. When using time for code selection, 20-29 minutes of total time is spent on the date of the encounter.	\$ 286

Total Bill: \$ 286



2

Day of Surgery

Anesthesiology

Anesthesia during procedure.

<u>Code</u>	<u>Units</u>	<u>Description</u>	<u>Reasonable Value</u>
91919	1	Anesthesia for percutaneous image guided procedures on the spine and spinal cord; therapeutic	\$ 1,190

Total Bill: \$ 1,190



3

Day of Surgery


Physician

Two-level cervical RFA; physician.

<u>Code</u>	<u>Units</u>	<u>Description</u>	<u>Reasonable Value</u>
91919	1	Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); cervical or thoracic, single facet joint	\$ 2,578
91919	1	Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); cervical or thoracic, each additional facet joint	835

Total Bill: \$ 3,413

Patient Name: Ron Burgundy
 Location: San Diego, CA 92129
 Report Title: Treatment according to Dr. Swanson's IME dated February 3rd, 2021



4
Day of
Surgery


Ambulatory Surgery Center

Facility, equipment, and surgical supplies.

<u>Code</u>	<u>Units</u>	<u>Description</u>	<u>Reasonable Value</u>
91919	1	Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); cervical or thoracic, single facet joint	\$ 9,288

Total Bill: \$ 9,288

Trigger Point Injections; One or Two Muscle Groups



5
Day of
Service


Physician

Trigger point injections for one or two muscle groups; physician.

<u>Code</u>	<u>Units</u>	<u>Description</u>	<u>Reasonable Value</u>
91919	1	Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and low level of medical decision making. When using time for code selection, 20-29 minutes of total time is spent on the date of the encounter.	\$ 286
91919	1	Injection(s); single or multiple trigger point(s), 1 or 2 muscle(s)	224

Total Bill: \$ 510

Physical Therapy: Initial Evaluation w/ 12 Visits



6
Post-Op

Physical Therapy - Initial Eval

Full evaluation of a new physical therapy patient.

<u>Code</u>	<u>Units</u>	<u>Description</u>	<u>Reasonable Value</u>
91919	1	Physical therapy evaluation: moderate complexity	\$ 186

Total Bill: \$ 186

Patient Name: Ron Burgundy
 Location: San Diego, CA 92129
 Report Title: Treatment according to Dr. Swanson's IME dated February 3rd, 2021

Physical Therapy - 12 Visits

Six weeks of rehab twice a week.



Post-Op

7

<u>Code</u>	<u>Units</u>	<u>Description</u>	<u>Reasonable Value</u>
91919	2	Therapeutic procedure, 1 or more areas, each 15 minutes; therapeutic exercises to develop strength and endurance, range of motion and flexibility	\$ 181
91919	2	Manual therapy techniques (eg, mobilization/manipulation, manual lymphatic drainage, manual traction), 1 or more regions, each 15 minutes	172

12 occurrences at \$ 353 per visit: \$ 4,236



Anterior Cervical Discectomy and Fusion (ACDF) - 2 Level

Pre-Op Consultation

Appointment with physician to perform examination and discuss upcoming surgery.



Pre-Op

8

<u>Code</u>	<u>Units</u>	<u>Description</u>	<u>Reasonable Value</u>
91919	1	Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and low level of medical decision making. When using time for code selection, 20-29 minutes of total time is spent on the date of the encounter.	\$ 242

Total Bill: \$ 242

Radiology

Services and equipment used to perform x-ray and MRI of cervical spine.




Pre-Op

9

<u>Code</u>	<u>Units</u>	<u>Description</u>	<u>Reasonable Value</u>
91919	1	Radiologic examination, spine, cervical; 4 or 5 views	\$ 227
91919	1	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	2,140

Total Bill: \$ 2,367

Patient Name: Ron Burgundy
 Location: San Diego, CA 92129
 Report Title: Treatment according to Dr. Swanson's IME dated February 3rd, 2021




10
Day of Surgery

Anesthesiology

Anesthesia during surgery.

<u>Code</u>	<u>Units</u>	<u>Description</u>	<u>Reasonable Value</u>
91919	1	Anesthesia for extensive spine and spinal cord procedures (eg, spinal instrumentation or vascular procedures)	\$ 4,105

Total Bill: \$ 4,105



11
Day of Surgery

Surgical Assistant

Two-level ACDF; surgical assistant.

