BARIATRIC AND SPECIALTY SURGERY CENTER OF PARAMUS CONTRACT FEE SCHEDULE										
CPT CODE	DESCRIPTION	CATEGORY	HORIZON HMO	HORIZON PPO	UHC/OXFORD	AETNA	MEDICARE			
S2083	ADJ GASTRIC BAND DIAM SUBQ PORT	LAP BAND ADJUSTMENTS	\$250	\$275	N/A	\$1,910	Not covered in ASC			
10060	DRAINAGE OF SKIN ABSCESS	GENERAL SURGERY	\$250	\$275	\$ 900	\$1,910	\$ 77.23			
10160	PUNCTURE DRAINAGE OF LESION	GENERAL SURGERY	\$250	\$275	\$ 900	\$1,910	\$ 82.67			
10180	COMPLEX DRAINAGE WOUND	GENERAL SURGERY	\$1,304	\$1,332	\$ 1,800	\$2,016	\$ 970.53			
11042	DEB SUBQ TISSUE 20 SQ CM/<	GENERAL SURGERY	\$729	\$745	\$ 900	\$1,910	\$ 170.40			
11044	DEB BONE 20 SQ CM/<	GENERAL SURGERY	\$1,304	\$1,332	\$ 1,400	\$2,016	\$ 579.35			
11200	REMOVAL OF SKIN TAGS <w 15<="" td=""><td>GENERAL SURGERY</td><td>\$250</td><td>\$275</td><td>\$ 900</td><td>\$1,910</td><td>Not covered in ASC</td></w>	GENERAL SURGERY	\$250	\$275	\$ 900	\$1,910	Not covered in ASC			
11402	EXC TR-EXT B9+MARG 1.1-2 CM	GENERAL SURGERY	\$250	\$275	\$ 1,400	\$1,910	\$ 117.38			
11422	EXC H-F-NK-SP B9+MARG 1.1-2	GENERAL SURGERY	\$250	\$275	\$ 1,400	\$1,910	\$ 117.04			
11423	EXC H-F-NK-SP B9+MARG 2.1-3	GENERAL SURGERY	\$250	\$275	\$ 1,800	\$1,910	\$ 126.90			
11900	INJECT SKIN LESIONS <td>GENERAL SURGERY</td> <td>\$250</td> <td>\$275</td> <td>\$ 900</td> <td>\$1,910</td> <td>Not covered in ASC</td>	GENERAL SURGERY	\$250	\$275	\$ 900	\$1,910	Not covered in ASC			
13101	CMPLX RPR TRUNK 2.6-7.5 CM	GENERAL SURGERY	\$729	\$745	\$ 1,400	\$1,910	\$ 258.26			
13102	CMPLX RPR TRUNK ADDL 5CM/<	GENERAL SURGERY	\$729	\$745	\$ 900	\$1,910	Not covered in ASC			
13131	CMPLX RPR F/C/C/M/N/AX/G/H/F	GENERAL SURGERY	\$729	\$745	\$ 900	\$1,910	\$ 170.40			
13132	CMPLX RPR F/C/C/M/N/AX/G/H/F	GENERAL SURGERY	\$729	\$745	\$ 1,400	\$1,910	\$ 258.26			
13151	CMPLX RPR E/N/E/L 1.1-2.5 CM	GENERAL SURGERY	\$729	\$745	\$ 1,400	\$1,910	\$ 258.26			

CPT CODE	DESCRIPTION	CATEGORY	HORIZON HMO	HORIZON PPO	UHC/OXFORD	AETNA	MEDICARE
15002	WOUND PREP TRK/ARM/LEG	GENERAL SURGERY	\$729	\$745	\$ 1,400	\$1,910	\$ 845.18
15004	WOUND PREP F/N/HF/G	GENERAL SURGERY	\$729	\$745	\$ 1,400	\$1,910	\$ 258.26
