

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	0446T		5,802.94	5,512.79	6,339.71
#	0446T		48.64	46.21	53.14
#	0447T		56.20	53.39	61.40
	0447T		96.96	92.11	105.93
#	0448T		82.06	77.96	89.65
	0448T		5,713.47	5,427.80	6,241.97
	0509T		72.69	69.06	79.42
	0509T	TC	52.17	49.56	56.99
	0509T	26	20.52	19.49	22.41
#	0583T		124.07	117.87	135.55
	0583T		1,389.80	1,320.31	1,518.36
	0596T		1,860.63	1,767.60	2,032.74
#	0596T		110.37	104.85	120.58
	0597T		550.77	523.23	601.71
#	0597T		52.45	49.83	57.30
	0605T		696.50	661.68	760.93
	10004		51.95	49.35	56.75
#	10004		36.93	35.08	40.34
#	10005		62.69	59.56	68.49
	10005		126.74	120.40	138.46
	10006		58.82	55.88	64.26
#	10006		43.19	41.03	47.18
#	10007		80.65	76.62	88.11
	10007		323.07	306.92	352.96
#	10008		47.66	45.28	52.07
	10008		134.08	127.38	146.49
	10009		386.58	367.25	422.34
#	10009		93.60	88.92	102.26
#	10010		66.60	63.27	72.76
	10010		221.98	210.88	242.51
#	10021		46.23	43.92	50.51

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	10021		96.49	91.67	105.42
	10030		580.09	551.09	633.75
#	10030		118.86	112.92	129.86
#	10035		71.36	67.79	77.96
	10035		322.97	306.82	352.84
#	10036		36.93	35.08	40.34
	10036		269.85	256.36	294.81
#	10040		42.10	40.00	46.00
	10040		107.07	101.72	116.98
	10060		122.41	116.29	133.73
#	10060		96.67	91.84	105.62
	10061		211.34	200.77	230.89
#	10061		168.43	160.01	184.01
	10080		252.25	239.64	275.59
#	10080		101.46	96.39	110.85
	10081		359.37	341.40	392.61
#	10081		165.37	157.10	180.67
	10120		148.84	141.40	162.61
#	10120		98.27	93.36	107.36
	10121		263.08	249.93	287.42
#	10121		168.08	159.68	183.63
	10140		166.00	157.70	181.36
#	10140		112.06	106.46	122.43
#	10160		88.70	84.27	96.91
	10160		125.47	119.20	137.08
	10180		274.65	260.92	300.06
#	10180		171.37	162.80	187.22
	11000		56.33	53.51	61.54
#	11000		24.46	23.24	26.73
	11001		25.89	24.60	28.29
#	11001		12.71	12.07	13.88

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	11004		509.20	483.74	556.30
	11005		701.17	666.11	766.03
	11006		630.23	598.72	688.53
	11008		247.65	235.27	270.56
	11010		447.97	425.57	489.41
#	11010		246.32	234.00	269.10
	11011		514.38	488.66	561.96
#	11011		264.00	250.80	288.42
	11012		659.24	626.28	720.22
#	11012		361.66	343.58	395.12
#	11042		54.99	52.24	60.08
	11042		125.47	119.20	137.08
	11043		230.47	218.95	251.79
#	11043		137.60	130.72	150.33
	11044		310.53	295.00	339.25
#	11044		200.82	190.78	219.40
	11045		40.25	38.24	43.98
#	11045		22.17	21.06	24.22
	11046		74.48	70.76	81.37
#	11046		48.12	45.71	52.57
#	11047		85.83	81.54	93.77
	11047		125.67	119.39	137.30
	11055		65.57	62.29	71.63
#	11055		13.78	13.09	15.05
	11056		76.19	72.38	83.24
#	11056		19.80	18.81	21.63
	11057		83.72	79.53	91.46
#	11057		25.49	24.22	27.85
	11102		89.95	85.45	98.27
#	11102		29.89	28.40	32.66
	11103		46.12	43.81	50.38

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	11103		17.61	16.73	19.24
#	11104		37.96	36.06	41.47
	11104		114.27	108.56	124.84
	11105		57.26	54.40	62.56
#	11105		21.41	20.34	23.39
#	11106		46.33	44.01	50.61
	11106		142.56	135.43	155.74
	11107		66.95	63.60	73.14
#	11107		24.97	23.72	27.28
	11200		87.50	83.13	95.60
#	11200		66.36	63.04	72.50
	11201		17.89	17.00	19.55
#	11201		12.99	12.34	14.19
	11300		90.73	86.19	99.12
#	11300		27.60	26.22	30.15
#	11301		41.46	39.39	45.30
	11301		109.80	104.31	119.96
#	11302		48.07	45.67	52.52
	11302		124.38	118.16	135.88
#	11303		57.52	54.64	62.84
	11303		139.66	132.68	152.58
#	11305		32.82	31.18	35.86
	11305		95.65	90.87	104.50
#	11306		40.71	38.67	44.47
	11306		111.51	105.93	121.82
#	11307		51.41	48.84	56.17
	11307		125.58	119.30	137.20
#	11308		59.95	56.95	65.49
	11308		134.11	127.40	146.51
#	11310		36.19	34.38	39.54
	11310		105.15	99.89	114.87

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	11311		50.51	47.98	55.18
	11311		125.28	119.02	136.87
#	11312		60.12	57.11	65.68
	11312		142.87	135.73	156.09
#	11313		76.82	72.98	83.93
	11313		168.15	159.74	183.70
#	11400		73.55	69.87	80.35
	11400		120.75	114.71	131.92
	11401		147.01	139.66	160.61
#	11401		91.54	86.96	100.00
	11402		162.34	154.22	177.35
#	11402		99.51	94.53	108.71
	11403		190.31	180.79	207.91
#	11403		131.47	124.90	143.64
	11404		220.70	209.67	241.12
#	11404		148.07	140.67	161.77
	11406		320.82	304.78	350.50
#	11406		223.67	212.49	244.36
#	11420		73.59	69.91	80.40
	11420		118.34	112.42	129.28
	11421		151.60	144.02	165.62
#	11421		96.12	91.31	105.01
	11422		171.19	162.63	187.02
#	11422		120.32	114.30	131.45
	11423		199.37	189.40	217.81
#	11423		139.61	132.63	152.52
	11424		233.47	221.80	255.07
#	11424		161.15	153.09	176.05
	11426		328.28	311.87	358.65
#	11426		240.94	228.89	263.22
	11440		134.03	127.33	146.43

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	11440		93.57	88.89	102.22
	11441		165.09	156.84	180.37
#	11441		116.06	110.26	126.80
	11442		184.71	175.47	201.79
#	11442		127.70	121.32	139.52
	11443		219.99	208.99	240.34
#	11443		155.02	147.27	169.36
	11444		276.68	262.85	302.28
#	11444		195.78	185.99	213.89
	11446		384.22	365.01	419.76
#	11446		277.87	263.98	303.58
	11450		437.63	415.75	478.11
#	11450		248.23	235.82	271.19
	11451		546.69	519.36	597.26
#	11451		313.47	297.80	342.47
	11462		425.71	404.42	465.08
#	11462		236.00	224.20	257.83
	11463		545.82	518.53	596.31
#	11463		308.61	293.18	337.16
	11470		476.40	452.58	520.47
#	11470		274.13	260.42	299.48
	11471		557.84	529.95	609.44
#	11471		324.93	308.68	354.98
	11600		188.21	178.80	205.62
#	11600		105.77	100.48	115.55
	11601		216.04	205.24	236.03
#	11601		125.32	119.05	136.91
	11602		228.78	217.34	249.94
#	11602		133.47	126.80	145.82
	11603		263.88	250.69	288.29
#	11603		160.29	152.28	175.12

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	11604		297.25	282.39	324.75
#	11604		178.03	169.13	194.50
	11606		445.75	423.46	486.98
#	11606		272.90	259.26	298.15
	11620		188.55	179.12	205.99
#	11620		106.41	101.09	116.25
	11621		217.29	206.43	237.39
#	11621		126.27	119.96	137.95
	11622		237.99	226.09	260.00
#	11622		140.84	133.80	153.87
	11623		282.52	268.39	308.65
#	11623		174.65	165.92	190.81
	11624		325.16	308.90	355.24
#	11624		200.12	190.11	218.63
	11626		403.24	383.08	440.54
#	11626		251.85	239.26	275.15
	11640		191.93	182.33	209.68
#	11640		107.96	102.56	117.94
	11641		225.67	214.39	246.55
#	11641		131.58	125.00	143.75
	11642		254.49	241.77	278.04
#	11642		151.52	143.94	165.53
	11643		302.76	287.62	330.76
#	11643		190.29	180.78	207.90
	11644		377.04	358.19	411.92
#	11644		236.68	224.85	258.58
	11646		497.59	472.71	543.62
#	11646		330.25	313.74	360.80
#	11719		6.70	6.37	7.33
	11719		13.75	13.06	15.02
	11720		31.16	29.60	34.04

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	11720		12.77	12.13	13.95
	11721		43.28	41.12	47.29
#	11721		21.52	20.44	23.51
#	11730		48.30	45.89	52.77
	11730		105.92	100.62	115.71
	11732		31.03	29.48	33.90
#	11732		15.09	14.34	16.49
	11740		53.98	51.28	58.97
#	11740		30.08	28.58	32.87
	11750		150.17	142.66	164.06
#	11750		91.94	87.34	100.44
#	11755		54.32	51.60	59.34
	11755		114.08	108.38	124.64
	11760		177.34	168.47	193.74
#	11760		101.33	96.26	110.70
	11762		280.85	266.81	306.83
#	11762		171.44	162.87	187.30
#	11765		85.96	81.66	93.91
	11765		153.69	146.01	167.91
	11770		369.95	351.45	404.17
#	11770		178.09	169.19	194.57
	11771		663.03	629.88	724.36
#	11771		433.18	411.52	473.25
	11772		810.78	770.24	885.78
#	11772		559.48	531.51	611.24
	11900		53.95	51.25	58.94
#	11900		23.92	22.72	26.13
	11901		65.92	62.62	72.01
#	11901		36.19	34.38	39.54
	11920		205.21	194.95	224.19
#	11920		100.70	95.67	110.02

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	11921		222.25	211.14	242.81
#	11921		114.37	108.65	124.95
	11922		62.66	59.53	68.46
#	11922		24.35	23.13	26.60
	11950		84.39	80.17	92.20
#	11950		44.24	42.03	48.33
#	11951		61.91	58.81	67.63
	11951		112.48	106.86	122.89
#	11952		87.29	82.93	95.37
	11952		150.73	143.19	164.67
	11954		166.85	158.51	182.29
#	11954		96.06	91.26	104.95
	11960		917.14	871.28	1,001.97
	11970		505.83	480.54	552.62
	11971		502.45	477.33	548.93
#	11976		80.81	76.77	88.29
	11976		141.80	134.71	154.92
#	11980		48.65	46.22	53.15
	11980		92.78	88.14	101.36
#	11981		55.03	52.28	60.12
	11981		103.45	98.28	113.02
#	11982		63.42	60.25	69.29
	11982		110.61	105.08	120.84
#	11983		89.42	84.95	97.69
	11983		140.60	133.57	153.61
#	12001		44.15	41.94	48.23
	12001		108.21	102.80	118.22
#	12002		57.69	54.81	63.03
	12002		132.78	126.14	145.06
#	12004		72.68	69.05	79.41
	12004		155.12	147.36	169.46

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	12005		91.17	86.61	99.60
	12005		202.41	192.29	221.13
	12006		230.86	219.32	252.22
#	12006		110.72	105.18	120.96
	12007		247.52	235.14	270.41
#	12007		135.65	128.87	148.20
#	12011		54.66	51.93	59.72
	12011		132.81	126.17	145.10
#	12013		56.61	53.78	61.85
	12013		139.05	132.10	151.92
#	12014		73.28	69.62	80.06
	12014		165.22	156.96	180.50
	12015		202.21	192.10	220.92
#	12015		91.57	86.99	100.04
	12016		257.53	244.65	281.35
#	12016		124.21	118.00	135.70
	12017		156.30	148.49	170.76
	12018		176.33	167.51	192.64
	12020		301.25	286.19	329.12
#	12020		174.67	165.94	190.83
	12021		178.16	169.25	194.64
#	12021		131.27	124.71	143.42
	12031		245.80	233.51	268.54
#	12031		129.64	123.16	141.63
	12032		284.28	270.07	310.58
#	12032		160.47	152.45	175.32
	12034		318.38	302.46	347.83
#	12034		176.48	167.66	192.81
	12035		394.48	374.76	430.97
#	12035		220.40	209.38	240.79
	12036		458.96	436.01	501.41

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	12036		266.49	253.17	291.15
	12037		513.90	488.21	561.44
#	12037		304.27	289.06	332.42
	12041		248.99	236.54	272.02
#	12041		126.40	120.08	138.09
	12042		289.93	275.43	316.74
#	12042		164.58	156.35	179.80
	12044		368.39	349.97	402.47
#	12044		187.27	177.91	204.60
	12045		431.95	410.35	471.90
#	12045		262.17	249.06	286.42
	12046		531.55	504.97	580.72
#	12046		307.83	292.44	336.31
	12047		583.38	554.21	637.34
#	12047		340.66	323.63	372.17
	12051		268.31	254.89	293.12
#	12051		145.72	138.43	159.19
	12052		296.89	282.05	324.36
#	12052		169.09	160.64	184.74
	12053		343.15	325.99	374.89
#	12053		183.48	174.31	200.46
	12054		372.84	354.20	407.33
#	12054		194.47	184.75	212.46
	12055		519.98	493.98	568.08
#	12055		289.20	274.74	315.95
	12056		594.24	564.53	649.21
#	12056		342.01	324.91	373.65
	12057		620.15	589.14	677.51
#	12057		375.90	357.11	410.68
	13100		321.32	305.25	351.04
#	13100		168.39	159.97	183.97

**WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026**

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
- LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	13101		371.12	352.56	405.44
#	13101		205.63	195.35	224.65
#	13102		59.84	56.85	65.38
	13102		115.31	109.54	125.97
	13120		334.06	317.36	364.96
#	13120		194.00	184.30	211.95
	13121		397.98	378.08	434.79
#	13121		212.25	201.64	231.89
#	13122		67.82	64.43	74.09
	13122		123.30	117.14	134.71
	13131		366.50	348.18	400.41
#	13131		201.00	190.95	219.59
	13132		441.46	419.39	482.30
#	13132		247.77	235.38	270.69
	13133		162.36	154.24	177.38
#	13133		101.99	96.89	111.42
	13151		400.60	380.57	437.66
#	13151		229.90	218.41	251.17
	13152		469.84	446.35	513.30
#	13152		275.24	261.48	300.70
	13153		182.85	173.71	199.77
#	13153		113.59	107.91	124.10
	13160		729.26	692.80	796.72
	14000		638.37	606.45	697.42
#	14000		452.95	430.30	494.85
	14001		823.84	782.65	900.05
#	14001		589.08	559.63	643.57
	14020		686.11	651.80	749.57
#	14020		490.89	466.35	536.30
	14021		847.19	804.83	925.55
#	14021		606.30	575.99	662.39

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	14040		736.22	699.41	804.32
#	14040		533.34	506.67	582.67
	14041		889.96	845.46	972.28
#	14041		638.96	607.01	698.06
	14060		742.30	705.19	810.97
#	14060		560.25	532.24	612.08
#	14061		683.46	649.29	746.68
	14061		958.06	910.16	1,046.68
#	14301		755.68	717.90	825.59
	14301		1,078.70	1,024.77	1,178.49
	14302		219.22	208.26	239.50
#	14302		183.06	173.91	200.00
	14350		603.71	573.52	659.55
	15002		348.24	330.83	380.45
#	15002		195.93	186.13	214.05
	15003		72.23	68.62	78.91
#	15003		40.05	38.05	43.76
	15004		388.69	369.26	424.65
#	15004		227.48	216.11	248.53
#	15005		78.74	74.80	86.02
	15005		121.33	115.26	132.55
	15040		259.45	246.48	283.45
#	15040		112.96	107.31	123.41
	15050		578.47	549.55	631.98
#	15050		415.73	394.94	454.18
	15100		888.50	844.08	970.69
#	15100		647.92	615.52	707.85
	15101		192.46	182.84	210.27
#	15101		99.91	94.91	109.15
	15110		872.76	829.12	953.49
#	15110		663.13	629.97	724.47

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	15111		91.36	86.79	99.81
	15111		119.86	113.87	130.95
	15115		837.59	795.71	915.07
#	15115		643.29	611.13	702.80
	15116		162.28	154.17	177.30
#	15116		123.66	117.48	135.10
	15120		842.77	800.63	920.72
#	15120		604.94	574.69	660.89
	15121		211.62	201.04	231.20
#	15121		118.15	112.24	129.08
	15130		738.87	701.93	807.22
#	15130		536.29	509.48	585.90
#	15131		75.10	71.35	82.05
	15131		100.85	95.81	110.18
	15135		870.23	826.72	950.73
#	15135		661.53	628.45	722.72
#	15136		75.10	71.35	82.05
	15136		99.32	94.35	108.50
	15150		745.18	707.92	814.11
#	15150		610.95	580.40	667.46
	15151		124.25	118.04	135.75
#	15151		98.81	93.87	107.95
	15152		153.36	145.69	167.54
#	15152		124.24	118.03	135.73
	15155		820.59	779.56	896.49
#	15155		644.98	612.73	704.64
	15156		167.74	159.35	183.25
#	15156		136.79	129.95	149.44
	15157		187.75	178.36	205.11
#	15157		150.05	142.55	163.93
	15200		840.49	798.47	918.24

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	15200		592.25	562.64	647.04
#	15201		64.89	61.65	70.90
	15201		141.51	134.43	154.59
	15220		749.53	712.05	818.86
#	15220		524.58	498.35	573.10
#	15221		57.86	54.97	63.22
	15221		127.73	121.34	139.54
	15240		899.55	854.57	982.76
#	15240		679.81	645.82	742.69
#	15241		89.52	85.04	97.80
	15241		172.27	163.66	188.21
#	15260		710.14	674.63	775.82
	15260		961.14	913.08	1,050.04
	15261		199.14	189.18	217.56
#	15261		111.79	106.20	122.13
#	15271		74.74	71.00	81.65
	15271		150.75	143.21	164.69
	15272		24.90	23.66	27.21
#	15272		14.78	14.04	16.15
	15273		309.89	294.40	338.56
#	15273		171.98	163.38	187.89
	15274		83.19	79.03	90.88
#	15274		39.37	37.40	43.01
#	15275		83.88	79.69	91.64
	15275		153.75	146.06	167.97
	15276		32.89	31.25	35.94
#	15276		22.17	21.06	24.22
	15277		347.83	330.44	380.01
#	15277		197.66	187.78	215.95
#	15278		49.06	46.61	53.60
	15278		97.17	92.31	106.16