<u>Code</u>	<u>Units</u>	<u>Description</u>	<u>Reasonable Value</u>
91919	1	Arthrodesis, anterior interbody, including disc space preparation, discectomy, osteophyctomy and decompression of spinal cord and/or nerve roots; cervical below C2	\$ 5,473
91919	1	Arthrodesis, anterior interbody, including disc space preparation, discectomy, osteophyctomy and decompression of spinal cord and/or nerve roots; cervical below C2, each additional interspace	1,540
91919	1	Anterior instrumentation; 2 to 3 vertebral segments	2,845
91919	2	Insertion of interbody biomechanical device(s) (eg, synthetic cage, mesh) with integral anterior instrumentation for device anchoring (eg, screws, flanges), when performed, to intervertebral disc space in conjunction with interbody arthrodesis, each interspace (list separately in addition to code for primary procedure)	2,797
91919	1	Autograft for spine surgery only (includes harvesting the graft); morselized (through separate skin or fascial incision)	774

Total Bill: \$ 13,429

Patient Name: Ron Burgundy
 Location: San Diego, CA 92129
 Report Title: Treatment according to Dr. Swanson's IME dated February 3rd, 2021

Surgeon

Two-level ACDF; surgeon.

<u>Code</u>	<u>Units</u>	<u>Description</u>	<u>Reasonable Value</u>
91919	1	Arthrodesis, anterior interbody, including disc space preparation, discectomy, osteophyctomy and decompression of spinal cord and/or nerve roots; cervical below C2	\$ 9,080
91919	1	Arthrodesis, anterior interbody, including disc space preparation, discectomy, osteophyctomy and decompression of spinal cord and/or nerve roots; cervical below C2, each additional interspace	2,900
91919	1	Anterior instrumentation; 2 to 3 vertebral segments	5,385
91919	2	Insertion of interbody biomechanical device(s) (eg, synthetic cage, mesh) with integral anterior instrumentation for device anchoring (eg, screws, flanges), when performed, to intervertebral disc space in conjunction with interbody arthrodesis, each interspace (list separately in addition to code for primary procedure)	3,299
91919	1	Autograft for spine surgery only (includes harvesting the graft); morselized (through separate skin or fascial incision)	1,249

Total Bill: \$ 21,913



Inpatient Hospital

Facility, inpatient stay, durable medical equipment, and surgical supplies.

<u>Code</u>	<u>Units</u>	<u>Description</u>	<u>Reasonable Value</u>
321	1	Cervical spinal fusion	\$ 179,178

Procedure Codes: 0RG2__0

Total Bill: \$ 179,178



Radiology


Services and equipment used to perform x-ray of spine after surgery.


<u>Code</u>	<u>Units</u>	<u>Description</u>	<u>Reasonable Value</u>
91919	1	Radiologic examination, spine, cervical; 2 or 3 views	\$ 168

Total Bill: \$ 168



Patient Name: Ron Burgundy
 Location: San Diego, CA 92129
 Report Title: Treatment according to Dr. Swanson's IME dated February 3rd, 2021