15120	SKN SPLT A-GRFT FAC/NCK/HF/G	GENERAL SURGERY	\$1,304	\$1,332	\$ 2,200	\$2,016	\$ 1,735.42
15275	INTEGRA PLACEMENT	GENERAL SURGERY	\$729	\$745	\$ 1,800	\$1,910	\$ 845.18
15734	MUSCLE-SKIN GRAFT TRUNK	GENERAL SURGERY	\$1,579	\$1,613	\$ 2,200	\$2,016	\$ 1,735.42
15777	ACELLULAR DERM MATRIX IMPLT	GENERAL SURGERY	\$250	\$275	\$ 900	\$1,910	Not covered in ASC
15830	EXC SKIN ABD	GENERAL SURGERY	\$1,579	\$1,613	\$ 2,200	\$2,016	\$ 2,194.55
15832	EXCISE EXCESSIVE SKIN THIGH	GENERAL SURGERY	\$1,579	\$1,613	\$ 2,000	\$2,016	\$ 970.53
15834	EXCISE EXCESSIVE SKIN HIP	GENERAL SURGERY	\$1,579	\$1,613	\$ 1,800	\$2,016	\$ 970.53
15836	EXCISE EXCESSIVE SKIN ARM	GENERAL SURGERY	\$1,579	\$1,613	\$ 2,000	\$2,016	\$ 970.53
15847	EXC SKIN ABD ADD-ON	GENERAL SURGERY	\$1,579	\$1,613	\$ 900	\$2,016	Not covered in ASC
15852	DRESSING CHANGE NOT FOR BURN	GENERAL SURGERY	\$250	\$275	\$ 900	\$1,910	Not covered in ASC
15877	SUCTION LIPECTOMY TRUNK	GENERAL SURGERY	\$1,579	\$1,613	\$ 2,200	\$2,016	\$ 1,735.42
17250	CHEMICAL CAUTERY TISSUE	GENERAL SURGERY	\$250	\$275	\$ 900	\$1,910	Not covered in ASC
19300	REMOVAL OF BREAST TISSUE	GENERAL SURGERY	\$2,055	\$2,099	\$ 2,000	\$2,122	\$ 1,146.91
19303	MAST SIMPLE COMPLETE	GENERAL SURGERY	\$2,055	\$2,099	\$ 2,200	\$2,122	\$ 2,194.55
19318	REDUCTION OF LARGE BREAST	GENERAL SURGERY	\$2,055	\$2,099	\$ 2,200	\$2,122	\$ 2,194.55
20525	REMOVAL OF FOREIGN BODY	GENERAL SURGERY	\$1,579	\$1,613	\$ 2,000	\$2,016	\$ 970.53

CPT CODE	DESCRIPTION	CATEGORY	HORIZON HMO	HORIZON PPO	UHC/OXFORD	AETNA	MEDICARE
20926	REMOVAL OF TISSUE FOR GRAFT	GENERAL SURGERY	\$2,055	\$2,099	\$ 2,200	\$2,122	Not covered in ASC
21931	EXC BACK LES SC 3 CM/>	GENERAL SURGERY	\$1,304	\$1,332	\$ 2,000	\$2,016	\$ 579.35
22902	EXC ABD LES SC < 3 CM	GENERAL SURGERY	\$2,055	\$2,099	\$ 1,800	\$2,122	\$ 579.35
22903	EXC ABD LES SC 3 CM/>	GENERAL SURGERY	\$1,579	\$1,613	\$ 2,000	\$2,016	\$ 970.53
27337	EXC THIGH/KNEE LES SC 3 CM/>	GENERAL SURGERY	\$1,304	\$1,332	\$ 2,000	\$2,016	\$ 970.53
36556	INSERT NON-TUNNEL CV CATH	GENERAL SURGERY	\$729	\$745	\$ 1,800	\$1,910	\$ 1,331.02
36561	INSERT TUNNELED CV CATH	GENERAL SURGERY	\$1,579	\$1,613	\$ 2,200	\$2,016	\$ 1,331.02