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	15570		660.72	627.68	721.83
	15570		943.90	896.71	1,031.22
	15572		899.09	854.14	982.26
#	15572		656.37	623.55	717.08
	15574		844.81	802.57	922.96
#	15574		628.45	597.03	686.58
	15576		763.98	725.78	834.65
#	15576		551.90	524.31	602.96
	15600		351.04	333.49	383.51
#	15600		203.63	193.45	222.47
	15610		369.41	350.94	403.58
#	15610		226.29	214.98	247.23
	15620		440.28	418.27	481.01
#	15620		294.40	279.68	321.63
	15630		446.74	424.40	488.06
#	15630		301.17	286.11	329.03
	15650		560.81	532.77	612.69
#	15650		371.10	352.55	405.43
#	15730		766.99	728.64	837.94
	15730		1,371.05	1,302.50	1,497.88
#	15731		861.56	818.48	941.25
	15731		1,110.11	1,054.60	1,212.79
	15733		896.65	851.82	979.59
	15734		1,374.08	1,305.38	1,501.19
	15736		1,092.14	1,037.53	1,193.16
	15738		1,134.10	1,077.40	1,239.01
#	15740		736.21	699.40	804.31
	15740		1,009.89	959.40	1,103.31
	15750		824.78	783.54	901.07
	15756		1,948.11	1,850.70	2,128.31
	15757		1,932.37	1,835.75	2,111.11

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	15758		1,927.83	1,831.44	2,106.16
	15760		824.42	783.20	900.68
#	15760		598.55	568.62	653.91
	15769		445.76	423.47	486.99
	15770		591.99	562.39	646.75
	15771		636.11	604.30	694.95
#	15771		462.65	439.52	505.45
	15772		199.17	189.21	217.59
#	15772		126.23	119.92	137.91
	15773		602.20	572.09	657.90
#	15773		444.37	422.15	485.47
	15774		194.17	184.46	212.13
#	15774		121.54	115.46	132.78
	15775		385.38	366.11	421.03
#	15775		221.11	210.05	241.56
	15776		522.68	496.55	571.03
#	15776		301.72	286.63	329.62
	15777		220.90	209.86	241.34
#	15777		182.59	173.46	199.48
	15778		356.64	338.81	389.63
	15780		790.69	751.16	863.83
#	15780		548.57	521.14	599.31
	15781		495.97	471.17	541.85
#	15781		356.52	338.69	389.49
	15782		452.18	429.57	494.01
#	15782		309.67	294.19	338.32
	15783		420.83	399.79	459.76
#	15783		297.32	282.45	324.82
	15786		220.38	209.36	240.76
#	15786		116.48	110.66	127.26
	15787		29.89	28.40	32.66

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	15787		14.26	13.55	15.58
	15788		357.85	339.96	390.95
#	15788		187.14	177.78	204.45
	15789		499.08	474.13	545.25
#	15789		345.84	328.55	377.83
	15792		309.30	293.84	337.92
#	15792		183.03	173.88	199.96
	15793		446.35	424.03	487.63
#	15793		306.30	290.99	334.64
	15820		561.02	532.97	612.92
#	15820		434.75	413.01	474.96
	15821		606.18	575.87	662.25
#	15821		467.96	444.56	511.24
	15822		449.43	426.96	491.00
#	15822		343.09	325.94	374.83
	15823		604.36	574.14	660.26
#	15823		465.53	442.25	508.59
	15830		1,052.18	999.57	1,149.51
	15832		826.62	785.29	903.08
	15833		781.62	742.54	853.92
	15834		795.27	755.51	868.84
	15835		829.11	787.65	905.80
	15836		712.84	677.20	778.78
	15837		899.69	854.71	982.92
#	15837		643.79	611.60	703.34
	15838		584.63	555.40	638.71
#	15839		669.71	636.22	731.65
	15839		923.78	877.59	1,009.23
	15840		872.53	828.90	953.24
	15841		1,558.68	1,480.75	1,702.86
	15842		2,339.53	2,222.55	2,555.93

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	15845		947.39	900.02	1,035.02
	15851		57.70	54.82	63.04
	15852		38.87	36.93	42.47
	15853		12.33	11.71	13.47
	15854		16.32	15.50	17.83
	15860		93.74	89.05	102.41
	15920		615.73	584.94	672.68
	15922		714.05	678.35	780.10
	15931		664.00	630.80	725.42
	15933		807.89	767.50	882.63
	15934		872.15	828.54	952.82
	15935		1,024.63	973.40	1,119.41
	15936		828.01	786.61	904.60
	15937		906.54	861.21	990.39
	15940		655.09	622.34	715.69
	15941		846.33	804.01	924.61
	15944		832.63	791.00	909.65
	15945		907.67	862.29	991.63
	15946		1,444.27	1,372.06	1,577.87
	15950		573.38	544.71	626.42
	15951		803.88	763.69	878.24
	15952		815.48	774.71	890.92
	15953		899.03	854.08	982.19
	15956		1,077.35	1,023.48	1,177.00
	15958		1,065.54	1,012.26	1,164.10
	16000		86.38	82.06	94.37
#	16000		42.24	40.13	46.15
	16020		88.08	83.68	96.23
#	16020		52.84	50.20	57.73
	16025		158.93	150.98	173.63
#	16025		100.40	95.38	109.69

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	16030		205.19	194.93	224.17
#	16030		121.83	115.74	133.10
	16035		179.33	170.36	195.91
	16036		74.30	70.59	81.18
	17000		63.15	59.99	68.99
#	17000		45.98	43.68	50.23
	17003		5.94	5.64	6.49
#	17003		1.65	1.57	1.81
#	17004		80.86	76.82	88.34
	17004		153.80	146.11	168.03
	17106		327.39	311.02	357.67
#	17106		233.30	221.64	254.89
	17107		423.57	402.39	462.75
#	17107		300.68	285.65	328.50
	17108		608.07	577.67	664.32
#	17108		444.10	421.90	485.19
#	17110		59.80	56.81	65.33
	17110		104.55	99.32	114.22
#	17111		71.08	67.53	77.66
	17111		122.57	116.44	133.91
	17250		84.69	80.46	92.53
#	17250		34.42	32.70	37.61
#	17260		57.57	54.69	62.89
	17260		92.20	87.59	100.73
#	17261		72.69	69.06	79.42
	17261		136.74	129.90	149.39
#	17262		91.31	86.74	99.75
	17262		165.17	156.91	180.45
	17263		179.38	170.41	195.97
#	17263		100.62	95.59	109.93
	17264		192.46	182.84	210.27

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	17264		107.26	101.90	117.19
	17266		219.94	208.94	240.28
#	17266		125.54	119.26	137.15
#	17270		79.33	75.36	86.66
	17270		139.70	132.72	152.63
#	17271		87.30	82.94	95.38
	17271		154.41	146.69	168.69
	17272		174.73	165.99	190.89
#	17272		99.64	94.66	108.86
	17273		194.69	184.96	212.70
#	17273		112.56	106.93	122.97
	17274		228.75	217.31	249.91
#	17274		136.81	129.97	149.47
	17276		267.93	254.53	292.71
#	17276		165.57	157.29	180.88
#	17280		72.69	69.06	79.42
	17280		131.22	124.66	143.36
	17281		167.18	158.82	182.64
#	17281		97.61	92.73	106.64
	17282		191.29	181.73	208.99
#	17282		111.91	106.31	122.26
	17283		227.37	216.00	248.40
#	17283		138.79	131.85	151.63
	17284		260.97	247.92	285.11
#	17284		163.21	155.05	178.31
	17286		339.12	322.16	370.48
#	17286		222.05	210.95	242.59
	17311		633.97	602.27	692.61
#	17311		285.20	270.94	311.58
	17312		381.40	362.33	416.68
#	17312		152.16	144.55	166.23

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	17313		594.30	564.59	649.28
#	17313		255.96	243.16	279.63
	17314		364.47	346.25	398.19
#	17314		138.91	131.96	151.75
	17315		75.62	71.84	82.62
#	17315		39.77	37.78	43.45
	17340		51.12	48.56	55.84
#	17340		41.31	39.24	45.13
#	17360		76.26	72.45	83.32
	17360		116.10	110.30	126.85
	19000		91.46	86.89	99.92
#	19000		36.60	34.77	39.99
	19001		25.77	24.48	28.15
#	19001		18.11	17.20	19.78
	19020		489.53	465.05	534.81
#	19020		307.79	292.40	336.26
#	19030		64.28	61.07	70.23
	19030		151.63	144.05	165.66
	19081		450.78	428.24	492.48
#	19081		138.79	131.85	151.63
#	19082		69.68	66.20	76.13
	19082		339.38	322.41	370.77
	19083		447.70	425.32	489.12
#	19083		131.11	124.55	143.23
#	19084		65.33	62.06	71.37
	19084		333.49	316.82	364.34
	19085		672.43	638.81	734.63
#	19085		151.74	144.15	165.77
#	19086		75.66	71.88	82.66
	19086		513.92	488.22	561.45
#	19100		62.49	59.37	68.28

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	19100		155.66	147.88	170.06
	19101		336.42	319.60	367.54
#	19101		213.52	202.84	233.27
#	19105		195.37	185.60	213.44
	19105		2,344.35	2,227.13	2,561.20
	19110		511.19	485.63	558.47
#	19110		347.23	329.87	379.35
	19112		482.16	458.05	526.76
#	19112		321.87	305.78	351.65
	19120		553.27	525.61	604.45
#	19120		401.57	381.49	438.71
	19125		613.82	583.13	670.60
#	19125		446.49	424.17	487.80
	19126		145.73	138.44	159.21
#	19281		83.38	79.21	91.09
	19281		222.52	211.39	243.10
#	19282		41.44	39.37	45.28
	19282		154.53	146.80	168.82
#	19283		84.45	80.23	92.26
	19283		236.76	224.92	258.66
#	19284		42.58	40.45	46.52
	19284		170.38	161.86	186.14
#	19285		72.04	68.44	78.71
	19285		327.64	311.26	357.95
#	19286		36.18	34.37	39.53
	19286		266.03	252.73	290.64
	19287		558.75	530.81	610.43
#	19287		106.09	100.79	115.91
#	19288		53.56	50.88	58.51
	19288		423.77	402.58	462.97
	19294		149.83	142.34	163.69

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	19296		3,681.03	3,496.98	4,021.53
#	19296		194.62	184.89	212.62
	19297		84.19	79.98	91.98
	19298		800.77	760.73	874.84
#	19298		261.38	248.31	285.56
	19300		608.65	578.22	664.95
#	19300		414.65	393.92	453.01
	19301		627.73	596.34	685.79
	19302		861.19	818.13	940.85
	19303		910.26	864.75	994.46
	19305		1,087.68	1,033.30	1,188.30
	19306		1,165.93	1,107.63	1,273.77
	19307		1,117.80	1,061.91	1,221.20
	19316		716.04	680.24	782.28
	19318		966.60	918.27	1,056.01
	19325		553.33	525.66	604.51
	19328		502.37	477.25	548.84
	19330		581.57	552.49	635.36
	19340		687.70	653.32	751.32
	19342		680.85	646.81	743.83
	19350		858.16	815.25	937.54
#	19350		603.17	573.01	658.96
	19355		782.23	743.12	854.59
#	19355		551.15	523.59	602.13
	19357		1,046.37	994.05	1,143.16
	19361		1,365.81	1,297.52	1,492.15
	19364		2,352.86	2,235.22	2,570.50
	19367		1,542.08	1,464.98	1,684.73
	19368		1,872.06	1,778.46	2,045.23
	19369		1,741.46	1,654.39	1,902.55
	19370		603.42	573.25	659.24

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	19371		637.54	605.66	696.51
	19380		721.82	685.73	788.59
	19396		276.57	262.74	302.15
#	19396		124.87	118.63	136.42
	20100		546.42	519.10	596.97
	20101		589.92	560.42	644.48
#	20101		200.40	190.38	218.94
	20102		625.94	594.64	683.84
#	20102		243.46	231.29	265.98
	20103		566.06	537.76	618.42
#	20103		313.22	297.56	342.19
	20150		909.05	863.60	993.14
#	20200		89.58	85.10	97.87
	20200		228.71	217.27	249.86
	20205		322.16	306.05	351.96
#	20205		146.25	138.94	159.78
#	20206		50.52	47.99	55.19
	20206		196.09	186.29	214.23
#	20220		76.12	72.31	83.16
	20220		210.66	200.13	230.15
	20225		343.53	326.35	375.30
#	20225		112.76	107.12	123.19
	20240		125.75	119.46	137.38
	20245		302.97	287.82	330.99
	20250		380.87	361.83	416.10
	20251		414.79	394.05	453.16
#	20500		81.36	77.29	88.88
	20500		122.73	116.59	134.08
#	20501		31.17	29.61	34.05
	20501		127.10	120.75	138.86
	20520		218.21	207.30	238.40

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	20520		137.61	130.73	150.34
	20525		470.89	447.35	514.45
#	20525		228.78	217.34	249.94
	20526		84.83	80.59	92.68
#	20526		49.28	46.82	53.84
	20527		90.66	86.13	99.05
#	20527		57.87	54.98	63.23
	20550		58.26	55.35	63.65
#	20550		33.43	31.76	36.52
	20551		58.18	55.27	63.56
#	20551		33.05	31.40	36.11
	20552		49.88	47.39	54.50
#	20552		35.17	33.41	38.42
	20553		57.57	54.69	62.89
#	20553		40.10	38.10	43.82
	20555		276.94	263.09	302.55
	20560		23.66	22.48	25.85
#	20560		12.32	11.70	13.46
	20561		36.53	34.70	39.91
#	20561		19.67	18.69	21.49
	20600		53.94	51.24	58.93
#	20600		31.26	29.70	34.16
	20604		83.33	79.16	91.03
#	20604		39.81	37.82	43.49
	20605		54.91	52.16	59.98
#	20605		31.93	30.33	34.88
	20606		90.16	85.65	98.50
#	20606		44.80	42.56	48.94
	20610		66.32	63.00	72.45
#	20610		39.66	37.68	43.33
#	20611		50.11	47.60	54.74

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	20611		99.76	94.77	108.99
	20612		64.85	61.61	70.85
#	20612		36.35	34.53	39.71
	20615		237.38	225.51	259.34
#	20615		140.84	133.80	153.87
	20650		238.17	226.26	260.20
#	20650		156.04	148.24	170.48
	20660		217.59	206.71	237.72
	20661		535.57	508.79	585.11
	20662		487.44	463.07	532.53
	20663		451.74	429.15	493.52
	20664		922.84	876.70	1,008.21
#	20665		83.44	79.27	91.16
	20665		112.87	107.23	123.31
	20670		346.94	329.59	379.03
#	20670		135.48	128.71	148.02
	20680		604.50	574.28	660.42
#	20680		386.60	367.27	422.36
	20690		538.32	511.40	588.11
	20692		1,028.35	976.93	1,123.47
	20693		419.30	398.34	458.09
	20694		441.76	419.67	482.62
#	20694		319.17	303.21	348.69
	20696		1,046.09	993.79	1,142.86
	20697		1,753.23	1,665.57	1,915.41
	20700		83.99	79.79	91.76
#	20700		71.12	67.56	77.69
	20701		65.11	61.85	71.13
#	20701		55.00	52.25	60.09
	20702		146.45	139.13	160.00
#	20702		123.46	117.29	134.88

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	20703		90.64	86.11	99.03
	20703		107.50	102.13	117.45
	20704		153.93	146.23	168.16
#	20704		129.11	122.65	141.05
	20705		126.94	120.59	138.68
#	20705		106.71	101.37	116.58
	20802		2,435.69	2,313.91	2,661.00
	20805		2,884.41	2,740.19	3,151.22
	20808		3,467.42	3,294.05	3,788.16
	20816		1,823.41	1,732.24	1,992.08
	20822		1,586.52	1,507.19	1,733.27
	20824		1,828.31	1,736.89	1,997.42
	20827		1,627.78	1,546.39	1,778.35
	20838		2,475.27	2,351.51	2,704.24
	20900		377.35	358.48	412.25
#	20900		159.45	151.48	174.20
	20902		240.96	228.91	263.25
	20910		449.77	427.28	491.37
	20912		425.21	403.95	464.54
	20920		349.64	332.16	381.98
	20922		633.83	602.14	692.46
#	20922		462.51	439.38	505.29
	20924		459.13	436.17	501.60
	20931		99.52	94.54	108.72
	20932		651.77	619.18	712.06
	20933		598.41	568.49	653.76
	20934		651.77	619.18	712.06
	20937		148.83	141.39	162.60
	20938		165.41	157.14	180.71
	20939		62.16	59.05	67.91
#	20950		81.81	77.72	89.38

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	20950		260.48	247.46	284.58
	20955		2,248.49	2,136.07	2,456.48
	20956		2,340.70	2,223.67	2,557.22
	20957		2,439.34	2,317.37	2,664.98
	20962		2,398.78	2,278.84	2,620.67
	20969		2,309.69	2,194.21	2,523.34
	20970		2,525.56	2,399.28	2,759.17
	20972		2,516.94	2,391.09	2,749.75
	20973		2,656.33	2,523.51	2,902.04
	20974		90.26	85.75	98.61
#	20974		49.50	47.03	54.08
	20975		167.62	159.24	183.13
	20979		52.52	49.89	57.37
#	20979		26.47	25.15	28.92
#	20982		322.94	306.79	352.81
	20982		3,223.08	3,061.93	3,521.22
	20983		4,527.06	4,300.71	4,945.82
#	20983		303.28	288.12	331.34
	20985		124.45	118.23	135.96
	21010		659.97	626.97	721.02
	21011		374.93	356.18	409.61
#	21011		241.92	229.82	264.29
	21012		316.55	300.72	345.83
	21013		541.38	514.31	591.46
#	21013		363.63	345.45	397.27
	21014		470.57	447.04	514.10
	21015		627.30	595.94	685.33
	21016		890.56	846.03	972.93
	21025		808.83	768.39	883.65
#	21025		601.05	571.00	656.65
	21026		550.34	522.82	601.24

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	21026		401.09	381.04	438.20
	21029		780.24	741.23	852.41
#	21029		557.74	529.85	609.33
	21030		454.99	432.24	497.08
#	21030		327.19	310.83	357.45
	21031		369.87	351.38	404.09
#	21031		244.83	232.59	267.48
	21032		364.77	346.53	398.51
#	21032		236.67	224.84	258.57
	21034		1,265.62	1,202.34	1,382.69
#	21034		974.17	925.46	1,064.28
	21040		458.67	435.74	501.10
#	21040		328.11	311.70	358.46
	21044		751.68	714.10	821.22
	21045		1,045.61	993.33	1,142.33
	21046		878.54	834.61	959.80
	21047		1,063.83	1,010.64	1,162.24
	21048		886.71	842.37	968.73
	21049		1,009.74	959.25	1,103.14
	21050		775.85	737.06	847.62
	21060		701.12	666.06	765.97
	21070		529.01	502.56	577.94
	21073		407.72	387.33	445.43
#	21073		218.32	207.40	238.51
	21076		894.30	849.59	977.03
#	21076		626.75	595.41	684.72
	21077		2,136.06	2,029.26	2,333.65
#	21077		1,525.57	1,449.29	1,666.68
	21079		1,478.29	1,404.38	1,615.04
#	21079		1,032.68	981.05	1,128.21
	21080		1,679.66	1,595.68	1,835.03