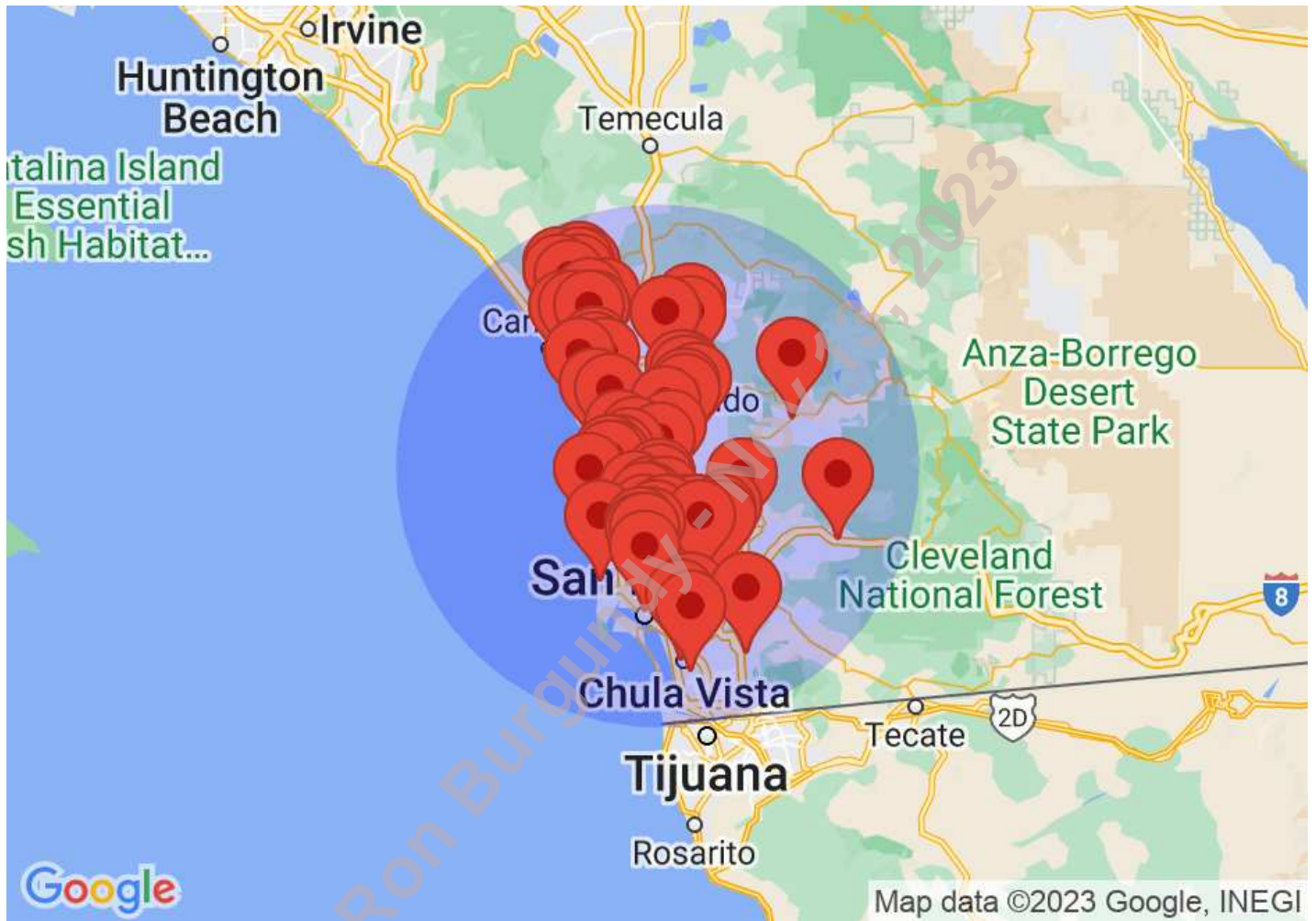
 15 Post-Op	Physical Therapy - Initial Eval <i>Full evaluation of a new physical therapy patient.</i>			
	<u>Code</u>	<u>Units</u>	<u>Description</u>	<u>Reasonable Value</u>
	91919	1	Physical therapy evaluation: moderate complexity	\$ 186
				Total Bill: \$ 186

 16 Post-Op	Physical Therapy - 12 Visits <i>Six weeks of rehab twice a week.</i>			
	<u>Code</u>	<u>Units</u>	<u>Description</u>	<u>Reasonable Value</u>
	91919	2	Therapeutic procedure, 1 or more areas, each 15 minutes; therapeutic exercises to develop strength and endurance, range of motion and flexibility	\$ 181
	91919	2	Manual therapy techniques (eg, mobilization/ manipulation, manual lymphatic drainage, manual traction), 1 or more regions, each 15 minutes	172
				12 occurrences at \$ 353 per visit: \$ 4,236

Ron Burgundy, Nov 13, 2023

Patient Name: Ron Burgundy
Location: San Diego, CA 92129
Report Title: Treatment according to Dr. Swanson's IME dated February 3rd, 2021

Provider Locations Within 30 Mile Radius of San Diego, CA



Patient Name: Ron Burgundy
Location: San Diego, CA 92129
Report Title: Treatment according to Dr. Swanson's IME dated February 3rd, 2021

Appendix A – References & Data Sources

Current Procedural Terminology (CPT)

"CPT" is a registered trademark of the American Medical Association. CPT codes and descriptions are copyrighted by the American Medical Association and used herein for explanatory purposes only.