36581	REPLACE TUNNELED CV CATH	GENERAL SURGERY	\$1,304	\$1,332	\$ 2,000	\$2,016	\$ 1,331.02
38100	REMOVAL OF SPLEEN TOTAL	GENERAL SURGERY	\$250	\$275	\$ 530	\$1,910	Not covered in ASC
38570	LAPAROSCOPY LYMPH NODE BIOP	GENERAL SURGERY	\$3,171	\$3,239	\$ 2,300	\$2,546	\$ 2,248.39
43246	EGD PLACE GASTROSTOMY TUBE	GENERAL SURGERY	\$1,304	\$1,332	\$ 1,800	\$2,016	\$ 672.64
43247	EGD REMOVE FOREIGN BODY	GENERAL SURGERY	\$1,304	\$1,332	\$ 1,800	\$2,016	\$ 398.90
43248	EGD GUIDE WIRE INSERTION	GENERAL SURGERY	\$1,304	\$1,332	\$ 1,800	\$2,016	\$ 398.90
43251	EGD REMOVE LESION SNARE	GENERAL SURGERY	\$1,304	\$1,332	\$ 1,800	\$2,016	\$ 672.64
43262	ENDO CHOLANGIOPANCREATOGRAPH	GENERAL SURGERY	\$1,304	\$1,332	\$ 2,000	\$2,016	\$ 1,399.97
43280	LAPAROSCOPY FUNDOPLASTY	GENERAL SURGERY	\$250	\$275	\$ 2,300	\$1,910	\$ 3,699.21
43281	LAP PARAESOPHAG HERN REPAIR	GENERAL SURGERY	\$250	\$275	\$ 2,300	\$1,910	\$ 3,699.21
43289	LAPAROSCOPE PROC ESOPH	GENERAL SURGERY	\$250	\$275	\$ 2,200	\$1,910	Not covered in ASC
43605	BIOPSY OF STOMACH	GENERAL SURGERY	\$250	\$275	\$ 2,000	\$1,910	Not covered in ASC

CPT CODE	DESCRIPTION	CATEGORY	HORIZON HMO	HORIZON PPO	UHC/O	XFORD	AETNA	MEDICARE
43830	PLACE GASTROSTOMY TUBE	GENERAL SURGERY	\$250	\$275	\$	2,000	\$1,910	\$ 672.64
44100	BIOPSY OF BOWEL	GENERAL SURGERY	\$729	\$745	\$	1,800	\$1,910	\$ 398.90
44139	MOBILIZATION OF COLON	GENERAL SURGERY	\$250	\$275	\$	530	\$1,910	Not covered in ASC
44143	PARTIAL REMOVAL OF COLON	GENERAL SURGERY	\$250	\$275	\$	530	\$1,910	Not applicable
44145	PARTIAL REMOVAL OF COLON	GENERAL SURGERY	\$250	\$275	\$	530	\$1,910	Not covered in ASC
44147	PARTIAL REMOVAL OF COLON	GENERAL SURGERY	\$250	\$275	\$	530	\$1,910	Not covered in ASC
44160	REMOVAL OF COLON	GENERAL SURGERY	\$250	\$275	\$	530	\$1,910	Not covered in ASC
44204	LAPARO PARTIAL COLECTOMY	GENERAL SURGERY	\$250	\$275	\$	2,200	\$1,910	Not covered in ASC
44210	LAPARO TOTAL PROCTOCOLECTOMY	GENERAL SURGERY	\$250	\$275	\$	530	\$1,910	Not covered in ASC
44213	LAP MOBIL SPLENIC FL ADD-ON	GENERAL SURGERY	\$250	\$275	\$	530	\$1,910	Not covered in ASC
44340	REVISION OF COLOSTOMY	GENERAL SURGERY	\$1,579	\$1,613	\$	2,200	\$2,016	\$ 1,735.42
44602	SUTURE SMALL INTESTINE	GENERAL SURGERY	\$250	\$275	\$	530	\$1,910	Not covered in ASC