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	21080		1,159.58	1,101.60	1,266.84
	21081		1,545.45	1,468.18	1,688.41
#	21081		1,062.45	1,009.33	1,160.73
	21082		1,451.57	1,378.99	1,585.84
#	21082		988.19	938.78	1,079.60
#	21083		910.73	865.19	994.97
	21083		1,365.54	1,297.26	1,491.85
	21084		1,559.95	1,481.95	1,704.24
#	21084		1,051.82	999.23	1,149.11
	21085		684.93	650.68	748.28
#	21085		427.80	406.41	467.37
	21086		1,583.99	1,504.79	1,730.51
#	21086		1,124.59	1,068.36	1,228.61
	21087		1,583.99	1,504.79	1,730.51
#	21087		1,124.59	1,068.36	1,228.61
	21100		596.08	566.28	651.22
#	21100		322.10	306.00	351.90
	21110		823.01	781.86	899.14
#	21110		641.27	609.21	700.59
#	21116		38.73	36.79	42.31
	21116		207.29	196.93	226.47
	21120		677.65	643.77	740.34
#	21120		469.55	446.07	512.98
	21121		624.93	593.68	682.73
#	21121		475.37	451.60	519.34
	21122		678.54	644.61	741.30
	21123		757.74	719.85	827.83
#	21125		595.16	565.40	650.21
	21125		2,421.11	2,300.05	2,645.06
#	21127		683.88	649.69	747.14
	21127		3,686.38	3,502.06	4,027.37

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	21137		671.13	637.57	733.21
	21138		812.13	771.52	887.25
	21139		965.65	917.37	1,054.98
	21141		1,184.55	1,125.32	1,294.12
	21142		1,214.63	1,153.90	1,326.99
	21143		1,250.11	1,187.60	1,365.74
	21145		1,368.81	1,300.37	1,495.43
	21146		1,429.42	1,357.95	1,561.64
	21147		1,502.22	1,427.11	1,641.18
	21150		1,399.19	1,329.23	1,528.61
	21151		1,538.27	1,461.36	1,680.56
	21154		1,657.17	1,574.31	1,810.46
	21155		1,835.38	1,743.61	2,005.15
	21159		2,195.34	2,085.57	2,398.41
	21160		2,378.58	2,259.65	2,598.60
	21172		2,081.61	1,977.53	2,274.16
	21175		1,912.27	1,816.66	2,089.16
	21179		1,326.53	1,260.20	1,449.23
	21180		1,478.78	1,404.84	1,615.57
	21181		659.98	626.98	721.03
	21182		1,832.18	1,740.57	2,001.66
	21183		1,989.78	1,890.29	2,173.83
	21184		2,137.52	2,030.64	2,335.24
	21188		1,400.71	1,330.67	1,530.27
	21193		1,090.43	1,035.91	1,191.30
	21194		1,258.47	1,195.55	1,374.88
	21195		1,191.29	1,131.73	1,301.49
	21196		1,270.42	1,206.90	1,387.94
	21198		893.22	848.56	975.84
	21199		896.27	851.46	979.18
	21206		858.57	815.64	937.99

**WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026**

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
- LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	21208		657.40	624.53	718.21
	21208		1,562.41	1,484.29	1,706.93
	21209		764.83	726.59	835.58
#	21209		536.82	509.98	586.48
#	21210		678.94	644.99	741.74
	21210		1,688.76	1,604.32	1,844.97
#	21215		706.09	670.79	771.41
	21215		3,825.36	3,634.09	4,179.20
	21230		649.77	617.28	709.87
	21235		705.13	669.87	770.35
#	21235		493.05	468.40	538.66
	21240		926.77	880.43	1,012.49
	21242		903.58	858.40	987.16
	21243		1,429.85	1,358.36	1,562.11
	21244		876.34	832.52	957.40
#	21245		846.06	803.76	924.32
	21245		1,230.99	1,169.44	1,344.86
	21246		754.64	716.91	824.45
	21247		1,396.60	1,326.77	1,525.79
#	21248		712.88	677.24	778.83
	21248		986.25	936.94	1,077.48
	21249		1,358.90	1,290.96	1,484.60
#	21249		997.27	947.41	1,089.52
	21255		1,191.95	1,132.35	1,302.20
	21256		1,096.42	1,041.60	1,197.84
	21260		1,223.03	1,161.88	1,336.16
	21261		2,138.10	2,031.20	2,335.88
	21263		1,983.11	1,883.95	2,166.54
	21267		1,431.81	1,360.22	1,564.25
	21268		1,783.71	1,694.52	1,948.70
#	21270		663.86	630.67	725.27

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	21270		1,057.37	1,004.50	1,155.18
	21275		750.15	712.64	819.54
	21280		506.60	481.27	553.46
	21282		354.80	337.06	387.62
	21295		177.07	168.22	193.45
	21296		357.73	339.84	390.82
#	21315		53.25	50.59	58.18
	21315		150.70	143.17	164.65
#	21320		81.28	77.22	88.80
	21320		208.77	198.33	228.08
	21325		395.60	375.82	432.19
	21330		472.42	448.80	516.12
	21335		630.79	599.25	689.14
	21336		561.48	533.41	613.42
	21337		404.66	384.43	442.09
#	21337		271.95	258.35	297.10
	21338		601.99	571.89	657.67
	21339		675.35	641.58	737.82
	21340		650.11	617.60	710.24
	21343		949.92	902.42	1,037.78
	21344		1,198.78	1,138.84	1,309.67
	21345		768.53	730.10	839.62
#	21345		556.45	528.63	607.92
	21346		882.92	838.77	964.59
	21347		914.24	868.53	998.81
	21348		937.70	890.82	1,024.44
	21355		426.00	404.70	465.41
#	21355		287.17	272.81	313.73
	21356		564.43	536.21	616.64
#	21356		368.59	350.16	402.68
	21360		457.99	435.09	500.35

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	21365		949.78	902.29	1,037.63
	21366		1,122.10	1,066.00	1,225.90
	21385		658.56	625.63	719.47
	21386		618.71	587.77	675.94
	21387		686.27	651.96	749.75
	21390		692.66	658.03	756.73
	21395		883.94	839.74	965.70
	21400		224.90	213.66	245.71
#	21400		165.13	156.87	180.40
	21401		521.87	495.78	570.15
#	21401		304.88	289.64	333.09
	21406		528.47	502.05	577.36
	21407		564.33	536.11	616.53
	21408		800.39	760.37	874.43
	21421		627.52	596.14	685.56
#	21421		493.28	468.62	538.91
	21422		575.38	546.61	628.60
	21423		707.39	672.02	772.82
	21431		622.50	591.38	680.09
	21432		653.26	620.60	713.69
	21433		1,509.94	1,434.44	1,649.61
	21435		1,241.76	1,179.67	1,356.62
	21436		1,781.94	1,692.84	1,946.77
	21440		742.05	704.95	810.69
#	21440		565.22	536.96	617.50
	21445		713.91	678.21	779.94
#	21445		542.90	515.76	593.12
	21450		562.13	534.02	614.12
#	21450		435.56	413.78	475.85
	21451		736.20	699.39	804.30
#	21451		578.67	549.74	632.20

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	21452		711.80	676.21	777.64
#	21452		430.77	409.23	470.61
#	21453		844.28	802.07	922.38
	21453		1,054.21	1,001.50	1,151.73
	21454		440.34	418.32	481.07
	21461		1,679.62	1,595.64	1,834.99
#	21461		926.31	879.99	1,011.99
	21462		1,910.03	1,814.53	2,086.71
#	21462		1,058.35	1,005.43	1,156.24
	21465		712.06	676.46	777.93
	21470		1,022.24	971.13	1,116.80
#	21480		30.55	29.02	33.37
	21480		160.50	152.48	175.35
#	21485		726.08	689.78	793.25
	21485		937.54	890.66	1,024.26
	21490		701.95	666.85	766.88
	21497		674.82	641.08	737.24
#	21497		532.31	505.69	581.54
	21501		492.38	467.76	537.92
#	21501		318.00	302.10	347.42
	21502		504.42	479.20	551.08
	21510		453.39	430.72	495.33
	21550		257.66	244.78	281.50
#	21550		139.97	132.97	152.92
	21552		423.18	402.02	462.32
	21554		673.60	639.92	735.91
	21555		441.68	419.60	482.54
#	21555		290.28	275.77	317.14
	21556		483.37	459.20	528.08
	21557		874.31	830.59	955.18
	21558		1,214.84	1,154.10	1,327.22

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	21600		553.86	526.17	605.10
	21601		1,102.77	1,047.63	1,204.77
	21602		1,504.72	1,429.48	1,643.90
	21603		1,650.67	1,568.14	1,803.36
	21610		1,209.57	1,149.09	1,321.45
	21615		582.66	553.53	636.56
	21616		670.14	636.63	732.12
	21620		492.30	467.69	537.84
	21627		542.78	515.64	592.99
	21630		1,153.95	1,096.25	1,260.69
	21685		850.86	808.32	929.57
	21700		334.28	317.57	365.21
	21705		499.80	474.81	546.03
	21720		560.92	532.87	612.80
	21725		504.09	478.89	550.72
	21740		989.35	939.88	1,080.86
	21750		658.47	625.55	719.38
	21811		549.43	521.96	600.25
	21812		660.59	627.56	721.69
	21813		901.47	856.40	984.86
	21820		170.87	162.33	186.68
#	21820		161.06	153.01	175.96
	21825		552.99	525.34	604.14
	21920		250.30	237.79	273.46
#	21920		138.75	131.81	151.58
	21925		518.96	493.01	566.96
#	21925		362.66	344.53	396.21
	21930		518.01	492.11	565.93
#	21930		344.24	327.03	376.08
	21931		447.82	425.43	489.24
	21932		619.81	588.82	677.14

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	21933		693.19	658.53	757.31
	21935		948.06	900.66	1,035.76
	21936		1,302.28	1,237.17	1,422.75
	22010		937.75	890.86	1,024.49
	22015		908.09	862.69	992.09
	22100		976.40	927.58	1,066.72
	22101		852.62	809.99	931.49
	22102		688.43	654.01	752.11
	22103		116.63	110.80	127.42
	22110		1,006.81	956.47	1,099.94
	22112		1,156.39	1,098.57	1,263.36
	22114		1,156.39	1,098.57	1,263.36
	22116		127.65	121.27	139.46
	22206		2,289.96	2,175.46	2,501.78
	22207		2,215.59	2,104.81	2,420.53
	22208		535.24	508.48	584.75
	22210		1,703.28	1,618.12	1,860.84
	22212		1,441.66	1,369.58	1,575.02
	22214		1,429.76	1,358.27	1,562.01
	22216		324.22	308.01	354.21
	22220		1,546.82	1,469.48	1,689.90
	22222		1,762.59	1,674.46	1,925.63
	22224		1,465.64	1,392.36	1,601.21
	22226		323.23	307.07	353.13
	22310		328.75	312.31	359.16
#	22310		283.09	268.94	309.28
#	22315		740.76	703.72	809.28
	22315		969.38	920.91	1,059.05
	22318		1,620.40	1,539.38	1,770.29
	22319		1,808.60	1,718.17	1,975.90
	22325		1,431.05	1,359.50	1,563.43

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	22326		1,465.37	1,392.10	1,600.92
	22327		1,490.84	1,416.30	1,628.75
	22328		256.12	243.31	279.81
	22505		151.95	144.35	166.00
#	22510		382.42	363.30	417.80
	22510		1,648.76	1,566.32	1,801.27
#	22511		360.24	342.23	393.56
	22511		1,656.31	1,573.49	1,809.51
	22512		695.44	660.67	759.77
#	22512		183.02	173.87	199.95
	22513		5,358.80	5,090.86	5,854.49
#	22513		452.19	429.58	494.02
	22514		5,360.27	5,092.26	5,856.10
#	22514		422.41	401.29	461.48
	22515		2,749.31	2,611.84	3,003.62
#	22515		190.58	181.05	208.21
	22532		1,726.80	1,640.46	1,886.53
	22533		1,539.06	1,462.11	1,681.43
	22534		327.87	311.48	358.20
	22548		1,941.24	1,844.18	2,120.81
	22551		1,603.54	1,523.36	1,751.86
	22552		357.68	339.80	390.77
	22554		1,208.36	1,147.94	1,320.13
	22556		1,593.30	1,513.64	1,740.69
	22558		1,420.54	1,349.51	1,551.94
	22585		291.26	276.70	318.21
	22586		2,006.62	1,906.29	2,192.23
	22590		1,550.95	1,473.40	1,694.41
	22595		1,489.81	1,415.32	1,627.62
	22600		1,270.73	1,207.19	1,388.27
	22610		1,243.14	1,180.98	1,358.13

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	22612		1,461.63	1,388.55	1,596.83
	22614		353.96	336.26	386.70
	22630		1,506.21	1,430.90	1,645.54
	22632		291.72	277.13	318.70
	22633		1,697.59	1,612.71	1,854.62
	22634		438.25	416.34	478.79
	22800		1,302.02	1,236.92	1,422.46
	22802		1,931.86	1,835.27	2,110.56
	22804		2,221.14	2,110.08	2,426.59
	22808		1,749.78	1,662.29	1,911.63
	22810		1,785.07	1,695.82	1,950.19
	22812		1,957.62	1,859.74	2,138.70
	22818		1,903.76	1,808.57	2,079.86
	22819		2,191.71	2,082.12	2,394.44
	22830		782.50	743.38	854.89
	22836		1,799.41	1,709.44	1,965.86
	22837		1,652.83	1,570.19	1,805.72
	22838		1,674.92	1,591.17	1,829.85
	22840		676.17	642.36	738.71
	22842		688.82	654.38	752.54
	22843		737.92	701.02	806.17
	22844		885.02	840.77	966.89
	22845		656.16	623.35	716.85
	22846		682.23	648.12	745.34
	22847		690.70	656.17	754.60
	22848		321.13	305.07	350.83
	22849		1,222.16	1,161.05	1,335.21
	22850		707.46	672.09	772.90
	22852		682.36	648.24	745.48
	22853		231.67	220.09	253.10
	22854		304.82	289.58	333.02

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	22855		1,044.84	992.60	1,141.49
	22856		1,518.73	1,442.79	1,659.21
	22857		1,557.56	1,479.68	1,701.63
	22858		454.54	431.81	496.58
	22859		304.37	289.15	332.52
	22860		347.75	330.36	379.91
	22861		2,258.02	2,145.12	2,466.89
	22862		2,271.36	2,157.79	2,481.46
	22864		2,026.06	1,924.76	2,213.47
	22865		2,219.92	2,108.92	2,425.26
	22867		1,002.73	952.59	1,095.48
	22868		217.30	206.44	237.41
	22869		387.35	367.98	423.18
	22870		100.74	95.70	110.06
	22900		540.35	513.33	590.33
	22901		635.44	603.67	694.22
	22902		495.07	470.32	540.87
#	22902		324.36	308.14	354.36
	22903		423.01	401.86	462.14
	22904		979.01	930.06	1,069.57
	22905		1,231.94	1,170.34	1,345.89
	23000		542.21	515.10	592.37
#	23000		326.15	309.84	356.32
	23020		637.52	605.64	696.49
	23030		449.83	427.34	491.44
#	23030		238.67	226.74	260.75
	23031		438.68	416.75	479.26
#	23031		210.06	199.56	229.49
	23035		621.72	590.63	679.22
	23040		659.52	626.54	720.52
	23044		531.82	505.23	581.01

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	23065		221.46	210.39	241.95
#	23065		143.62	136.44	156.91
	23066		592.93	563.28	647.77
#	23066		355.11	337.35	387.95
	23071		400.34	380.32	437.37
	23073		649.67	617.19	709.77
	23075		527.69	501.31	576.51
#	23075		313.47	297.80	342.47
	23076		513.14	487.48	560.60
	23077		1,043.56	991.38	1,140.09
	23078		1,317.00	1,251.15	1,438.82
	23100		477.84	453.95	522.04
	23101		431.99	410.39	471.95
	23105		591.95	562.35	646.70
	23106		474.50	450.78	518.40
	23107		612.95	582.30	669.65
	23120		550.03	522.53	600.91
	23125		655.81	623.02	716.47
	23130		575.81	547.02	629.07
	23140		518.52	492.59	566.48
	23145		643.75	611.56	703.29
	23146		582.24	553.13	636.10
	23150		619.25	588.29	676.53
	23155		734.04	697.34	801.94
	23156		629.36	597.89	687.57
	23170		527.44	501.07	576.23
	23172		532.47	505.85	581.73
	23174		708.82	673.38	774.39
	23180		640.09	608.09	699.30
	23182		625.53	594.25	683.39
	23184		681.97	647.87	745.05

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	23190		535.65	508.87	585.20
	23195		696.34	661.52	760.75
	23200		1,351.81	1,284.22	1,476.85
	23210		1,576.56	1,497.73	1,722.39
	23220		1,725.66	1,639.38	1,885.29
	23330		309.56	294.08	338.19
#	23330		160.93	152.88	175.81
	23333		447.85	425.46	489.28
	23334		961.82	913.73	1,050.79
	23335		1,134.95	1,078.20	1,239.93
#	23350		42.13	40.02	46.02
	23350		147.56	140.18	161.21
	23395		1,160.39	1,102.37	1,267.73
	23397		1,029.75	978.26	1,125.00
	23400		885.15	840.89	967.02
	23405		562.77	534.63	614.82
	23406		660.53	627.50	721.63
	23410		750.94	713.39	820.40
	23412		777.77	738.88	849.71
	23415		643.75	611.56	703.29
	23420		890.40	845.88	972.76
	23430		682.39	648.27	745.51
	23440		689.61	655.13	753.40
	23450		859.57	816.59	939.08
	23455		869.41	825.94	949.83
	23460		987.00	937.65	1,078.30
	23462		965.14	916.88	1,054.41
	23465		1,011.17	960.61	1,104.70
	23466		1,017.22	966.36	1,111.31
	23470		1,074.92	1,021.17	1,174.35
	23472		1,287.73	1,223.34	1,406.84

