Oklahoma Arthritis Center

Qualified Procedures
Reimbursement Schedule

Services include: E&M, Drugs, Radiology, and Lab

Updated 01/28/2021

CPT	Description	Fee
J0129	Orencia - PRICE PER UNIT - ALL INCLUSIVE	$ 57.84
J0490	Benlysta - PRICE PER UNIT - ALL INCLUSIVE	$ 50.67
J0585	Botox - PRICE PER UNIT - ALL INCLUSIVE	$ 6.85
J0717	Cimizia - PRICE PER UNIT - ALL INCLUSIVE	$ 8.39
J0897	Prolia - PRICE PER UNIT - ALL INCLUSIVE	$ 21.01
J1300	Soliris - PRICE PER UNIT - ALL INCLUSIVE	$ 247.66
J1439	Injectafer	$ 1.29
J1459	Privigen - PRICE PER UNIT - ALL INCLUSIVE	$ 48.35
J1569	Gammagard - PRICE PER UNIT - ALL INCLUSIVE	$ 50.77
J1602	Simponi Aria - PRICE PER UNIT - ALL INCLUSIVE	$ 21.46
J1745	Remicade - PRICE PER UNIT - ALL INCLUSIVE	$ 58.68
J2182	Nucala - PRICE PER UNIT - ALL INCLUSIVE	$ 31.31
J2323	Tysabri - PRICE PER UNIT - ALL INCLUSIVE	$ 22.95
J2350	Ocrevus - PRICE PER UNIT - ALL INCLUSIVE	$ 61.70
J2357	Xolair - PRICE PER UNIT - ALL INCLUSIVE	$ 39.48
J3111	Evenity - PRICE PER UNIT - ALL INCLUSIVE	$ 9.86
J3245	Ilumya - PRICE PER UNIT - ALL INCLUSIVE	$ 142.04
J3262	Actemra - PRICE PER UNIT - ALL INCLUSIVE	$ 5.44
J3357	Stelara 45 mg/0.5 ml - PRICE PER UNIT - ALL INCLUSIVE	$ 199.61
J3358	Stelara 5mg/ml 26 ml - PRICE PER UNIT - ALL INCLUSIVE	$ 12.63
J3380	Entyvio - PRICE PER UNIT - ALL INCLUSIVE	$ 21.67
J3489	Zoledronic Acid - PRICE PER UNIT - DRUG ONLY	$ 14.97
J3590	Tepezza - PRICE PER UNIT - ALL INCLUSIVE	$ 16,971.10
J3590	Vyepti - PRICE PER UNIT - ALL INCLUSIVE	$ 1,702.81
J7318	Durolane - PRICE PER UNIT - ALL INCLUSIVE	$ 15.19
J9312	Rituxan - PRICE PER UNIT - ALL INCLUSIVE	$ 98.89
64490	Cervical Facet Injection	$252.95
64491	Cervical Facet Injection or Medial Branch Block	$128.34
64493	Lumbar Facet Injection	$229.33
64494	Under Introduction/Injection of Anesthetic Agent (Nerve Block), Diagnostic or Therapeutic Procedures on the Paravertebral Spinal Nerves and Branches	$118.93
70336	MRI jaw Jt(s)	$ 390.12
70540	MRI orbit/face/neck w/o cnt	$ 343.98
70551	Brain Stem w/o cnt	$ 295.25
70552	MRI of brain w/ cnt	$ 408.48
70553	Brain Stem w and w/o cnt	$ 482.85
71550	MRI, chest; w/o cnt	$ 388.64
71552	MRI, chest; w/o and w/cnt	$ 638.71
72141	Cervical Spine w/o cnt	$ 288.08
72146	Thoracic Spine w/o cnt	$ 288.53
72148	Lumbar Spine w/o cnt	$ 288.53
72156	Cervical Spine w/ and w/o cnt	$ 486.00
72157	Thoracic Spine w/ and w/o cnt	$ 487.35
72158	Lumbar Spine w/ cnt	$ 485.10
72195	Pelvis w/o cnt	$ 350.87
72197	Pelvis w/ and w/o cnt	$ 517.87

73218	MRI upr extrm no Jt w/o cnt	$	382.21
73221	Upper Ext (Jt) w/o cnt	$	303.10
73222	MRI upr extr joint, w/ cnt	$	479.93
73223	Upper Ext (Jt) w/ and w/o cnt	$	596.23
73718	Lower Ext (non-Jt) w/o cnt	$	339.93
73719	MRI lwr extrm no jnt w/ cnt	$	402.16
73720	MRI lw ext no jnt w/o cnt flwd cn	$	516.22
73721	Lower Ext (Jt) w/o cnt	$	303.10
73723	Lower Ext (Jt) w/ and w/o cnt	$	594.89
74181	MRI, abdomen; w/o cnt	$	317.60
74183	MRI, abdomen; w/o and w/ cnt	$	518.32
76536	US soft tis head/neck	$	149.31
76700	US abdomen, complete	$	158.82
76705	US abdomen, limited	$	118.45
76775	US retroperitoneum lmtd	$	77.49
76882	US, Ext, nonvascular lmted	$	75.66
76942	US, guide needle plcmnt S/I	$	76.19
77080	DXA, bone density, axial skltn	$	51.97
77081	DXA, bone density, apndclr skltn	$	43.43
77085	Dexa with VFA	$	70.98