44850	REPAIR OF MESENTERY	GENERAL SURGERY	\$250	\$275	\$	530	\$1,910	Not covered in ASC
44955	APPENDECTOMY ADD-ON	GENERAL SURGERY	\$250	\$275	\$	900	\$1,910	Not covered in ASC
44960	APPENDECTOMY	GENERAL SURGERY	\$250	\$275	\$	530	\$1,910	Not covered in ASC
44970	LAPAROSCOPY APPENDECTOMY	GENERAL SURGERY	\$250	\$275	\$	2,300	\$1,910	\$ 2,248.39
47001	NEEDLE BIOPSY LIVER ADD-ON	GENERAL SURGERY	\$250	\$275	\$	900	\$1,910	Not covered in ASC
47562	LAPAROSCOPIC CHOLECYSTECTOMY	GENERAL SURGERY	\$250	\$275	\$	2,300	\$1,910	\$ 2,248.39
48545	PANCREATORRHAPHY	GENERAL SURGERY	\$250	\$275	\$	530	\$1,910	Not covered in ASC
49255	REMOVAL OF OMENTUM	GENERAL SURGERY	\$250	\$275	\$	530	\$1,910	Not covered in ASC
49320	DIAG LAPARO SEPARATE PROC	GENERAL SURGERY	\$1,579	\$1,613	\$	2,200	\$2,016	\$ 2,248.39
49322	LAPAROSCOPY ASPIRATION	GENERAL SURGERY	\$2,055	\$2,099	\$	2,200	\$2,122	\$ 2,248.39
49329	LAPARO PROC ABDM/PER/OMENT	GENERAL SURGERY	\$250	\$275	\$	2,200	\$1,910	Not covered in ASC
49420	INSERT ABDOMINAL DRAIN	GENERAL SURGERY	\$250	\$275	\$	530	\$1,910	Not covered in ASC
49505	PRP I/HERN INIT REDUC >5 YR	GENERAL SURGERY	\$2,055	\$2,099	\$	2,200	\$2,122	

CPT CODE	DESCRIPTION	CATEGORY	HORIZON HMO	HORIZON PPO	UHC/OXFORD	AETNA	MEDICARE
49507	PRP I/HERN INIT BLOCK >5 YR	GENERAL SURGERY	\$3,171	\$3,239	\$ 2,200	\$2,546	\$ 1,370.86
49560	RPR VENTRAL HERN INIT REDUC	GENERAL SURGERY	\$2,055	\$2,099	\$ 2,200	\$2,122	\$ 1,370.86
49561	RPR VENTRAL HERN INIT BLOCK	GENERAL SURGERY	\$3,171	\$3,239	\$ 2,200	\$2,546	\$ 1,370.86
49568	HERNIA REPAIR W/MESH	GENERAL SURGERY	\$2,032	\$2,076	\$ 900	\$2,334	Not covered in ASC
49587	RPR UMBIL HERN BLOCK > 5 YR	GENERAL SURGERY	\$3,171	\$3,239	\$ 2,200	\$2,546	\$ 1,370.86
49650	LAP ING HERNIA REPAIR INIT	GENERAL SURGERY	\$2,055	\$2,099	\$ 2,300	\$2,122	\$ 2,248.39
49652	LAP VENT/ABD HERNIA REPAIR	GENERAL SURGERY	\$250	\$275	\$ 2,300	\$1,910	\$ 2,248.39
49653	LAP VENT/ABD HERN PROC COMP	GENERAL SURGERY	\$250	\$275	\$ 2,300	\$1,910	\$ 2,248.39
49656	LAP INC HERNIA REPAIR RECUR	GENERAL SURGERY	\$250	\$275	\$ 2,300	\$1,910	\$ 3,699.21
49659	LAPARO PROC, HERNIA REPAIR	GENERAL SURGERY	\$250	\$275	\$ 2,200	\$1,910	Not covered in ASC