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	23473		1,428.16	1,356.75	1,560.26
	23474		1,540.66	1,463.63	1,683.17
	23480		751.16	713.60	820.64
	23485		859.20	816.24	938.68
	23490		787.59	748.21	860.44
	23491		923.57	877.39	1,009.00
	23500		246.44	234.12	269.24
#	23500		234.49	222.77	256.19
	23505		391.89	372.30	428.15
#	23505		333.66	316.98	364.53
	23515		664.72	631.48	726.20
	23520		258.16	245.25	282.04
#	23520		236.10	224.30	257.95
	23525		425.98	404.68	465.38
#	23525		353.35	335.68	386.03
	23530		536.29	509.48	585.90
	23532		583.66	554.48	637.65
	23540		264.03	250.83	288.45
#	23540		245.95	233.65	268.70
	23545		476.40	452.58	520.47
#	23545		406.83	386.49	444.46
	23550		528.37	501.95	577.24
	23552		599.13	569.17	654.55
	23570		254.08	241.38	277.59
#	23570		242.12	230.01	264.51
	23575		439.50	417.53	480.16
#	23575		366.26	347.95	400.14
	23585		882.60	838.47	964.24
	23600		362.66	344.53	396.21
#	23600		317.61	301.73	346.99
	23605		512.89	487.25	560.34

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	23605		426.77	405.43	466.24
	23615		808.83	768.39	883.65
	23616		1,108.26	1,052.85	1,210.78
	23620		295.00	280.25	322.29
#	23620		260.06	247.06	284.12
	23625		429.35	407.88	469.06
#	23625		364.37	346.15	398.07
	23630		719.03	683.08	785.54
	23650		414.10	393.40	452.41
#	23650		353.42	335.75	386.11
	23655		405.26	385.00	442.75
	23660		538.22	511.31	588.01
	23665		477.76	453.87	521.95
#	23665		402.68	382.55	439.93
	23670		803.47	763.30	877.80
	23675		604.88	574.64	660.84
#	23675		496.39	471.57	542.31
	23680		850.99	808.44	929.71
	23700		180.36	171.34	197.04
	23800		932.59	885.96	1,018.85
	23802		1,165.13	1,106.87	1,272.90
	23900		1,243.42	1,181.25	1,358.44
	23920		1,019.70	968.72	1,114.03
	23921		446.39	424.07	487.68
	23930		362.63	344.50	396.18
#	23930		201.12	191.06	219.72
	23931		305.04	289.79	333.26
#	23931		153.34	145.67	167.52
	23935		482.09	457.99	526.69
	24000		449.40	426.93	490.97
	24006		651.31	618.74	711.55

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	24065		248.68	236.25	271.69
#	24065		144.48	137.26	157.85
	24066		653.74	621.05	714.21
#	24066		405.50	385.23	443.01
	24071		385.23	365.97	420.87
	24073		644.62	612.39	704.25
	24075		541.12	514.06	591.17
#	24075		312.80	297.16	341.73
	24076		510.49	484.97	557.72
	24077		949.32	901.85	1,037.13
	24079		1,217.22	1,156.36	1,329.81
	24100		399.45	379.48	436.40
	24101		469.85	446.36	513.31
	24102		566.37	538.05	618.76
	24105		344.75	327.51	376.64
	24110		552.43	524.81	603.53
	24115		679.98	645.98	742.88
	24116		785.39	746.12	858.04
	24120		494.67	469.94	540.43
	24125		580.96	551.91	634.70
	24126		604.10	573.90	659.99
	24130		472.50	448.88	516.21
	24134		689.58	655.10	753.37
	24136		587.57	558.19	641.92
	24138		643.48	611.31	703.01
	24140		642.95	610.80	702.42
	24145		553.51	525.83	604.70
	24147		580.76	551.72	634.48
	24149		1,069.55	1,016.07	1,168.48
	24150		1,384.07	1,314.87	1,512.10
	24152		1,210.23	1,149.72	1,322.18

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	24155		778.66	739.73	850.69
	24160		1,134.81	1,078.07	1,239.78
	24164		669.68	636.20	731.63
	24200		230.86	219.32	252.22
#	24200		139.23	132.27	152.11
	24201		632.88	601.24	691.43
#	24201		380.66	361.63	415.87
#	24220		56.17	53.36	61.36
	24220		175.69	166.91	191.95
	24300		426.46	405.14	465.91
	24301		687.83	653.44	751.46
	24305		528.10	501.70	576.96
	24310		431.54	409.96	471.45
	24320		716.57	680.74	782.85
	24330		663.90	630.71	725.32
	24331		721.27	685.21	787.99
	24332		575.64	546.86	628.89
	24340		570.16	541.65	622.90
	24341		690.00	655.50	753.83
	24342		703.30	668.14	768.36
	24343		659.90	626.91	720.95
	24344		1,011.68	961.10	1,105.27
	24345		658.35	625.43	719.24
	24346		1,011.68	961.10	1,105.27
	24357		372.72	354.08	407.19
	24358		487.02	462.67	532.07
	24359		604.25	574.04	660.15
	24360		823.69	782.51	899.89
	24361		916.61	870.78	1,001.40
	24362		962.20	914.09	1,051.20
	24363		1,287.44	1,223.07	1,406.53

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	24365		593.07	563.42	647.93
	24366		622.98	591.83	680.60
	24370		1,363.75	1,295.56	1,489.89
	24371		1,559.11	1,481.15	1,703.32
	24400		760.25	722.24	830.58
	24410		962.14	914.03	1,051.13
	24420		978.88	929.94	1,069.43
	24430		955.30	907.54	1,043.67
	24435		986.06	936.76	1,077.27
	24470		624.82	593.58	682.62
	24495		868.33	824.91	948.65
	24498		789.37	749.90	862.39
	24500		395.71	375.92	432.31
#	24500		334.73	317.99	365.69
	24505		558.17	530.26	609.80
#	24505		458.57	435.64	500.99
	24515		806.96	766.61	881.60
	24516		784.70	745.47	857.29
	24530		414.36	393.64	452.69
#	24530		345.71	328.42	377.68
	24535		664.07	630.87	725.50
#	24535		549.14	521.68	599.93
	24538		732.49	695.87	800.25
	24545		846.27	803.96	924.55
	24546		939.19	892.23	1,026.06
	24560		371.57	352.99	405.94
#	24560		306.59	291.26	334.95
	24565		577.20	548.34	630.59
#	24565		472.39	448.77	516.09
	24566		673.20	639.54	735.47
	24575		679.18	645.22	742.00

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	24576		389.38	369.91	425.40
#	24576		323.19	307.03	353.08
	24577		593.15	563.49	648.01
#	24577		483.43	459.26	528.15
	24579		765.16	726.90	835.94
	24582		762.48	724.36	833.01
	24586		975.48	926.71	1,065.72
	24587		985.65	936.37	1,076.83
	24600		457.17	434.31	499.46
#	24600		388.83	369.39	424.80
	24605		464.55	441.32	507.52
	24615		652.07	619.47	712.39
	24620		552.36	524.74	603.45
	24635		624.87	593.63	682.67
#	24640		69.66	66.18	76.11
	24640		99.69	94.71	108.92
	24650		286.58	272.25	313.09
#	24650		247.04	234.69	269.89
	24655		509.43	483.96	556.55
#	24655		426.07	404.77	465.49
	24665		606.65	576.32	662.77
	24666		670.78	637.24	732.83
	24670		320.49	304.47	350.14
#	24670		269.92	256.42	294.88
	24675		495.42	470.65	541.25
#	24675		409.92	389.42	447.83
	24685		606.89	576.55	663.03
	24800		766.19	727.88	837.06
	24802		912.53	866.90	996.94
	24900		705.05	669.80	770.27
	24920		674.49	640.77	736.89

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	24925		532.14	505.53	581.36
	24930		709.74	674.25	775.39
	24931		845.74	803.45	923.97
	24935		1,115.10	1,059.35	1,218.25
	25000		327.18	310.82	357.44
	25001		329.02	312.57	359.46
	25020		687.81	653.42	751.43
	25023		1,218.92	1,157.97	1,331.67
	25024		713.48	677.81	779.48
	25025		1,109.63	1,054.15	1,212.27
	25028		654.45	621.73	714.99
	25031		352.63	335.00	385.25
	25035		550.33	522.81	601.23
	25040		513.33	487.66	560.81
	25065		248.12	235.71	271.07
#	25065		141.77	134.68	154.88
	25066		346.94	329.59	379.03
	25071		397.24	377.38	433.99
	25073		497.10	472.25	543.09
	25075		524.05	497.85	572.53
#	25075		298.49	283.57	326.11
	25076		479.13	455.17	523.45
	25077		823.38	782.21	899.54
	25078		1,071.55	1,017.97	1,170.67
	25085		414.81	394.07	453.18
	25100		335.96	319.16	367.03
	25101		380.22	361.21	415.39
	25105		451.40	428.83	493.15
	25107		571.83	543.24	624.73
	25109		493.43	468.76	539.07
	25110		327.00	310.65	357.25

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	25111		309.35	293.88	337.96
	25112		365.67	347.39	399.50
	25115		687.80	653.41	751.42
	25116		555.81	528.02	607.22
	25118		358.20	340.29	391.33
	25119		473.62	449.94	517.43
	25120		462.65	439.52	505.45
	25125		557.13	529.27	608.66
	25126		560.85	532.81	612.73
	25130		418.12	397.21	456.79
	25135		527.29	500.93	576.07
	25136		470.24	446.73	513.74
	25145		489.28	464.82	534.54
	25150		522.13	496.02	570.42
	25151		533.16	506.50	582.48
	25170		1,316.71	1,250.87	1,438.50
	25210		454.53	431.80	496.57
	25215		564.33	536.11	616.53
	25230		402.11	382.00	439.30
	25240		399.10	379.15	436.02
#	25246		61.52	58.44	67.21
	25246		177.37	168.50	193.78
	25248		397.76	377.87	434.55
	25250		500.78	475.74	547.10
	25251		664.64	631.41	726.12
	25259		418.41	397.49	457.11
	25260		583.65	554.47	637.64
	25263		592.78	563.14	647.61
	25265		673.44	639.77	735.74
	25270		458.33	435.41	500.72
	25272		522.84	496.70	571.21

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	25274		602.49	572.37	658.23
	25275		610.05	579.55	666.48
	25280		519.79	493.80	567.87
	25290		403.10	382.95	440.39
	25295		484.29	460.08	529.09
	25300		641.44	609.37	700.78
	25301		586.10	556.80	640.32
	25310		651.00	618.45	711.22
	25312		650.84	618.30	711.05
	25315		707.79	672.40	773.26
	25316		836.75	794.91	914.15
	25320		904.84	859.60	988.54
	25332		760.55	722.52	830.90
	25335		860.87	817.83	940.50
	25337		809.34	768.87	884.20
	25350		613.59	582.91	670.35
	25355		705.09	669.84	770.32
	25360		596.61	566.78	651.80
	25365		837.09	795.24	914.53
	25370		924.42	878.20	1,009.93
	25375		869.33	825.86	949.74
	25390		691.62	657.04	755.60
	25391		905.59	860.31	989.36
	25392		920.70	874.67	1,005.87
	25393		1,020.02	969.02	1,114.37
	25394		722.06	685.96	788.85
	25400		724.17	687.96	791.15
	25405		925.33	879.06	1,010.92
	25415		881.77	837.68	963.33
	25420		1,054.58	1,001.85	1,152.13
	25425		877.40	833.53	958.56

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	25426		1,013.97	963.27	1,107.76
	25430		680.38	646.36	743.31
	25431		725.32	689.05	792.41
	25440		691.56	656.98	755.53
	25441		855.23	812.47	934.34
	25442		725.97	689.67	793.12
	25443		722.98	686.83	789.85
	25444		745.01	707.76	813.92
	25445		650.87	618.33	711.08
	25446		1,038.13	986.22	1,134.15
	25447		726.63	690.30	793.85
	25448		801.46	761.39	875.60
	25449		918.29	872.38	1,003.24
	25450		576.60	547.77	629.94
	25455		676.70	642.87	739.30
	25490		665.11	631.85	726.63
	25491		681.67	647.59	744.73
	25492		828.87	787.43	905.54
	25500		310.84	295.30	339.60
#	25500		261.50	248.43	285.69
	25505		565.74	537.45	618.07
#	25505		474.41	450.69	518.29
	25515		619.36	588.39	676.65
	25520		612.37	581.75	669.01
#	25520		516.44	490.62	564.21
	25525		721.06	685.01	787.76
	25526		878.58	834.65	959.85
	25530		286.61	272.28	313.12
#	25530		242.78	230.64	265.24
	25535		526.02	499.72	574.68
#	25535		438.99	417.04	479.60

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	25545		579.74	550.75	633.36
	25560		315.72	299.93	344.92
#	25560		262.09	248.99	286.34
	25565		598.33	568.41	653.67
#	25565		493.82	469.13	539.50
	25574		625.86	594.57	683.76
	25575		828.95	787.50	905.63
	25600		365.57	347.29	399.38
#	25600		325.73	309.44	355.86
	25605		610.01	579.51	666.44
#	25605		531.86	505.27	581.06
	25606		624.64	593.41	682.42
	25607		680.76	646.72	743.73
	25608		755.50	717.73	825.39
	25609		949.34	901.87	1,037.15
	25622		333.65	316.97	364.52
#	25622		283.39	269.22	309.60
	25624		524.67	498.44	573.21
#	25624		430.28	408.77	470.09
	25628		654.45	621.73	714.99
	25630		329.41	312.94	359.88
#	25630		279.45	265.48	305.30
	25635		497.86	472.97	543.92
#	25635		408.37	387.95	446.14
	25645		533.29	506.63	582.62
	25650		361.83	343.74	395.30
#	25650		312.18	296.57	341.06
	25651		459.33	436.36	501.81
	25652		576.49	547.67	629.82
	25660		430.95	409.40	470.81
	25670		567.56	539.18	620.06

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	25671		507.67	482.29	554.63
	25675		554.16	526.45	605.42
#	25675		471.10	447.55	514.68
	25676		581.40	552.33	635.18
	25680		503.41	478.24	549.98
	25685		678.29	644.38	741.04
	25690		467.54	444.16	510.78
	25695		588.34	558.92	642.76
	25800		660.16	627.15	721.22
	25805		778.05	739.15	850.02
	25810		778.46	739.54	850.47
	25820		596.79	566.95	651.99
	25825		723.09	686.94	789.98
	25830		936.67	889.84	1,023.32
	25900		655.78	622.99	716.44
	25905		647.32	614.95	707.19
	25907		572.47	543.85	625.43
	25909		633.23	601.57	691.81
	25915		1,048.33	995.91	1,145.30
	25920		679.17	645.21	741.99
	25922		605.80	575.51	661.84
	25924		663.86	630.67	725.27
	25927		810.43	769.91	885.40
	25929		558.75	530.81	610.43
	25931		752.76	715.12	822.39
	26010		350.72	333.18	383.16
#	26010		139.57	132.59	152.48
	26011		483.90	459.71	528.67
#	26011		176.82	167.98	193.18
	26020		517.19	491.33	565.03
	26025		392.77	373.13	429.10

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	26030		453.94	431.24	495.93
	26034		510.69	485.16	557.93
	26035		797.59	757.71	871.37
	26037		515.60	489.82	563.29
	26040		297.52	282.64	325.04
	26045		440.25	418.24	480.98
	26055		590.75	561.21	645.39
#	26055		276.93	263.08	302.54
	26060		234.97	223.22	256.70
	26070		302.93	287.78	330.95
	26075		319.21	303.25	348.74
	26080		374.64	355.91	409.30
	26100		327.30	310.94	357.58
	26105		328.99	312.54	359.42
	26110		307.09	291.74	335.50
	26111		383.68	364.50	419.18
	26113		499.62	474.64	545.84
	26115		556.41	528.59	607.88
#	26115		311.54	295.96	340.35
	26116		481.52	457.44	526.06
	26117		680.36	646.34	743.29
	26118		956.94	909.09	1,045.45
	26121		547.95	520.55	598.63
	26123		762.47	724.35	833.00
	26125		228.67	217.24	249.83
	26130		445.18	422.92	486.36
	26135		506.43	481.11	553.28
	26140		467.69	444.31	510.96
	26145		474.09	450.39	517.95
	26160		618.39	587.47	675.59
#	26160		298.13	283.22	325.70

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	26170		380.15	361.14	415.31
	26180		418.15	397.24	456.83
	26185		530.60	504.07	579.68
	26200		417.74	396.85	456.38
	26205		563.13	534.97	615.22
	26210		415.61	394.83	454.05
	26215		529.90	503.41	578.92
	26230		460.01	437.01	502.56
	26235		452.95	430.30	494.85
	26236		410.46	389.94	448.43
	26250		970.92	922.37	1,060.73
	26260		733.02	696.37	800.83
	26262		588.64	559.21	643.09
	26320		327.18	310.82	357.44
	26340		346.88	329.54	378.97
#	26341		70.95	67.40	77.51
	26341		117.84	111.95	128.74
	26350		704.21	669.00	769.35
	26352		771.42	732.85	842.78
	26356		731.60	695.02	799.27
	26357		830.90	789.36	907.76
	26358		911.10	865.55	995.38
	26370		727.67	691.29	794.98
	26372		862.99	819.84	942.82
	26373		833.39	791.72	910.48
	26390		822.24	781.13	898.30
	26392		938.16	891.25	1,024.94
	26410		569.30	540.84	621.97
	26412		665.30	632.04	726.85
	26415		801.65	761.57	875.81
	26416		864.76	821.52	944.75

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	26418		594.76	565.02	649.77
	26420		687.96	653.56	751.59
	26426		463.19	440.03	506.03
	26428		756.30	718.49	826.26
	26432		515.60	489.82	563.29
	26433		540.83	513.79	590.86
	26434		663.55	630.37	724.93
	26437		621.26	590.20	678.73
	26440		611.30	580.74	667.85
	26442		922.83	876.69	1,008.19
	26445		573.71	545.02	626.77
	26449		641.98	609.88	701.36
	26450		436.90	415.06	477.32
	26455		436.81	414.97	477.22
	26460		426.50	405.18	465.96
	26471		615.12	584.36	672.01
	26474		624.88	593.64	682.69
	26476		618.23	587.32	675.42
	26477		585.63	556.35	639.80
	26478		622.50	591.38	680.09
	26479		646.04	613.74	705.80
	26480		650.62	618.09	710.80
	26483		801.71	761.62	875.86
	26485		773.55	734.87	845.10
	26489		905.95	860.65	989.75
	26490		790.95	751.40	864.11
	26492		870.96	827.41	951.52
	26494		793.69	754.01	867.11
	26496		850.82	808.28	929.52
	26497		849.84	807.35	928.45
	26498		1,089.43	1,034.96	1,190.20