Professional, Device and Center Data

The data contained in this report related to professional providers, durable medical equipment, ambulatory surgery centers, and diagnostic testing facilities is based on providers' fee schedules; representing the full billed charges for specific services.

The report also leverages the American Medical Association's CPT® codebook, Optum360's National Fee Analyzer, the American Society of Anesthesiologists ("ASA") Crosswalk book, EncoderPro, and www.findacode.com.

Hospital & Emergency Department Data

The data contained in this report related to hospitals is sourced from the Nationwide Inpatient Sample of the Healthcare Cost and Utilization Project (the "HCUP NIS") and the Nationwide Emergency Department Sample (the "HCUP NEDS"), which are sponsored by the Agency for Healthcare Research and Quality (an Agency in the US Department of Health and Human Services), bills already reviewed, or the American Hospital Directory.

HCUP databases contain information from a sample of approximately 20% of all inpatient discharges from HCUP-participating hospitals. The information contained in the database includes, among other data elements, primary and secondary diagnosis codes, procedural ("PCS") codes, Diagnosis Related Group ("DRG") codes, and total hospital charges for each patient.

Additional information on HCUP's data and methodologies can be found here:

<https://www.hcup-us.ahrq.gov/nisoverview.jsp>, <https://www.hcup-us.ahrq.gov/nedsoverview.jsp>

Information on HCUP's data partners that contributed to the database can be found here:

<http://www.hcup-us.ahrq.gov/db/hcupdatapartners.jsp>

Information on the American Hospital Directory can be found here: www.ahd.com

Inflation Data

When necessary, the billed charges in the databases are inflated to represent present day costs or, for historical analyses, the year the service occurred. These inflation rates are sourced from the Bureau of Labor Statistics' ("BLS") monthly CPI Reports for Medical Care.

Professional providers' billed charges are inflated according to BLS' Medical Care: Professional Services rates.

Facilities' billed charges are inflated according Medical Care: Hospital and Related Services rates.

Patient Name: Ron Burgundy
Location: San Diego, CA 92129
Report Title: Treatment according to Dr. Swanson's IME dated February 3rd, 2021

The following table summarizes these rates:

	<u>2013</u>	<u>2014</u>	<u>2015</u>	<u>2016</u>	<u>2017</u>	<u>2018</u>	<u>2019</u>	<u>2020</u>	<u>2021</u>	<u>2022</u>
Facility	3.90%	4.50%	4.00%	4.30%	5.10%	3.70%	3.00%	3.00%	3.30%	4.40%
Professional	2.10%	1.70%	1.90%	3.10%	-1.80%	0.60%	1.40%	1.70%	4.30%	1.70%

Information on BLS' monthly reports can be found here: <https://www.bls.gov/cpi/tables/supplemental-files/home.htm>

Ron Burgundy - Nov 13, 2023

Patient Name: Ron Burgundy
Location: San Diego, CA 92129
Report Title: Treatment according to Dr. Swanson's IME dated February 3rd, 2021

Appendix B - Methodologies

Overview

This report is built with the mission of providing transparency into the billed charges of treatment for a patient receiving care in a specific geographic region and at a specific point in time. This mission guides all decisions in assembling each report.

There are no independent assumptions or opinions on a patient's current state of health, diagnosis, or prognosis. This relies on notes provided by the patients' doctors and the codes on their medical bills for these assessments. There is no review of patients' financial or other resources available to obtain medical care. Reports only analyze billed charge amounts, representing the total charges of the procedures before any third-party contracted rates would apply.

Analysis

The reasonable value is set at the 80th percentile; a broadly accepted metric for determining usual, customary, and reasonable ("UCR") in the healthcare industry. Percentiles of billed charges for professional providers, durable medical equipment, ambulatory surgery centers, and diagnostic testing facilities are determined by searching historical databases for each occurrence of a HCPCS code billed by the same or similar provider the patient received treatment from (e.g. physical therapy from a physical therapist). The data is then filtered to include only providers within a preset radius around a designated location. If there are no occurrences of that code in the selected radius, the radius is enlarged for that code and noted in the report. In circumstances where a national sample is pulled, a geographic adjustment factor is applied to make the values geographically relevant. Percentiles are calculated using the resulting relevant data. Determining the value of hospital charges is done in a similar manner except the hospital database is filtered based on DRG codes and PCS codes instead of HCPCS codes.