49999	EXCISION OF PERITONEAL IMPLANT	GENERAL SURGERY	\$250	\$275	\$ 1,800	\$1,910	Not covered in ASC
58662	LAPAROSCOPY EXCISE LESIONS	GENERAL SURGERY	\$2,328	\$2,375	\$ 2,300	\$2,122	\$ 2,248.39
43235	EGD DIAGNOSTIC BRUSH WASH	ENDOSCOPY	\$729	\$745	\$ 1,800	\$1,910	\$ 398.90
43239	EGD BIOPSY SINGLE/MULTIPLE	ENDOSCOPY	\$1,304	\$1,332	\$ 1,800	\$2,016	\$ 398.90
45378	DIAGNOSTIC COLONOSCOPY	ENDOSCOPY	\$1,304	\$1,332	\$ 1,800	\$2,016	\$ 391.04
43631	REMOVAL OF STOMACH PARTIAL	BARIATRIC SURGERY	\$250	\$275	\$ 530	\$1,910	Not covered in ASC
43632	REMOVAL OF STOMACH PARTIAL	BARIATRIC SURGERY	\$250	\$275	\$ 530	\$1,910	Not covered in ASC
43633	REMOVAL OF STOMACH PARTIAL	BARIATRIC SURGERY	\$250	\$275	\$ 530	\$1,910	Not covered in ASC
43644	LAP GASTRIC BYPASS/ROUX-EN-Y	BARIATRIC SURGERY	\$250	\$275	\$ 2,300	\$1,910	Not covered in ASC
43659	LAPAROSCOPE PROC STOM	BARIATRIC SURGERY	\$250	\$275	\$ 2,200	\$1,910	Not covered in ASC

CPT CODE	DESCRIPTION	CATEGORY	HORIZON HMO	HORIZON PPO	UHC/OXFORD	AETNA	MEDICARE
43770	LAP PLACE GASTR ADJ DEVICE	BARIATRIC SURGERY	\$250	\$275	\$ 2,300	\$1,910	\$ 5,413.53
43774	LAP RMVL GASTR ADJ ALL PARTS	BARIATRIC SURGERY	\$250	\$275	\$ 3,200	\$1,910	\$ 1,339.97
43840	REPAIR OF STOMACH LESION	BARIATRIC SURGERY	\$250	\$275	\$ 530	\$1,910	Not covered in ASC
43886	REVISE GASTRIC PORT OPEN	BARIATRIC SURGERY	\$250	\$275	\$ 2,200	\$1,910	\$ 1,735.42
43888	CHANGE GASTRIC PORT OPEN	BARIATRIC SURGERY	\$250	\$275	\$ 2,200	\$1,910	\$ 1,735.42
43999	STOMACH SURGERY PROCEDURE	BARIATRIC SURGERY	\$250	\$275	\$ 1,800	\$1,910	Not covered in ASC
44050	REDUCE BOWEL OBSTRUCTION	BARIATRIC SURGERY	\$250	\$275	\$ 530	\$1,910	Not covered in ASC
44120	REMOVAL OF SMALL INTESTINE	BARIATRIC SURGERY	\$250	\$275	\$ 530	\$1,910	Not covered in ASC
44130	BOWEL TO BOWEL FUSION	BARIATRIC SURGERY	\$250	\$275	\$ 530	\$1,910	Not covered in ASC
44140	PARTIAL REMOVAL OF COLON	BARIATRIC SURGERY	\$250	\$275	\$ 530	\$1,910	Not covered in ASC
44180	LAP ENTEROLYSIS	BARIATRIC SURGERY	\$250	\$275	\$ 2,300	\$1,910	\$ 2,248.39
44238	LAPAROSCOPE PROC INTESTINE	BARIATRIC SURGERY	\$250	\$275	\$ 2,200	\$1,910	Not covered in ASC