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	26499		820.23	779.22	896.10
	26500		657.16	624.30	717.95
	26502		715.44	679.67	781.62
	26508		613.58	582.90	670.34
	26510		599.42	569.45	654.87
	26516		689.09	654.64	752.84
	26517		815.16	774.40	890.56
	26518		824.89	783.65	901.20
	26520		638.36	606.44	697.41
	26525		644.41	612.19	704.02
	26530		496.55	471.72	542.48
	26531		573.66	544.98	626.73
	26535		407.88	387.49	445.61
	26536		698.40	663.48	763.00
	26540		651.16	618.60	711.39
	26541		770.74	732.20	842.03
	26542		668.52	635.09	730.35
	26545		678.84	644.90	741.64
	26546		956.93	909.08	1,045.44
	26548		737.22	700.36	805.41
	26550		1,505.97	1,430.67	1,645.27
	26551		2,941.32	2,794.25	3,213.39
	26553		2,921.39	2,775.32	3,191.62
	26554		3,391.93	3,222.33	3,705.68
	26555		1,275.42	1,211.65	1,393.40
	26556		3,042.83	2,890.69	3,324.29
	26560		609.41	578.94	665.78
	26561		916.58	870.75	1,001.36
	26562		1,274.63	1,210.90	1,392.54
	26565		662.66	629.53	723.96
	26567		671.92	638.32	734.07

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	26568		876.37	832.55	957.43
	26580		1,414.53	1,343.80	1,545.37
	26587		954.34	906.62	1,042.61
	26590		1,310.54	1,245.01	1,431.76
	26591		465.87	442.58	508.97
	26593		606.41	576.09	662.50
	26596		767.13	728.77	838.09
	26600		324.49	308.27	354.51
#	26600		286.79	272.45	313.32
	26605		358.43	340.51	391.59
#	26605		299.28	284.32	326.97
	26607		480.20	456.19	524.62
	26608		449.55	427.07	491.13
	26615		532.38	505.76	581.62
	26641		448.60	426.17	490.10
#	26641		370.45	351.93	404.72
	26645		463.79	440.60	506.69
#	26645		379.51	360.53	414.61
	26650		454.60	431.87	496.65
	26665		562.37	534.25	614.39
	26670		411.56	390.98	449.63
#	26670		345.05	327.80	376.97
	26675		494.04	469.34	539.74
#	26675		405.77	385.48	443.30
	26676		472.79	449.15	516.52
	26685		520.02	494.02	568.12
	26686		579.21	550.25	632.79
	26700		390.19	370.68	426.28
#	26700		336.56	319.73	367.69
	26705		467.44	444.07	510.68
#	26705		382.85	363.71	418.27

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	26706		405.28	385.02	442.77
	26715		529.74	503.25	578.74
	26720		223.70	212.52	244.40
#	26720		195.81	186.02	213.92
	26725		378.29	359.38	413.29
#	26725		310.56	295.03	339.28
	26727		442.21	420.10	483.12
	26735		549.20	521.74	600.00
	26740		249.31	236.84	272.37
#	26740		216.21	205.40	236.21
	26742		404.54	384.31	441.96
#	26742		329.76	313.27	360.26
	26746		672.75	639.11	734.98
	26750		210.09	199.59	229.53
#	26750		199.06	189.11	217.48
	26755		363.81	345.62	397.46
#	26755		288.73	274.29	315.43
	26756		400.00	380.00	437.00
	26765		471.32	447.75	514.91
	26770		345.88	328.59	377.88
#	26770		296.23	281.42	323.63
	26775		419.62	398.64	458.44
#	26775		344.53	327.30	376.40
	26776		419.99	398.99	458.84
	26785		509.03	483.58	556.12
	26820		783.62	744.44	856.11
	26841		720.42	684.40	787.06
	26842		785.65	746.37	858.33
	26843		740.02	703.02	808.47
	26844		810.46	769.94	885.43
	26850		678.08	644.18	740.81

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	26852		766.18	727.87	837.05
	26860		577.05	548.20	630.43
	26861		87.11	82.75	95.16
	26862		708.29	672.88	773.81
	26863		192.06	182.46	209.83
	26910		712.45	676.83	778.35
	26951		667.44	634.07	729.18
	26952		640.01	608.01	699.21
	26990		641.01	608.96	700.30
	26991		713.75	678.06	779.77
#	26991		481.44	457.37	525.98
	26992		926.19	879.88	1,011.86
	27000		353.08	335.43	385.74
	27001		502.64	477.51	549.14
	27003		558.41	530.49	610.06
	27005		661.71	628.62	722.91
	27006		638.37	606.45	697.42
	27025		862.56	819.43	942.34
	27027		799.07	759.12	872.99
	27030		849.09	806.64	927.64
	27033		881.09	837.04	962.60
	27035		1,005.99	955.69	1,099.04
	27036		927.65	881.27	1,013.46
	27040		325.27	309.01	355.36
#	27040		179.08	170.13	195.65
	27041		644.56	612.33	704.18
	27043		448.05	425.65	489.50
	27045		684.01	649.81	747.28
	27047		512.93	487.28	560.37
#	27047		344.98	327.73	376.89
	27048		578.25	549.34	631.74

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	27049		1,279.20	1,215.24	1,397.53
	27050		387.59	368.21	423.44
	27052		542.79	515.65	593.00
	27054		637.69	605.81	696.68
	27057		909.81	864.32	993.97
	27059		1,636.90	1,555.06	1,788.32
	27060		438.98	417.03	479.58
	27062		421.69	400.61	460.70
	27065		494.90	470.16	540.68
	27066		744.27	707.06	813.12
	27067		942.37	895.25	1,029.54
	27070		807.13	766.77	881.79
	27071		894.42	849.70	977.16
	27075		1,847.57	1,755.19	2,018.47
	27076		2,223.85	2,112.66	2,429.56
	27077		2,475.27	2,351.51	2,704.24
	27078		1,822.73	1,731.59	1,991.33
	27080		491.28	466.72	536.73
	27086		320.04	304.04	349.65
#	27086		161.90	153.81	176.88
	27087		586.93	557.58	641.22
	27090		760.10	722.10	830.42
	27091		1,424.55	1,353.32	1,556.32
#	27093		57.82	54.93	63.17
	27093		218.10	207.20	238.28
#	27095		69.91	66.41	76.37
	27095		304.67	289.44	332.86
#	27096		72.95	69.30	79.70
	27096		166.42	158.10	181.82
	27097		631.20	599.64	689.59
	27098		644.29	612.08	703.89

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	27100		763.52	725.34	834.14
	27105		798.06	758.16	871.88
	27110		884.98	840.73	966.84
	27111		826.20	784.89	902.62
	27120		1,168.96	1,110.51	1,277.09
	27122		997.35	947.48	1,089.60
	27125		1,022.61	971.48	1,117.20
	27130		1,151.39	1,093.82	1,257.89
	27132		1,491.70	1,417.12	1,629.69
	27134		1,687.39	1,603.02	1,843.47
	27137		1,307.81	1,242.42	1,428.78
	27138		1,357.40	1,289.53	1,482.96
	27140		817.49	776.62	893.11
	27146		1,155.03	1,097.28	1,261.87
	27147		1,312.75	1,247.11	1,434.18
	27151		1,415.79	1,345.00	1,546.75
	27156		1,521.20	1,445.14	1,661.91
	27158		1,254.57	1,191.84	1,370.62
	27161		1,101.45	1,046.38	1,203.34
	27165		1,243.99	1,181.79	1,359.06
	27170		1,053.94	1,001.24	1,151.43
	27175		610.59	580.06	667.07
	27176		842.33	800.21	920.24
	27177		1,011.82	961.23	1,105.41
	27178		842.33	800.21	920.24
	27179		890.19	845.68	972.53
	27181		1,017.68	966.80	1,111.82
	27185		663.90	630.71	725.32
	27187		905.84	860.55	989.63
	27197		119.92	113.92	131.01
	27198		281.51	267.43	307.54

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	27200		203.82	193.63	222.67
#	27200		192.48	182.86	210.29
	27202		487.42	463.05	532.51
	27220		437.66	415.78	478.15
#	27220		382.18	363.07	417.53
	27222		901.76	856.67	985.17
	27226		955.36	907.59	1,043.73
	27227		1,477.03	1,403.18	1,613.66
	27228		1,674.58	1,590.85	1,829.48
	27230		517.57	491.69	565.44
#	27230		459.34	436.37	501.83
	27232		690.88	656.34	754.79
	27235		823.58	782.40	899.76
	27236		1,076.33	1,022.51	1,175.89
	27238		445.02	422.77	486.19
	27240		884.65	840.42	966.48
	27244		1,107.79	1,052.40	1,210.26
	27245		1,104.74	1,049.50	1,206.93
	27246		413.67	392.99	451.94
#	27246		367.39	349.02	401.37
	27248		675.90	642.11	738.43
	27250		177.67	168.79	194.11
	27252		707.73	672.34	773.19
	27253		857.24	814.38	936.54
	27254		1,144.05	1,086.85	1,249.88
	27256		390.31	370.79	426.41
#	27256		260.06	247.06	284.12
	27257		325.94	309.64	356.09
	27258		1,005.42	955.15	1,098.42
	27259		1,386.29	1,316.98	1,514.53
	27265		476.50	452.68	520.58

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	27266		545.72	518.43	596.19
	27267		419.43	398.46	458.23
	27268		504.73	479.49	551.41
	27269		1,110.82	1,055.28	1,213.57
	27275		173.90	165.21	189.99
#	27278		431.54	409.96	471.45
	27278		12,649.33	12,016.86	13,819.39
	27279		749.54	712.06	818.87
	27280		1,278.51	1,214.58	1,396.77
	27282		788.70	749.27	861.66
	27284		1,426.80	1,355.46	1,558.78
	27286		1,468.10	1,394.70	1,603.91
	27290		1,452.53	1,379.90	1,586.89
	27295		1,139.15	1,082.19	1,244.52
	27301		690.50	655.98	754.38
#	27301		474.74	451.00	518.65
	27303		591.28	561.72	645.98
	27305		452.67	430.04	494.55
	27306		315.10	299.35	344.25
	27307		366.48	348.16	400.38
	27310		675.59	641.81	738.08
	27323		261.03	247.98	285.18
#	27323		153.46	145.79	167.66
	27324		391.83	372.24	428.08
	27325		527.10	500.75	575.86
	27326		490.84	466.30	536.25
	27327		512.53	486.90	559.94
#	27327		301.07	286.02	328.92
	27328		580.95	551.90	634.69
	27329		956.32	908.50	1,044.78
	27330		401.10	381.05	438.21

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	27331		447.77	425.38	489.19
	27332		601.00	570.95	656.59
	27333		550.74	523.20	601.68
	27334		636.34	604.52	695.20
	27335		705.76	670.47	771.04
	27337		401.41	381.34	438.54
	27339		705.50	670.23	770.76
	27340		357.94	340.04	391.05
	27345		456.16	433.35	498.35
	27347		495.02	470.27	540.81
	27350		606.53	576.20	662.63
	27355		564.56	536.33	616.78
	27356		683.19	649.03	746.38
	27357		751.87	714.28	821.42
	27358		237.70	225.82	259.69
	27360		835.98	794.18	913.31
	27364		1,421.07	1,350.02	1,552.52
	27365		1,825.94	1,734.64	1,994.84
#	27369		34.03	32.33	37.18
	27369		169.49	161.02	185.17
	27372		608.87	578.43	665.19
#	27372		381.78	362.69	417.09
	27380		580.66	551.63	634.37
	27381		757.83	719.94	827.93
	27385		569.68	541.20	622.38
	27386		788.52	749.09	861.45
	27390		409.51	389.03	447.38
	27391		538.63	511.70	588.46
	27392		660.08	627.08	721.14
	27393		465.63	442.35	508.70
	27394		606.42	576.10	662.52

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	27395		807.79	767.40	882.51
	27396		575.47	546.70	628.71
	27397		840.83	798.79	918.61
	27400		645.31	613.04	705.00
	27403		597.52	567.64	652.79
	27405		623.64	592.46	681.33
	27407		733.71	697.02	801.57
	27409		881.97	837.87	963.55
	27412		1,479.09	1,405.14	1,615.91
	27415		1,241.82	1,179.73	1,356.69
	27416		889.73	845.24	972.03
	27418		749.70	712.22	819.05
	27420		691.61	657.03	755.58
	27422		685.28	651.02	748.67
	27424		690.63	656.10	754.52
	27425		429.79	408.30	469.55
	27427		649.49	617.02	709.57
	27428		1,022.44	971.32	1,117.02
	27429		1,151.74	1,094.15	1,258.27
	27430		685.61	651.33	749.03
	27435		744.84	707.60	813.74
	27437		612.19	581.58	668.82
	27438		768.92	730.47	840.04
	27440		732.67	696.04	800.45
	27441		755.45	717.68	825.33
	27442		792.16	752.55	865.43
	27443		748.72	711.28	817.97
	27446		1,035.46	983.69	1,131.24
	27447		1,148.72	1,091.28	1,254.97
	27448		750.18	712.67	819.57
	27450		914.82	869.08	999.44

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	27454		1,167.43	1,109.06	1,275.42
	27455		877.33	833.46	958.48
	27457		868.60	825.17	948.95
	27458		1,703.77	1,618.58	1,861.37
	27465		1,278.95	1,215.00	1,397.25
	27466		1,355.16	1,287.40	1,480.51
	27470		1,070.26	1,016.75	1,169.26
	27472		1,142.13	1,085.02	1,247.77
	27475		614.40	583.68	671.23
	27477		674.83	641.09	737.25
	27479		836.62	794.79	914.01
	27485		620.84	589.80	678.27
	27486		1,261.47	1,198.40	1,378.16
	27487		1,562.49	1,484.37	1,707.03
	27488		1,085.64	1,031.36	1,186.06
	27495		1,022.34	971.22	1,116.90
	27496		516.74	490.90	564.54
	27497		540.23	513.22	590.20
	27498		611.03	580.48	667.55
	27499		650.01	617.51	710.14
	27500		554.56	526.83	605.85
#	27500		454.04	431.34	496.04
	27501		533.00	506.35	582.30
#	27501		468.03	444.63	511.32
	27502		741.11	704.05	809.66
	27503		737.85	700.96	806.10
	27506		1,207.47	1,147.10	1,319.17
	27507		873.53	829.85	954.33
	27508		560.52	532.49	612.36
#	27508		475.32	451.55	519.28
	27509		634.07	602.37	692.73

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	27510		660.60	627.57	721.71
	27511		892.12	847.51	974.64
	27513		1,099.17	1,044.21	1,200.84
	27514		866.29	822.98	946.43
	27516		550.30	522.79	601.21
#	27516		462.65	439.52	505.45
	27517		639.50	607.53	698.66
	27519		801.78	761.69	875.94
	27520		352.33	334.71	384.92
#	27520		298.39	283.47	325.99
	27524		691.78	657.19	755.77
	27530		331.64	315.06	362.32
#	27530		287.51	273.13	314.10
	27532		655.72	622.93	716.37
#	27532		542.63	515.50	592.83
	27535		806.20	765.89	880.77
	27536		1,076.57	1,022.74	1,176.15
	27538		516.51	490.68	564.28
#	27538		435.60	413.82	475.89
	27540		748.75	711.31	818.01
	27550		593.95	564.25	648.89
#	27550		506.60	481.27	553.46
	27552		591.73	562.14	646.46
	27556		789.38	749.91	862.40
	27557		934.74	888.00	1,021.20
	27558		1,059.61	1,006.63	1,157.62
	27560		446.10	423.80	487.37
#	27560		383.27	364.11	418.73
	27562		463.12	439.96	505.95
	27566		813.77	773.08	889.04
	27570		145.40	138.13	158.85

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	27580		1,334.73	1,267.99	1,458.19
	27590		723.73	687.54	790.67
	27591		876.61	832.78	957.70
	27592		626.67	595.34	684.64
	27594		471.43	447.86	515.04
	27596		656.88	624.04	717.65
	27598		643.41	611.24	702.93
	27600		370.80	352.26	405.10
	27601		409.05	388.60	446.89
	27602		443.18	421.02	484.17
	27603		521.42	495.35	569.65
#	27603		362.36	344.24	395.88
	27604		457.28	434.42	499.58
#	27604		309.56	294.08	338.19
	27605		319.58	303.60	349.14
#	27605		169.41	160.94	185.08
	27606		250.47	237.95	273.64
	27607		556.88	529.04	608.40
	27610		597.19	567.33	652.43
	27612		529.07	502.62	578.01
	27613		248.05	235.65	271.00
#	27613		147.23	139.87	160.85
	27614		583.12	553.96	637.05
#	27614		382.69	363.56	418.09
	27615		933.79	887.10	1,020.17
	27616		1,149.28	1,091.82	1,255.59
	27618		492.57	467.94	538.13
#	27618		290.61	276.08	317.49
	27619		428.13	406.72	467.73
	27620		424.63	403.40	463.91
	27625		536.82	509.98	586.48

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	27626		553.18	525.52	604.35
	27630		539.68	512.70	589.61
#	27630		337.41	320.54	368.62
	27632		386.38	367.06	422.12
	27634		614.65	583.92	671.51
	27635		533.72	507.03	583.08
	27637		693.26	658.60	757.39
	27638		686.51	652.18	750.01
	27640		755.84	718.05	825.76
	27641		598.79	568.85	654.18
	27645		1,576.56	1,497.73	1,722.39
	27646		1,376.26	1,307.45	1,503.57
	27647		902.23	857.12	985.69
#	27648		43.91	41.71	47.97
	27648		193.47	183.80	211.37
	27650		609.53	579.05	665.91
	27652		606.52	576.19	662.62
	27654		662.04	628.94	723.28
	27656		505.73	480.44	552.51
#	27656		312.35	296.73	341.24
	27658		347.70	330.32	379.87
	27659		437.14	415.28	477.57
	27664		334.28	317.57	365.21
	27665		388.71	369.27	424.66
	27675		459.29	436.33	501.78
	27676		562.41	534.29	614.43
	27680		398.51	378.58	435.37
	27681		478.34	454.42	522.58
	27685		651.22	618.66	711.46
#	27685		432.71	411.07	472.73
	27686		492.47	467.85	538.03

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	27687		423.77	402.58	462.97
	27690		594.05	564.35	649.00
	27691		687.15	652.79	750.71
	27692		89.99	85.49	98.31
	27695		454.05	431.35	496.05
	27696		500.85	475.81	547.18
	27698		585.90	556.61	640.10
	27700		656.18	623.37	716.88
	27702		872.35	828.73	953.04
	27703		1,004.76	954.52	1,097.70
	27704		517.48	491.61	565.35
	27705		680.76	646.72	743.73
	27707		380.17	361.16	415.33
	27709		1,038.66	986.73	1,134.74
	27712		1,001.93	951.83	1,094.60
	27713		1,728.75	1,642.31	1,888.66
	27715		1,347.80	1,280.41	1,472.47
	27720		797.08	757.23	870.81
	27722		818.88	777.94	894.63
	27724		1,124.79	1,068.55	1,228.83
	27725		1,106.70	1,051.37	1,209.08
	27726		863.79	820.60	943.69
	27727		943.40	896.23	1,030.66
	27730		548.48	521.06	599.22
	27732		429.26	407.80	468.97
	27734		609.37	578.90	665.74
	27740		654.12	621.41	714.62
	27742		716.46	680.64	782.74
	27745		666.47	633.15	728.12
	27750		377.40	358.53	412.31
#	27750		320.70	304.67	350.37