Patient Name: Ron Burgundy
 Location: San Diego, CA 92129
 Report Title: Treatment according to Dr. Swanson's IME dated February 3rd, 2021

Appendix C – Supporting Code Detail

Bill #	Code	Description	Data Source	Radius (miles)	Total Patients	Value / Unit
1	91919	Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and low level of medical decision making. When using time for code selection, 20-29 minutes of total time is spent on the date of the encounter.	Physician and Other Supplier, PUF 2020	30	6,634	\$ 286
2	91919	Anesthesia for percutaneous image guided procedures on the spine and spinal cord; therapeutic	Physician and Other Supplier, PUF 2020	68	182	\$ 1,190
3	91919	Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); cervical or thoracic, single facet joint	Physician and Other Supplier, PUF 2020	68	170	\$ 2,578
3	91919	Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); cervical or thoracic, each additional facet joint	Physician and Other Supplier, PUF 2020	100	371	\$ 835
4	91919	Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); cervical or thoracic, single facet joint	Physician and Other Supplier, PUF 2020	100	229	\$ 9,288
5	91919	Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and low level of medical decision making. When using time for code selection, 20-29 minutes of total time is spent on the date of the encounter.	Physician and Other Supplier, PUF 2020	30	6,634	\$ 286
5	91919	Injection(s); single or multiple trigger point(s), 1 or 2 muscle(s)	Physician and Other Supplier, PUF 2020	30	468	\$ 224

Patient Name: Ron Burgundy
 Location: San Diego, CA 92129
 Report Title: Treatment according to Dr. Swanson's IME dated February 3rd, 2021

Bill #	Code	Description	Data Source	Radius (miles)	Total Patients	Value / Unit
6	91919	Physical therapy evaluation: moderate complexity	Physician and Other Supplier, PUF 2020	30	9,032	\$ 186
7	91919	Therapeutic procedure, 1 or more areas, each 15 minutes; therapeutic exercises to develop strength and endurance, range of motion and flexibility	Physician and Other Supplier, PUF 2020	30	25,712	\$ 90
7	91919	Manual therapy techniques (eg, mobilization/ manipulation, manual lymphatic drainage, manual traction), 1 or more regions, each 15 minutes	Physician and Other Supplier, PUF 2020	30	19,882	\$ 86
8	91919	Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and low level of medical decision making. When using time for code selection, 20-29 minutes of total time is spent on the date of the encounter.	Physician and Other Supplier, PUF 2020	30	25,005	\$ 242
9	91919	Radiologic examination, spine, cervical; 4 or 5 views	Physician and Other Supplier, PUF 2020	30	844	\$ 227
9	91919	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Physician and Other Supplier, PUF 2020	30	2,319	\$ 2,140
10	91919	Anesthesia for extensive spine and spinal cord procedures (eg, spinal instrumentation or vascular procedures)	Physician and Other Supplier, PUF 2020	30	405	\$ 4,105
11	91919	Arthrodesis, anterior interbody, including disc space preparation, discectomy, osteophytectomy and decompression of spinal cord and/or nerve roots; cervical below C2	Physician and Other Supplier, PUF 2020		7,961	\$ 5,473
11	91919	Arthrodesis, anterior interbody, including disc space preparation, discectomy, osteophytectomy and decompression of spinal cord and/or nerve roots; cervical below C2, each additional interspace	Physician and Other Supplier, PUF 2020	National w/ GAF	3,086	\$ 1,540