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	27752		585.64	556.36	639.81
#	27752		486.96	462.61	532.00
	27756		550.23	522.72	601.13
	27758		819.00	778.05	894.76
	27759		905.17	859.91	988.90
	27760		358.81	340.87	392.00
#	27760		306.71	291.37	335.08
	27762		564.95	536.70	617.21
#	27762		474.55	450.82	518.44
	27766		565.30	537.04	617.60
	27767		306.12	290.81	334.43
#	27767		286.81	272.47	313.34
	27768		428.16	406.75	467.76
	27769		663.16	630.00	724.50
	27780		336.37	319.55	367.48
#	27780		285.49	271.22	311.90
	27781		470.03	446.53	513.51
#	27781		394.03	374.33	430.48
	27784		658.56	625.63	719.47
	27786		333.68	317.00	364.55
#	27786		281.89	267.80	307.97
	27788		477.94	454.04	522.15
#	27788		400.40	380.38	437.44
	27792		594.36	564.64	649.34
	27808		363.73	345.54	397.37
#	27808		306.42	291.10	334.77
	27810		539.43	512.46	589.33
#	27810		449.63	427.15	491.22
	27814		700.56	665.53	765.36
	27816		363.83	345.64	397.49
#	27816		301.00	285.95	328.84

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	27818		561.90	533.81	613.88
#	27818		462.30	439.19	505.07
	27822		805.65	765.37	880.18
	27823		902.90	857.76	986.42
	27824		341.46	324.39	373.05
#	27824		305.60	290.32	333.87
	27825		583.24	554.08	637.19
#	27825		468.31	444.89	511.62
	27826		792.70	753.07	866.03
	27827		1,029.73	978.24	1,124.98
	27828		1,207.60	1,147.22	1,319.30
	27829		654.41	621.69	714.94
	27830		416.62	395.79	455.16
#	27830		348.28	330.87	380.50
	27831		390.32	370.80	426.42
	27832		701.96	666.86	766.89
	27840		436.99	415.14	477.41
	27842		478.41	454.49	522.66
	27846		662.49	629.37	723.78
	27848		725.85	689.56	792.99
	27860		151.24	143.68	165.23
	27870		914.75	869.01	999.36
	27871		634.21	602.50	692.88
	27880		825.22	783.96	901.55
	27881		757.70	719.82	827.79
	27882		552.05	524.45	603.12
	27884		542.42	515.30	592.60
	27886		597.90	568.01	653.21
	27888		537.36	510.49	587.06
	27889		595.88	566.09	651.00
	27892		509.76	484.27	556.91

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	27893		573.46	544.79	626.51
	27894		751.07	713.52	820.55
#	28001		86.68	82.35	94.70
	28001		160.54	152.51	175.39
	28002		231.95	220.35	253.40
#	28002		126.52	120.19	138.22
	28003		361.59	343.51	395.04
#	28003		230.73	219.19	252.07
	28005		524.49	498.27	573.01
	28008		403.58	383.40	440.91
#	28008		269.65	256.17	294.60
	28010		226.42	215.10	247.37
#	28010		192.09	182.49	209.86
	28011		309.36	293.89	337.97
#	28011		257.88	244.99	281.74
	28020		537.06	510.21	586.74
#	28020		341.84	324.75	373.46
	28022		474.33	450.61	518.20
#	28022		305.77	290.48	334.05
	28024		450.70	428.17	492.40
#	28024		289.80	275.31	316.61
	28035		520.15	494.14	568.26
#	28035		335.04	318.29	366.03
	28039		457.03	434.18	499.31
#	28039		309.01	293.56	337.59
	28041		412.77	392.13	450.95
	28043		364.78	346.54	398.52
#	28043		241.27	229.21	263.59
	28045		464.42	441.20	507.38
#	28045		321.60	305.52	351.35
	28046		652.95	620.30	713.35

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	28047		947.67	900.29	1,035.33
	28050		388.77	369.33	424.73
#	28050		256.68	243.85	280.43
	28052		363.79	345.60	397.44
#	28052		236.60	224.77	258.49
	28054		340.50	323.48	372.00
#	28054		216.38	205.56	236.39
	28055		364.01	345.81	397.68
	28060		501.59	476.51	547.99
#	28060		335.17	318.41	366.17
	28062		562.60	534.47	614.64
#	28062		376.27	357.46	411.08
	28070		494.70	469.97	540.47
#	28070		320.01	304.01	349.61
	28072		478.35	454.43	522.59
#	28072		303.97	288.77	332.09
	28080		520.14	494.13	568.25
#	28080		357.09	339.24	390.13
	28086		514.60	488.87	562.20
#	28086		326.73	310.39	356.95
	28088		456.89	434.05	499.16
#	28088		276.68	262.85	302.28
	28090		447.04	424.69	488.39
#	28090		286.75	272.41	313.27
	28092		401.29	381.23	438.41
#	28092		252.96	240.31	276.36
	28100		615.14	584.38	672.04
#	28100		393.26	373.60	429.64
	28102		569.54	541.06	622.22
	28103		354.88	337.14	387.71
	28104		515.80	490.01	563.51

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	28104		331.00	314.45	361.62
	28106		389.38	369.91	425.40
	28107		476.37	452.55	520.43
#	28107		317.93	302.03	347.33
	28108		410.94	390.39	448.95
#	28108		266.89	253.55	291.58
	28110		444.09	421.89	485.17
#	28110		274.31	260.59	299.68
	28111		452.61	429.98	494.48
#	28111		296.00	281.20	323.38
	28112		458.96	436.01	501.41
#	28112		289.18	274.72	315.93
	28113		558.08	530.18	609.71
#	28113		394.73	374.99	431.24
#	28114		778.28	739.37	850.28
	28114		1,067.89	1,014.50	1,166.68
	28116		647.23	614.87	707.10
#	28116		477.14	453.28	521.27
	28118		603.54	573.36	659.36
#	28118		396.06	376.26	432.70
	28119		506.78	481.44	553.66
#	28119		337.61	320.73	368.84
	28120		657.89	625.00	718.75
#	28120		457.76	434.87	500.10
	28122		574.49	545.77	627.64
#	28122		406.85	386.51	444.49
	28124		452.85	430.21	494.74
#	28124		309.42	293.95	338.04
	28126		368.32	349.90	402.39
#	28126		231.64	220.06	253.07
	28130		586.62	557.29	640.88

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	28140		542.26	515.15	592.42
#	28140		390.25	370.74	426.35
	28150		395.17	375.41	431.72
#	28150		258.79	245.85	282.73
	28153		379.07	360.12	414.14
#	28153		243.60	231.42	266.13
	28160		387.15	367.79	422.96
#	28160		248.32	235.90	271.29
	28171		1,000.29	950.28	1,092.82
	28173		659.76	626.77	720.79
	28175		429.39	407.92	469.11
	28190		226.99	215.64	247.99
#	28190		124.32	118.10	135.82
	28192		436.20	414.39	476.55
#	28192		286.33	272.01	312.81
	28193		489.54	465.06	534.82
#	28193		333.54	316.86	364.39
	28200		480.32	456.30	524.75
#	28200		304.72	289.48	332.90
	28202		583.95	554.75	637.96
#	28202		398.84	378.90	435.74
	28208		474.17	450.46	518.03
#	28208		301.01	285.96	328.85
	28210		572.81	544.17	625.80
#	28210		388.93	369.48	424.90
	28220		426.23	404.92	465.66
#	28220		281.27	267.21	307.29
	28222		519.54	493.56	567.59
#	28222		341.17	324.11	372.73
	28225		390.26	370.75	426.36
#	28225		244.07	231.87	266.65

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	28226		630.88	599.34	689.24
#	28226		378.96	360.01	414.01
	28230		410.57	390.04	448.55
#	28230		263.16	250.00	287.50
	28232		355.70	337.92	388.61
#	28232		224.53	213.30	245.30
	28234		390.64	371.11	426.78
#	28234		252.11	239.50	275.43
	28238		658.43	625.51	719.34
#	28238		450.95	428.40	492.66
	28240		419.88	398.89	458.72
#	28240		270.02	256.52	295.00
	28250		573.09	544.44	626.11
#	28250		378.17	359.26	413.15
	28260		728.01	691.61	795.35
#	28260		499.39	474.42	545.58
#	28261		774.33	735.61	845.95
	28261		1,084.17	1,029.96	1,184.45
	28262		1,430.49	1,358.97	1,562.82
#	28262		1,020.73	969.69	1,115.14
#	28264		642.62	610.49	702.06
	28264		923.35	877.18	1,008.76
	28270		466.04	442.74	509.15
#	28270		309.43	293.96	338.05
	28272		359.70	341.72	392.98
#	28272		233.43	221.76	255.02
	28280		476.05	452.25	520.09
#	28280		314.54	298.81	343.63
	28285		523.72	497.53	572.16
#	28285		360.68	342.65	394.05
	28286		411.01	390.46	449.03

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	28286		271.26	257.70	296.36
	28288		582.30	553.19	636.17
#	28288		404.24	384.03	441.63
	28289		670.56	637.03	732.58
#	28289		428.45	407.03	468.08
	28291		643.12	610.96	702.60
#	28291		434.41	412.69	474.59
	28292		671.95	638.35	734.10
#	28292		448.84	426.40	490.36
#	28295		549.66	522.18	600.51
	28295		1,010.60	960.07	1,104.08
	28296		840.04	798.04	917.75
#	28296		473.81	450.12	517.64
#	28297		550.06	522.56	600.94
	28297		980.35	931.33	1,071.03
	28298		818.73	777.79	894.46
#	28298		472.72	449.08	516.44
#	28299		551.67	524.09	602.70
	28299		985.63	936.35	1,076.80
	28300		600.23	570.22	655.75
	28302		660.85	627.81	721.98
	28304		837.26	795.40	914.71
#	28304		570.93	542.38	623.74
	28305		615.40	584.63	672.32
	28306		599.50	569.53	654.96
#	28306		377.00	358.15	411.87
	28307		803.30	763.14	877.61
#	28307		484.57	460.34	529.39
	28308		557.77	529.88	609.36
#	28308		361.63	343.55	395.08
	28309		823.44	782.27	899.61

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	28310		539.26	512.30	589.15
#	28310		341.59	324.51	373.19
	28312		565.31	537.04	617.60
#	28312		336.68	319.85	367.83
	28313		520.51	494.48	568.65
#	28313		337.85	320.96	369.10
	28315		459.79	436.80	502.32
#	28315		303.49	288.32	331.57
	28320		566.97	538.62	619.41
	28322		780.67	741.64	852.89
#	28322		529.67	503.19	578.67
	28340		535.83	509.04	585.40
#	28340		374.01	355.31	408.61
	28341		624.60	593.37	682.38
#	28341		443.47	421.30	484.50
	28344		391.56	371.98	427.78
#	28344		257.32	244.45	281.12
	28345		482.14	458.03	526.73
#	28345		331.66	315.08	362.34
	28360		1,005.46	955.19	1,098.47
	28400		258.11	245.20	281.98
#	28400		224.09	212.89	244.82
	28405		481.37	457.30	525.90
#	28405		387.59	368.21	423.44
	28406		531.61	505.03	580.78
	28415		1,028.08	976.68	1,123.18
	28420		1,185.32	1,126.05	1,294.96
	28430		252.94	240.29	276.33
#	28430		207.89	197.50	227.13
	28435		395.09	375.34	431.64
#	28435		317.24	301.38	346.59

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	28436		477.46	453.59	521.63
	28445		960.86	912.82	1,049.74
	28446		1,109.85	1,054.36	1,212.51
	28450		220.20	209.19	240.57
#	28450		186.18	176.87	203.40
	28455		249.85	237.36	272.96
#	28455		214.00	203.30	233.80
	28456		364.25	346.04	397.95
	28465		603.42	573.25	659.24
	28470		225.48	214.21	246.34
#	28470		199.43	189.46	217.88
	28475		264.53	251.30	289.00
#	28475		217.33	206.46	237.43
	28476		370.05	351.55	404.28
	28485		525.97	499.67	574.62
	28490		150.14	142.63	164.02
#	28490		125.92	119.62	137.56
	28495		185.83	176.54	203.02
#	28495		147.83	140.44	161.51
	28496		513.92	488.22	561.45
#	28496		268.43	255.01	293.26
	28505		641.31	609.24	700.63
#	28505		459.88	436.89	502.42
	28510		124.55	118.32	136.07
#	28510		119.04	113.09	130.05
	28515		165.72	157.43	181.04
#	28515		138.75	131.81	151.58
	28525		547.22	519.86	597.84
#	28525		374.98	356.23	409.66
	28530		117.42	111.55	128.28
#	28530		98.72	93.78	107.85

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	28531		305.52	290.24	333.78
#	28531		169.14	160.68	184.78
	28540		190.21	180.70	207.81
#	28540		164.47	156.25	179.69
	28545		329.99	313.49	360.51
#	28545		265.63	252.35	290.20
	28546		599.82	569.83	655.30
#	28546		343.00	325.85	374.73
	28555		849.51	807.03	928.08
#	28555		599.74	569.75	655.21
	28570		252.88	240.24	276.28
#	28570		195.88	186.09	214.00
	28575		402.84	382.70	440.11
#	28575		328.67	312.24	359.08
	28576		374.66	355.93	409.32
	28585		913.32	867.65	997.80
#	28585		662.63	629.50	723.93
	28600		181.67	172.59	198.48
#	28600		151.95	144.35	166.00
	28605		364.65	346.42	398.38
#	28605		299.06	284.11	326.73
	28606		376.36	357.54	411.17
	28615		771.67	733.09	843.05
	28630		164.62	156.39	179.85
#	28630		108.84	103.40	118.91
	28635		167.46	159.09	182.95
#	28635		119.95	113.95	131.04
	28636		368.14	349.73	402.19
#	28636		211.53	200.95	231.09
	28645		639.11	607.15	698.22
#	28645		450.94	428.39	492.65

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	28660		142.46	135.34	155.64
#	28660		98.02	93.12	107.09
	28665		149.19	141.73	162.99
#	28665		117.01	111.16	127.83
	28666		159.56	151.58	174.32
	28675		560.47	532.45	612.32
#	28675		382.72	363.58	418.12
	28705		1,095.77	1,040.98	1,197.13
	28715		866.23	822.92	946.36
	28725		714.39	678.67	780.47
	28730		664.65	631.42	726.13
	28735		716.42	680.60	782.69
	28737		620.95	589.90	678.39
	28740		814.25	773.54	889.57
#	28740		565.70	537.42	618.03
#	28750		525.59	499.31	574.21
	28750		987.75	938.36	1,079.11
	28755		870.44	826.92	950.96
#	28755		456.70	433.87	498.95
	28760		752.92	715.27	822.56
#	28760		526.13	499.82	574.79
	28800		483.24	459.08	527.94
	28805		643.27	611.11	702.78
	28810		389.94	370.44	426.01
	28820		285.79	271.50	312.23
#	28820		161.37	153.30	176.30
	28825		278.54	264.61	304.30
#	28825		155.95	148.15	170.37
	28890		290.80	276.26	317.70
#	28890		200.70	190.67	219.27
	29000		439.67	417.69	480.34

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	29000		206.14	195.83	225.20
	29010		300.14	285.13	327.90
#	29010		149.66	142.18	163.51
	29015		320.19	304.18	349.81
#	29015		166.34	158.02	181.72
	29035		282.95	268.80	309.12
#	29035		135.23	128.47	147.74
	29040		320.95	304.90	350.64
#	29040		160.97	152.92	175.86
	29044		315.63	299.85	344.83
#	29044		156.27	148.46	170.73
	29046		344.40	327.18	376.26
#	29046		174.31	165.59	190.43
#	29049		65.52	62.24	71.58
	29049		108.43	103.01	118.46
	29055		244.67	232.44	267.31
#	29055		128.21	121.80	140.07
#	29058		85.92	81.62	93.86
	29058		132.50	125.88	144.76
#	29065		62.86	59.72	68.68
	29065		103.01	97.86	112.54
#	29075		57.14	54.28	62.42
	29075		92.69	88.06	101.27
#	29085		61.87	58.78	67.60
	29085		101.71	96.62	111.11
	29086		77.81	73.92	85.01
#	29086		44.41	42.19	48.52
#	29105		38.14	36.23	41.66
	29105		92.69	88.06	101.27
	29125		74.72	70.98	81.63
#	29125		39.78	37.79	43.46

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	29126		81.04	76.99	88.54
#	29126		44.26	42.05	48.36
	29130		44.30	42.09	48.40
#	29130		25.61	24.33	27.98
	29131		56.71	53.87	61.95
#	29131		30.66	29.13	33.50
	29200		29.99	28.49	32.76
#	29200		15.28	14.52	16.70
	29240		27.54	26.16	30.08
#	29240		15.28	14.52	16.70
	29260		27.61	26.23	30.16
#	29260		15.66	14.88	17.11
	29280		28.98	27.53	31.66
#	29280		17.03	16.18	18.61
	29305		269.94	256.44	294.91
#	29305		147.97	140.57	161.66
	29325		297.48	282.61	325.00
#	29325		164.47	156.25	179.69
#	29345		89.86	85.37	98.18
	29345		142.57	135.44	155.76
	29355		148.28	140.87	162.00
#	29355		95.26	90.50	104.08
	29358		174.11	165.40	190.21
#	29358		94.12	89.41	102.82
#	29365		80.42	76.40	87.86
	29365		132.52	125.89	144.77
	29405		83.82	79.63	91.57
#	29405		54.40	51.68	59.43
	29425		77.10	73.25	84.24
#	29425		49.82	47.33	54.43
#	29435		79.57	75.59	86.93

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	29435		132.90	126.26	145.20
	29440		42.45	40.33	46.38
#	29440		25.60	24.32	27.97
#	29445		89.59	85.11	97.88
	29445		127.89	121.50	139.73
	29450		141.07	134.02	154.12
#	29450		99.09	94.14	108.26
#	29505		53.16	50.50	58.08
	29505		103.42	98.25	112.99
	29515		78.64	74.71	85.92
#	29515		48.61	46.18	53.11
	29520		33.06	31.41	36.12
#	29520		15.28	14.52	16.70
	29530		27.54	26.16	30.08
#	29530		15.28	14.52	16.70
	29540		27.07	25.72	29.58
#	29540		15.42	14.65	16.85
	29550		18.62	17.69	20.34
#	29550		9.73	9.24	10.63
	29580		60.01	57.01	65.56
#	29580		23.54	22.36	25.71
	29581		78.41	74.49	85.66
#	29581		22.94	21.79	25.06
	29584		69.41	65.94	75.83
#	29584		13.32	12.65	14.55
	29700		65.73	62.44	71.81
#	29700		29.87	28.38	32.64
	29705		66.85	63.51	73.04
#	29705		40.49	38.47	44.24
#	29710		72.29	68.68	78.98
	29710		131.13	124.57	143.26

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	29720		38.49	36.57	42.06
	29720		93.05	88.40	101.66
	29730		64.60	61.37	70.58
#	29730		38.55	36.62	42.11
#	29740		60.25	57.24	65.83
	29740		105.30	100.04	115.05
#	29750		67.31	63.94	73.53
	29750		113.59	107.91	124.10
	29800		496.53	471.70	542.46
	29804		530.62	504.09	579.70
	29805		437.84	415.95	478.34
	29806		957.75	909.86	1,046.34
	29807		936.45	889.63	1,023.07
	29819		537.83	510.94	587.58
	29820		490.64	466.11	536.03
	29821		545.12	517.86	595.54
	29822		503.73	478.54	550.32
	29823		546.76	519.42	597.33
	29824		624.62	593.39	682.40
	29825		541.04	513.99	591.09
	29826		148.22	140.81	161.93
	29827		962.32	914.20	1,051.33
	29828		830.32	788.80	907.12
	29830		428.66	407.23	468.31
	29834		457.40	434.53	499.71
	29835		475.53	451.75	519.51
	29836		535.42	508.65	584.95
	29837		495.38	470.61	541.20
	29838		546.01	518.71	596.52
	29840		429.66	408.18	469.41
	29843		457.70	434.82	500.04

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	29844		459.73	436.74	502.25
	29845		534.11	507.40	583.51
	29846		476.73	452.89	520.82
	29847		505.78	480.49	552.56
	29848		472.58	448.95	516.29
	29850		580.54	551.51	634.24
	29851		848.40	805.98	926.88
	29855		715.94	680.14	782.16
	29856		904.37	859.15	988.02
	29860		602.41	572.29	658.13
	29861		645.10	612.85	704.78
	29862		744.76	707.52	813.65
	29863		741.94	704.84	810.57
	29866		962.38	914.26	1,051.40
	29867		1,161.67	1,103.59	1,269.13
	29868		1,496.79	1,421.95	1,635.24
	29870		575.43	546.66	628.66
#	29870		389.09	369.64	425.09
	29871		479.65	455.67	524.02
	29873		504.99	479.74	551.70
	29874		495.07	470.32	540.87
	29875		463.06	439.91	505.90
	29876		602.31	572.19	658.02
	29877		574.13	545.42	627.23
	29879		610.68	580.15	667.17
	29880		520.84	494.80	569.02
	29881		503.35	478.18	549.91
	29882		629.86	598.37	688.13
	29883		772.13	733.52	843.55
	29884		573.46	544.79	626.51
	29885		698.13	663.22	762.70

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	29886		591.96	562.36	646.71
	29887		696.10	661.30	760.50
	29888		876.71	832.87	957.80
	29889		1,114.67	1,058.94	1,217.78
	29891		620.61	589.58	678.02
	29892		586.65	557.32	640.92
	29893		632.54	600.91	691.05
#	29893		405.45	385.18	442.96
	29894		465.44	442.17	508.50
	29895		425.27	404.01	464.61
	29897		455.87	433.08	498.04
	29898		513.86	488.17	561.40
	29899		908.69	863.26	992.75
	29900		478.92	454.97	523.22
	29901		509.11	483.65	556.20
	29902		538.02	511.12	587.79
	29904		590.09	560.59	644.68
	29905		470.05	446.55	513.53
	29906		613.34	582.67	670.07
	29907		805.42	765.15	879.92
	29914		902.01	856.91	985.45
	29915		919.19	873.23	1,004.21
	29916		917.58	871.70	1,002.46
	30000		245.69	233.41	268.42
#	30000		107.17	101.81	117.08
	30020		250.90	238.36	274.11
#	30020		108.09	102.69	118.09
#	30100		59.71	56.72	65.23
	30100		133.27	126.61	145.60
	30110		232.94	221.29	254.48
#	30110		116.48	110.66	127.26

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	30115		414.94	394.19	453.32
	30117		888.25	843.84	970.42
#	30117		358.67	340.74	391.85
	30118		613.95	583.25	670.74
	30120		496.75	471.91	542.70
#	30120		364.35	346.13	398.05
	30124		268.89	255.45	293.77
	30125		570.55	542.02	623.32
	30130		374.07	355.37	408.68
	30140		281.37	267.30	307.40
#	30140		152.34	144.72	166.43
	30150		695.71	660.92	760.06
	30160		706.85	671.51	772.24
#	30200		52.67	50.04	57.55
	30200		105.38	100.11	115.13
	30210		147.12	139.76	160.72
#	30210		92.87	88.23	101.46
	30220		280.72	266.68	306.68
#	30220		112.47	106.85	122.88
	30300		199.48	189.51	217.94
#	30300		110.29	104.78	120.50
	30310		182.44	173.32	199.32
	30320		433.79	412.10	473.92
	30400		1,142.61	1,085.48	1,248.30
	30410		1,300.95	1,235.90	1,421.29
	30420		1,270.38	1,206.86	1,387.89
	30430		1,009.68	959.20	1,103.08
	30435		1,237.20	1,175.34	1,351.64
	30450		1,587.18	1,507.82	1,733.99
	30460		747.21	709.85	816.33
	30462		1,425.46	1,354.19	1,557.32

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	30465		894.95	850.20	977.73
	30468		2,207.66	2,097.28	2,411.87
#	30468		144.49	137.27	157.86
	30469		2,140.76	2,033.72	2,338.78
#	30469		128.47	122.05	140.36
	30520		589.95	560.45	644.52
	30540		647.97	615.57	707.91
	30545		872.83	829.19	953.57
	30560		294.42	279.70	321.66
#	30560		133.22	126.56	145.54
	30580		599.85	569.86	655.34
#	30580		411.07	390.52	449.10
	30600		580.03	551.03	633.68
#	30600		377.45	358.58	412.37
	30620		590.60	561.07	645.23
	30630		586.30	556.99	640.54
	30801		205.14	194.88	224.11
#	30801		133.12	126.46	145.43
	30802		263.63	250.45	288.02
#	30802		176.28	167.47	192.59
#	30901		50.17	47.66	54.81
	30901		156.51	148.68	170.98
#	30903		70.46	66.94	76.98
	30903		250.36	237.84	273.52
	30905		371.30	352.74	405.65
#	30905		99.46	94.49	108.66
	30906		383.69	364.51	419.19
#	30906		119.51	113.53	130.56
	30915		525.11	498.85	573.68
	30920		755.10	717.35	824.95
	30930		104.95	99.70	114.66

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	31000		177.12	168.26	193.50
#	31000		98.36	93.44	107.46
	31002		160.50	152.48	175.35
	31020		407.68	387.30	445.40
#	31020		311.45	295.88	340.26
	31030		621.31	590.24	678.78
#	31030		457.96	435.06	500.32
	31032		532.07	505.47	581.29
	31040		700.48	665.46	765.28
	31050		458.60	435.67	501.02
	31051		611.17	580.61	667.70
	31070		423.40	402.23	462.56
	31075		724.51	688.28	791.52
	31080		950.96	903.41	1,038.92
	31081		1,017.38	966.51	1,111.49
	31084		1,051.91	999.31	1,149.21
	31085		1,082.64	1,028.51	1,182.79
	31086		1,025.12	973.86	1,119.94
	31087		974.70	925.97	1,064.87
	31090		971.33	922.76	1,061.17
	31200		553.77	526.08	604.99
	31201		684.37	650.15	747.67
	31205		808.50	768.08	883.29
	31225		1,551.03	1,473.48	1,694.50
	31230		1,720.21	1,634.20	1,879.33
#	31231		54.55	51.82	59.59
	31231		181.73	172.64	198.54
	31233		258.48	245.56	282.39
#	31233		115.97	110.17	126.70
	31235		294.90	280.16	322.18
#	31235		136.76	129.92	149.41

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	31237		254.66	241.93	278.22
#	31237		136.98	130.13	149.65
	31238		249.37	236.90	272.44
#	31238		143.02	135.87	156.25
	31239		514.37	488.65	561.95
	31240		135.45	128.68	147.98
	31241		373.37	354.70	407.91
	31242		2,208.52	2,098.09	2,412.80
#	31242		134.32	127.60	146.74
	31243		2,144.77	2,037.53	2,343.16
#	31243		134.32	127.60	146.74
	31253		420.53	399.50	459.43
	31254		417.06	396.21	455.64
#	31254		205.29	195.03	224.28
	31255		273.02	259.37	298.28
	31256		152.02	144.42	166.08
	31257		375.21	356.45	409.92
	31259		397.39	377.52	434.15
	31267		223.74	212.55	244.43
	31276		317.94	302.04	347.35
	31287		169.74	161.25	185.44
	31288		197.62	187.74	215.90
	31290		984.09	934.89	1,075.12
	31291		1,070.36	1,016.84	1,169.37
	31292		845.75	803.46	923.98
	31293		914.87	869.13	999.50
	31294		1,044.23	992.02	1,140.82
#	31295		134.32	127.60	146.74
	31295		1,457.97	1,385.07	1,592.83
#	31296		151.69	144.11	165.73
	31296		1,483.00	1,408.85	1,620.18

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	31297		122.96	116.81	134.33
	31297		1,445.07	1,372.82	1,578.74
#	31298		215.30	204.54	235.22
	31298		2,738.47	2,601.55	2,991.78
	31300		1,090.81	1,036.27	1,191.71
	31360		1,773.12	1,684.46	1,937.13
	31365		2,185.20	2,075.94	2,387.33
	31367		1,881.96	1,787.86	2,056.04
	31368		2,076.62	1,972.79	2,268.71
	31370		1,770.14	1,681.63	1,933.87
	31375		1,684.91	1,600.66	1,840.76
	31380		1,662.13	1,579.02	1,815.87
	31382		1,815.70	1,724.92	1,983.66
	31390		2,395.41	2,275.64	2,616.99
	31395		2,513.56	2,387.88	2,746.06
	31400		901.89	856.80	985.32
	31420		724.72	688.48	791.75
	31500		134.01	127.31	146.41
	31502		30.31	28.79	33.11
	31505		83.45	79.28	91.17
#	31505		43.30	41.14	47.31
	31510		204.71	194.47	223.64
#	31510		103.88	98.69	113.49
	31511		201.72	191.63	220.37
#	31511		115.30	109.54	125.97
	31512		206.90	196.56	226.04
#	31512		111.28	105.72	121.58
	31513		112.29	106.68	122.68
	31515		217.57	206.69	237.69
#	31515		100.19	95.18	109.46
	31520		133.80	127.11	146.18

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	31525		240.70	228.67	262.97
#	31525		136.50	129.68	149.13
	31526		134.13	127.42	146.53
	31527		165.58	157.30	180.90
	31528		123.90	117.71	135.37
	31529		136.95	130.10	149.62
	31530		172.09	163.49	188.01
	31531		180.54	171.51	197.24
	31535		160.90	152.86	175.79
	31536		177.93	169.03	194.38
	31540		204.43	194.21	223.34
	31541		222.55	211.42	243.13
	31545		304.88	289.64	333.09
	31546		460.27	437.26	502.85
	31551		1,341.70	1,274.62	1,465.81
	31552		1,297.77	1,232.88	1,417.81
	31553		1,461.32	1,388.25	1,596.49
	31554		1,461.93	1,388.83	1,597.15
	31560		263.35	250.18	287.71
	31561		287.40	273.03	313.98
	31570		331.30	314.74	361.95
#	31570		195.54	185.76	213.62
	31571		210.47	199.95	229.94
	31572		481.19	457.13	525.70
#	31572		153.88	146.19	168.12
	31573		273.10	259.45	298.37
#	31573		127.83	121.44	139.66
	31574		837.00	795.15	914.42
#	31574		128.14	121.73	139.99
#	31575		59.71	56.72	65.23
	31575		120.39	114.37	131.53

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	31576		253.66	240.98	277.13
#	31576		102.57	97.44	112.06
	31577		264.62	251.39	289.10
#	31577		117.82	111.93	128.72
	31578		288.73	274.29	315.43
#	31578		128.14	121.73	139.99
	31579		186.06	176.76	203.27
#	31579		102.40	97.28	111.87
	31580		1,126.25	1,069.94	1,230.43
	31584		1,230.32	1,168.80	1,344.12
	31587		1,059.85	1,006.86	1,157.89
	31590		839.85	797.86	917.54
	31591		969.87	921.38	1,059.59
	31592		1,501.88	1,426.79	1,640.81
	31600		274.28	260.57	299.66
	31601		379.20	360.24	414.28
	31603		280.51	266.48	306.45
	31605		305.97	290.67	334.27
	31610		837.87	795.98	915.38
	31611		473.90	450.21	517.74
	31612		90.65	86.12	99.04
#	31612		41.92	39.82	45.79
	31613		382.32	363.20	417.68
	31614		622.82	591.68	680.43
	31615		165.79	157.50	181.13
#	31615		100.51	95.48	109.80
	31622		268.36	254.94	293.18
#	31622		119.72	113.73	130.79
	31623		287.19	272.83	313.75
#	31623		118.63	112.70	129.61
	31624		271.86	258.27	297.01

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	31624		120.16	114.15	131.27
	31625		363.47	345.30	397.10
#	31625		140.05	133.05	153.01
	31626		812.06	771.46	887.18
#	31626		177.67	168.79	194.11
#	31627		85.30	81.04	93.20
	31627		1,067.23	1,013.87	1,165.95
	31628		387.31	367.94	423.13
#	31628		158.07	150.17	172.70
	31629		469.33	445.86	512.74
#	31629		167.76	159.37	183.28
	31630		176.15	167.34	192.44
	31631		199.16	189.20	217.58
	31632		66.63	63.30	72.80
#	31632		43.04	40.89	47.02
	31633		83.71	79.52	91.45
#	31633		56.12	53.31	61.31
#	31634		169.60	161.12	185.29
	31634		1,487.12	1,412.76	1,624.67
	31635		309.61	294.13	338.25
#	31635		157.60	149.72	172.18
	31636		194.71	184.97	212.72
	31637		67.19	63.83	73.40
	31638		218.43	207.51	238.64
	31640		217.36	206.49	237.46
	31641		223.78	212.59	244.48
	31643		151.71	144.12	165.74
	31645		293.18	278.52	320.30
#	31645		132.59	125.96	144.85
	31646		128.17	121.76	140.02
	31647		184.37	175.15	201.42

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	31648		176.36	167.54	192.67
	31649		70.99	67.44	77.56
#	31649		61.80	58.71	67.52
	31651		76.99	73.14	84.11
#	31651		67.19	63.83	73.40
#	31652		197.56	187.68	215.83
	31652		1,259.48	1,196.51	1,375.99
#	31653		218.59	207.66	238.81
	31653		1,301.35	1,236.28	1,421.72
#	31654		59.80	56.81	65.33
	31654		125.39	119.12	136.99
	31660		169.54	161.06	185.22
	31661		178.66	169.73	195.19
	31717		288.69	274.26	315.40
#	31717		95.92	91.12	104.79
	31720		45.34	43.07	49.53
	31725		70.56	67.03	77.08
#	31730		134.39	127.67	146.82
	31730		1,090.27	1,035.76	1,191.12
	31750		1,205.09	1,144.84	1,316.57
	31755		1,530.24	1,453.73	1,671.79
	31760		1,314.20	1,248.49	1,435.76
	31766		1,677.65	1,593.77	1,832.84
	31770		1,258.74	1,195.80	1,375.17
	31775		1,327.14	1,260.78	1,449.90
	31780		1,022.39	971.27	1,116.96
	31781		1,220.56	1,159.53	1,333.46
	31785		914.27	868.56	998.84
	31786		1,366.17	1,297.86	1,492.54
	31800		623.28	592.12	680.94
	31805		791.45	751.88	864.66

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	31820		427.34	405.97	466.87
#	31820		293.72	279.03	320.88
	31825		588.20	558.79	642.61
#	31825		422.40	401.28	461.47
	31830		467.14	443.78	510.35
#	31830		321.57	305.49	351.31
	32035		719.66	683.68	786.23
	32036		767.62	729.24	838.63
	32096		764.51	726.28	835.22
	32097		769.65	731.17	840.85
	32098		720.93	684.88	787.61
	32100		776.32	737.50	848.13
	32110		1,396.96	1,327.11	1,526.18
	32120		845.33	803.06	923.52
	32124		896.12	851.31	979.01
	32140		953.52	905.84	1,041.72
	32141		1,440.47	1,368.45	1,573.72
	32150		972.68	924.05	1,062.66
	32151		967.10	918.75	1,056.56
	32160		768.33	729.91	839.40
	32200		1,103.87	1,048.68	1,205.98
	32215		779.26	740.30	851.35
	32220		1,534.39	1,457.67	1,676.32
	32225		955.85	908.06	1,044.27
	32310		886.84	842.50	968.88
	32320		1,531.84	1,455.25	1,673.54
#	32400		72.83	69.19	79.57
	32400		158.95	151.00	173.65
	32408		749.50	712.03	818.83
#	32408		131.35	124.78	143.50
	32440		1,493.05	1,418.40	1,631.16

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	32442		2,854.87	2,712.13	3,118.95
	32445		3,318.86	3,152.92	3,625.86
	32480		1,405.98	1,335.68	1,536.03
	32482		1,506.74	1,431.40	1,646.11
	32484		1,358.82	1,290.88	1,484.51
	32486		2,195.25	2,085.49	2,398.31
	32488		2,253.64	2,140.96	2,462.10
	32491		1,408.29	1,337.88	1,538.56
	32501		224.23	213.02	244.97
	32503		1,700.52	1,615.49	1,857.81
	32504		1,930.53	1,834.00	2,109.10
	32505		893.52	848.84	976.17
	32506		143.41	136.24	156.68
	32507		143.41	136.24	156.68
	32540		1,639.38	1,557.41	1,791.02
	32550		733.84	697.15	801.72
#	32550		181.27	172.21	198.04
	32551		143.80	136.61	157.10
	32552		184.82	175.58	201.92
#	32552		145.28	138.02	158.72
	32553		463.68	440.50	506.58
#	32553		152.30	144.69	166.39
#	32554		79.33	75.36	86.66
	32554		245.74	233.45	268.47
	32555		293.37	278.70	320.51
#	32555		94.17	89.46	102.88
	32556		781.50	742.43	853.79
#	32556		112.48	106.86	122.89
	32557		605.82	575.53	661.86
#	32557		129.88	123.39	141.90
#	32560		68.87	65.43	75.24