Patient Name: Ron Burgundy
 Location: San Diego, CA 92129
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Bill #	Code	Description	Data Source	Radius (miles)	Total Patients	Value / Unit
11	91919	Anterior instrumentation; 2 to 3 vertebral segments	Physician and Other Supplier, PUF 2020	100	130	\$ 2,845
11	91919	Insertion of interbody biomechanical device(s) (eg, synthetic cage, mesh) with integral anterior instrumentation for device anchoring (eg, screws, flanges), when performed, to intervertebral disc space in conjunction with interbody arthrodesis, each interspace (list separately in addition to code for primary procedure)	Physician and Other Supplier, PUF 2020	30	198	\$ 1,399
11	91919	Autograft for spine surgery only (includes harvesting the graft); morselized (through separate skin or fascial incision)	Physician and Other Supplier, PUF 2020	National w/ GAF	1,537	\$ 774
12	91919	Arthrodesis, anterior interbody, including disc space preparation, discectomy, osteophyctomy and decompression of spinal cord and/or nerve roots; cervical below C2	Physician and Other Supplier, PUF 2020	45	110	\$ 9,080
12	91919	Arthrodesis, anterior interbody, including disc space preparation, discectomy, osteophyctomy and decompression of spinal cord and/or nerve roots; cervical below C2, each additional interspace	Physician and Other Supplier, PUF 2020		6,745	\$ 2,900
12	91919	Anterior instrumentation; 2 to 3 vertebral segments	Physician and Other Supplier, PUF 2020	30	270	\$ 5,385
12	91919	Insertion of interbody biomechanical device(s) (eg, synthetic cage, mesh) with integral anterior instrumentation for device anchoring (eg, screws, flanges), when performed, to intervertebral disc space in conjunction with interbody arthrodesis, each interspace (list separately in addition to code for primary procedure)	Physician and Other Supplier, PUF 2020	30	634	\$ 1,649
12	91919	Autograft for spine surgery only (includes harvesting the graft); morselized (through separate skin or fascial incision)	Physician and Other Supplier, PUF 2020	100	169	\$ 1,249

Patient Name: Ron Burgundy
 Location: San Diego, CA 92129
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Bill #	Code	Description	Data Source	Radius (miles)	Total Patients	Value / Unit
13	321	Cervical spinal fusion	National (Nationwide) Inpatient Sample (NIS) 2016	National w/ GAF	16,298	\$ 179,178
<p>Procedure Codes: 0RG2070 (v10) Fusion 2-6 C Jt w Autol Sub, Ant Appr A Col, Open, 0RG20A0 (v10) Fusion 2-6 C Jt w Intbd Fus Dev, Ant Appr A Col, Open, 0RG20J0 (v10) Fusion 2-6 C Jt w Synth Sub, Ant Appr A Col, Open, 0RG20K0 (v10) Fusion 2-6 C Jt w Nonaut Sub, Ant Appr A Col, Open, 0RG20Z0 (v10) Fusion of 2-6 C Jt, Ant Appr A Col, Open Approach, 0RG2370 (v10) Fusion 2-6 C Jt w Autol Sub, Ant Appr A Col, Perc, 0RG23A0 (v10) Fusion 2-6 C Jt w Intbd Fus Dev, Ant Appr A Col, Perc, 0RG23J0 (v10) Fusion 2-6 C Jt w Synth Sub, Ant Appr A Col, Perc, 0RG23K0 (v10) Fusion 2-6 C Jt w Nonaut Sub, Ant Appr A Col, Perc, 0RG23Z0 (v10) Fusion of 2-6 C Jt, Ant Appr A Col, Perc Approach, 0RG2470 (v10) Fusion 2-6 C Jt w Autol Sub, Ant Appr A Col, Perc Endo, 0RG24A0 (v10) Fusion 2-6 C Jt w Intbd Fus Dev, Ant Appr A Col, Perc Endo, 0RG24J0 (v10) Fusion 2-6 C Jt w Synth Sub, Ant Appr A Col, Perc Endo, 0RG24K0 (v10) Fusion 2-6 C Jt w Nonaut Sub, Ant Appr A Col, Perc Endo, 0RG24Z0 (v10) Fusion of 2-6 C Jt, Ant Appr A Col, Perc Endo Approach</p>						
14	91919	Radiologic examination, spine, cervical; 2 or 3 views	Physician and Other Supplier, PUF 2020	30	1,668	\$ 168
15	91919	Physical therapy evaluation: moderate complexity	Physician and Other Supplier, PUF 2020	30	9,032	\$ 186
16	91919	Therapeutic procedure, 1 or more areas, each 15 minutes; therapeutic exercises to develop strength and endurance, range of motion and flexibility	Physician and Other Supplier, PUF 2020	30	25,712	\$ 90
16	91919	Manual therapy techniques (eg, mobilization/ manipulation, manual lymphatic drainage, manual traction), 1 or more regions, each 15 minutes	Physician and Other Supplier, PUF 2020	30	19,882	\$ 86