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	32560		259.50	246.53	283.51
#	32561		60.22	57.21	65.79
	32561		97.92	93.02	106.97
	32562		88.76	84.32	96.97
#	32562		53.82	51.13	58.80
	32601		289.64	275.16	316.43
	32604		449.70	427.22	491.30
	32606		431.95	410.35	471.90
	32607		290.70	276.17	317.60
	32608		355.53	337.75	388.41
	32609		239.07	227.12	261.19
	32650		646.10	613.80	705.87
	32651		1,040.51	988.48	1,136.75
	32652		1,574.91	1,496.16	1,720.58
	32653		1,005.82	955.53	1,098.86
	32654		1,128.41	1,071.99	1,232.79
	32655		915.04	869.29	999.68
	32656		776.25	737.44	848.06
	32658		692.23	657.62	756.26
	32659		712.47	676.85	778.38
	32661		769.55	731.07	840.73
	32662		859.01	816.06	938.47
	32663		1,323.82	1,257.63	1,446.27
	32664		815.04	774.29	890.43
	32665		1,170.63	1,112.10	1,278.92
	32666		836.96	795.11	914.38
	32667		143.79	136.60	157.09
	32668		144.10	136.90	157.44
	32669		1,271.89	1,208.30	1,389.55
	32670		1,507.90	1,432.51	1,647.39
	32671		1,670.96	1,587.41	1,825.52

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	32672		1,434.44	1,362.72	1,567.13
	32673		1,153.67	1,095.99	1,260.39
	32674		198.42	188.50	216.78
	32701		189.75	180.26	207.30
	32800		913.79	868.10	998.32
	32810		870.85	827.31	951.41
	32815		2,644.02	2,511.82	2,888.59
	32820		1,309.57	1,244.09	1,430.70
	32851		3,072.91	2,919.26	3,357.15
	32852		3,351.02	3,183.47	3,660.99
	32853		4,279.34	4,065.37	4,675.18
	32854		4,539.96	4,312.96	4,959.90
	32900		1,295.63	1,230.85	1,415.48
	32905		1,270.85	1,207.31	1,388.41
	32906		1,559.27	1,481.31	1,703.51
	32940		1,176.86	1,118.02	1,285.72
#	32960		81.71	77.62	89.26
	32960		129.52	123.04	141.50
#	32994		382.33	363.21	417.69
	32994		4,202.80	3,992.66	4,591.56
	32997		300.62	285.59	328.43
#	32998		382.47	363.35	417.85
	32998		2,714.72	2,578.98	2,965.83
	33016		206.96	196.61	226.10
	33017		217.13	206.27	237.21
	33018		255.37	242.60	278.99
	33019		180.48	171.46	197.18
	33020		784.45	745.23	857.01
	33025		739.78	702.79	808.21
	33030		1,888.57	1,794.14	2,063.26
	33031		2,328.12	2,211.71	2,543.47

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	33050		967.95	919.55	1,057.48
	33120		1,967.19	1,868.83	2,149.15
	33130		1,311.63	1,246.05	1,432.96
	33140		1,480.46	1,406.44	1,617.41
	33141		121.45	115.38	132.69
	33202		740.63	703.60	809.14
	33203		772.29	733.68	843.73
	33206		401.14	381.08	438.24
	33207		422.51	401.38	461.59
	33208		456.74	433.90	498.99
	33210		142.41	135.29	155.58
	33211		147.42	140.05	161.06
	33212		290.82	276.28	317.72
	33213		302.47	287.35	330.45
	33214		424.45	403.23	463.71
	33215		274.82	261.08	300.24
	33216		329.38	312.91	359.85
	33217		328.37	311.95	358.74
	33218		345.85	328.56	377.84
	33220		339.87	322.88	371.31
	33221		317.53	301.65	346.90
	33222		306.65	291.32	335.02
	33223		362.43	344.31	395.96
	33224		445.96	423.66	487.21
	33225		399.50	379.53	436.46
	33226		427.58	406.20	467.13
	33227		300.78	285.74	328.60
	33228		314.30	298.59	343.38
	33229		328.63	312.20	359.03
	33230		333.06	316.41	363.87
	33231		354.34	336.62	387.11

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	33233		209.07	198.62	228.41
	33234		428.39	406.97	468.02
	33235		565.71	537.42	618.03
	33236		771.85	733.26	843.25
	33237		824.63	783.40	900.91
	33238		929.92	883.42	1,015.93
	33240		320.15	304.14	349.76
	33241		195.15	185.39	213.20
	33243		1,303.33	1,238.16	1,423.88
	33244		765.54	727.26	836.35
	33249		799.52	759.54	873.47
	33250		1,394.67	1,324.94	1,523.68
	33251		1,540.54	1,463.51	1,683.04
	33254		1,295.36	1,230.59	1,415.18
	33255		1,554.40	1,476.68	1,698.18
	33256		1,834.87	1,743.13	2,004.60
	33257		566.54	538.21	618.94
	33258		633.80	602.11	692.43
	33259		817.94	777.04	893.60
	33261		1,538.61	1,461.68	1,680.93
	33262		328.35	311.93	358.72
	33263		341.60	324.52	373.20
	33264		354.75	337.01	387.56
	33265		1,296.35	1,231.53	1,416.26
	33266		1,749.25	1,661.79	1,911.06
	33267		991.96	942.36	1,083.71
	33268		118.97	113.02	129.97
	33269		796.53	756.70	870.21
	33270		493.34	468.67	538.97
	33271		406.71	386.37	444.33
	33272		309.05	293.60	337.64

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	33273		358.85	340.91	392.05
	33274		419.99	398.99	458.84
	33275		449.34	426.87	490.90
	33276		506.03	480.73	552.84
	33277		259.11	246.15	283.07
	33278		498.15	473.24	544.23
	33279		307.95	292.55	336.43
	33280		189.94	180.44	207.51
	33281		338.00	321.10	369.27
#	33285		76.53	72.70	83.61
	33285		3,688.29	3,503.88	4,029.46
#	33286		75.52	71.74	82.50
	33286		125.17	118.91	136.75
	33287		339.85	322.86	371.29
	33288		456.22	433.41	498.42
	33289		286.52	272.19	313.02
	33300		2,288.59	2,174.16	2,500.28
	33305		3,811.35	3,620.78	4,163.90
	33310		1,129.14	1,072.68	1,233.58
	33315		1,796.77	1,706.93	1,962.97
	33320		1,019.30	968.34	1,113.59
	33321		1,144.16	1,086.95	1,249.99
	33322		1,331.37	1,264.80	1,454.52
	33330		1,365.88	1,297.59	1,492.23
	33335		1,777.12	1,688.26	1,941.50
	33340		613.80	583.11	670.58
	33361		1,092.33	1,037.71	1,193.37
	33362		1,190.27	1,130.76	1,300.37
	33363		1,236.62	1,174.79	1,351.01
	33364		1,278.56	1,214.63	1,396.82
	33365		1,290.45	1,225.93	1,409.82

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	33366		1,418.35	1,347.43	1,549.54
	33367		566.25	537.94	618.63
	33368		686.17	651.86	749.64
	33369		906.73	861.39	990.60
	33370		117.60	111.72	128.48
	33390		1,786.06	1,696.76	1,951.27
	33391		2,133.12	2,026.46	2,330.43
	33404		1,669.93	1,586.43	1,824.39
	33405		2,140.71	2,033.67	2,338.72
	33406		2,702.54	2,567.41	2,952.52
	33410		2,401.22	2,281.16	2,623.33
	33411		3,145.67	2,988.39	3,436.65
	33412		2,959.64	2,811.66	3,233.41
	33413		3,038.49	2,886.57	3,319.56
	33414		2,014.53	1,913.80	2,200.87
	33415		1,918.57	1,822.64	2,096.04
	33416		1,913.05	1,817.40	2,090.01
	33417		1,585.79	1,506.50	1,732.48
	33418		1,596.22	1,516.41	1,743.87
	33419		373.50	354.83	408.05
	33420		1,389.87	1,320.38	1,518.44
	33422		1,592.40	1,512.78	1,739.70
	33425		2,568.79	2,440.35	2,806.40
	33426		2,246.70	2,134.37	2,454.53
	33427		2,289.70	2,175.22	2,501.50
	33430		2,640.56	2,508.53	2,884.81
	33440		3,197.72	3,037.83	3,493.50
	33460		2,262.29	2,149.18	2,471.56
	33463		2,890.05	2,745.55	3,157.38
	33464		2,288.27	2,173.86	2,499.94
	33465		2,584.62	2,455.39	2,823.70

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	33468		2,293.43	2,178.76	2,505.57
	33474		2,052.39	1,949.77	2,242.24
	33475		2,163.31	2,055.14	2,363.41
	33476		1,452.18	1,379.57	1,586.51
	33477		1,135.29	1,078.53	1,240.31
	33478		1,497.59	1,422.71	1,636.12
	33496		1,591.30	1,511.74	1,738.50
	33500		1,492.23	1,417.62	1,630.26
	33501		1,075.07	1,021.32	1,174.52
	33502		1,225.20	1,163.94	1,338.53
	33503		1,276.45	1,212.63	1,394.52
	33504		1,399.46	1,329.49	1,528.91
	33505		1,919.39	1,823.42	2,096.93
	33506		1,919.25	1,823.29	2,096.78
	33507		1,616.76	1,535.92	1,766.31
	33508		14.56	13.83	15.90
	33509		160.35	152.33	175.18
	33510		1,825.36	1,734.09	1,994.20
	33511		2,006.87	1,906.53	2,192.51
	33512		2,273.55	2,159.87	2,483.85
	33513		2,320.95	2,204.90	2,535.64
	33514		2,468.73	2,345.29	2,697.08
	33516		2,556.65	2,428.82	2,793.14
	33517		172.89	164.25	188.89
	33518		379.36	360.39	414.45
	33519		501.42	476.35	547.80
	33521		602.12	572.01	657.81
	33522		675.34	641.57	737.81
	33523		767.14	728.78	838.10
	33530		484.35	460.13	529.15
	33533		1,768.01	1,679.61	1,931.55

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	33534		2,074.46	1,970.74	2,266.35
	33535		2,302.33	2,187.21	2,515.29
	33536		2,480.14	2,356.13	2,709.55
	33542		2,474.69	2,350.96	2,703.60
	33545		2,891.00	2,746.45	3,158.42
	33548		2,792.88	2,653.24	3,051.23
	33572		212.56	201.93	232.22
	33600		1,631.84	1,550.25	1,782.79
	33602		1,586.12	1,506.81	1,732.83
	33606		1,684.99	1,600.74	1,840.85
	33608		1,707.55	1,622.17	1,865.50
	33610		1,684.50	1,600.28	1,840.32
	33611		1,831.24	1,739.68	2,000.63
	33612		1,879.81	1,785.82	2,053.69
	33615		1,884.21	1,790.00	2,058.50
	33617		2,037.96	1,936.06	2,226.47
	33619		2,589.96	2,460.46	2,829.53
	33620		1,549.62	1,472.14	1,692.96
	33621		887.02	842.67	969.07
	33622		3,194.96	3,035.21	3,490.49
	33641		1,544.63	1,467.40	1,687.51
	33645		1,629.74	1,548.25	1,780.49
	33647		1,708.12	1,622.71	1,866.12
	33660		1,652.47	1,569.85	1,805.33
	33665		1,797.39	1,707.52	1,963.65
	33670		1,838.28	1,746.37	2,008.33
	33675		1,850.51	1,757.98	2,021.68
	33676		1,898.40	1,803.48	2,074.00
	33677		1,969.56	1,871.08	2,151.74
	33681		1,751.65	1,664.07	1,913.68
	33684		1,774.31	1,685.59	1,938.43

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	33688		1,759.80	1,671.81	1,922.58
	33690		1,154.54	1,096.81	1,261.33
	33692		1,827.32	1,735.95	1,996.34
	33694		1,831.24	1,739.68	2,000.63
	33697		1,927.29	1,830.93	2,105.57
	33702		1,468.96	1,395.51	1,604.84
	33710		1,923.88	1,827.69	2,101.84
	33720		1,470.31	1,396.79	1,606.31
	33724		1,450.87	1,378.33	1,585.08
	33726		1,906.59	1,811.26	2,082.95
	33730		1,891.27	1,796.71	2,066.22
	33732		1,567.39	1,489.02	1,712.37
	33735		1,243.43	1,181.26	1,358.45
	33736		1,345.23	1,277.97	1,469.67
	33741		659.59	626.61	720.60
	33745		943.48	896.31	1,030.76
	33746		376.75	357.91	411.60
	33750		1,197.79	1,137.90	1,308.59
	33755		1,262.76	1,199.62	1,379.56
	33762		1,216.48	1,155.66	1,329.01
	33764		1,262.76	1,199.62	1,379.56
	33766		1,262.58	1,199.45	1,379.37
	33767		1,345.72	1,278.43	1,470.19
	33768		383.30	364.14	418.76
	33770		1,978.68	1,879.75	2,161.71
	33771		2,027.77	1,926.38	2,215.34
	33774		1,709.99	1,624.49	1,868.16
	33775		1,755.60	1,667.82	1,917.99
	33776		1,858.17	1,765.26	2,030.05
	33777		1,779.99	1,690.99	1,944.64
	33778		2,208.14	2,097.73	2,412.39

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	33779		2,166.56	2,058.23	2,366.96
	33780		2,210.07	2,099.57	2,414.51
	33781		2,150.80	2,043.26	2,349.75
	33782		3,007.74	2,857.35	3,285.95
	33783		3,246.87	3,084.53	3,547.21
	33786		2,128.88	2,022.44	2,325.81
	33788		1,446.38	1,374.06	1,580.17
	33800		938.99	892.04	1,025.85
	33802		1,044.26	992.05	1,140.86
	33803		1,090.81	1,036.27	1,191.71
	33814		1,453.10	1,380.45	1,587.52
	33820		926.09	879.79	1,011.76
	33822		974.58	925.85	1,064.73
	33824		1,131.50	1,074.93	1,236.17
	33840		1,186.36	1,127.04	1,296.10
	33845		1,277.99	1,214.09	1,396.20
	33851		1,217.22	1,156.36	1,329.81
	33852		1,333.99	1,267.29	1,457.38
	33853		1,737.72	1,650.83	1,898.45
	33858		3,166.86	3,008.52	3,459.80
	33859		2,282.66	2,168.53	2,493.81
	33863		2,936.22	2,789.41	3,207.82
	33864		2,997.40	2,847.53	3,274.66
	33866		849.22	806.76	927.77
	33871		3,035.87	2,884.08	3,316.69
	33875		2,561.46	2,433.39	2,798.40
	33877		3,341.12	3,174.06	3,650.17
	33880		1,305.74	1,240.45	1,426.52
	33881		1,095.71	1,040.92	1,197.06
	33882		1,778.28	1,689.37	1,942.78
	33883		973.67	924.99	1,063.74

**WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026**

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	33886		973.19	924.53	1,063.21
	33894		861.03	817.98	940.68
	33895		685.37	651.10	748.77
	33897		509.37	483.90	556.49
	33900		519.54	493.56	567.59
	33901		683.34	649.17	746.55
	33902		659.59	626.61	720.60
	33903		778.33	739.41	850.32
	33904		261.15	248.09	285.30
	33910		2,471.37	2,347.80	2,699.97
	33915		1,309.17	1,243.71	1,430.27
	33916		3,894.67	3,699.94	4,254.93
	33917		1,391.99	1,322.39	1,520.75
	33920		1,702.33	1,617.21	1,859.79
	33922		1,324.87	1,258.63	1,447.42
	33924		262.48	249.36	286.76
	33925		1,611.66	1,531.08	1,760.74
	33926		2,255.95	2,143.15	2,464.62
	33927		2,349.60	2,232.12	2,566.94
	33935		4,643.18	4,411.02	5,072.67
	33945		4,555.71	4,327.92	4,977.11
	33946		282.74	268.60	308.89
	33947		311.96	296.36	340.81
	33948		218.54	207.61	238.75
	33949		210.40	199.88	229.86
	33951		394.10	374.40	430.56
	33952		389.47	370.00	425.50
	33953		438.80	416.86	479.39
	33954		437.43	415.56	477.89
	33955		768.06	729.66	839.11
	33956		766.67	728.34	837.59

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	33957		171.93	163.33	187.83
	33958		171.93	163.33	187.83
	33959		218.71	207.77	238.94
	33962		218.71	207.77	238.94
	33963		434.07	412.37	474.23
	33964		457.42	434.55	499.73
	33965		171.93	163.33	187.83
	33966		218.27	207.36	238.46
	33967		227.94	216.54	249.02
	33968		30.10	28.60	32.89
	33969		253.56	240.88	277.01
	33970		318.96	303.01	348.46
	33971		670.23	636.72	732.23
	33973		465.02	441.77	508.04
	33974		868.05	824.65	948.35
	33975		1,195.77	1,135.98	1,306.38
	33976		1,467.70	1,394.32	1,603.47
	33977		1,045.35	993.08	1,142.04
	33978		1,248.41	1,185.99	1,363.89
	33979		1,794.86	1,705.12	1,960.89
	33980		1,655.29	1,572.53	1,808.41
	33981		768.45	730.03	839.53
	33982		1,806.37	1,716.05	1,973.46
	33983		2,126.86	2,020.52	2,323.60
	33984		262.24	249.13	286.50
	33985		476.79	452.95	520.89
	33986		483.89	459.70	528.66
	33987		193.08	183.43	210.94
	33988		720.20	684.19	786.82
	33989		457.42	434.55	499.73
	33990		317.47	301.60	346.84

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	33991		421.67	400.59	460.68
	33992		167.45	159.08	182.94
	33993		143.58	136.40	156.86
	33995		316.95	301.10	346.27
	33997		141.52	134.44	154.61
	34001		849.42	806.95	927.99
	34051		962.80	914.66	1,051.86
	34101		549.79	522.30	600.65
	34111		549.95	522.45	600.82
	34151		1,282.16	1,218.05	1,400.76
	34201		941.31	894.24	1,028.38
	34203		874.35	830.63	955.22
	34401		1,241.69	1,179.61	1,356.55
	34421		645.06	612.81	704.73
	34451		1,331.38	1,264.81	1,454.53
	34471		1,000.72	950.68	1,093.28
	34490		535.02	508.27	584.51
	34501		831.36	789.79	908.26
	34502		1,426.22	1,354.91	1,558.15
	34510		947.32	899.95	1,034.94
	34520		917.89	872.00	1,002.80
	34530		873.16	829.50	953.93
	34701		1,133.35	1,076.68	1,238.18
	34702		1,661.12	1,578.06	1,814.77
	34703		1,258.36	1,195.44	1,374.76
	34704		2,062.64	1,959.51	2,253.44
	34705		1,398.01	1,328.11	1,527.33
	34706		2,090.22	1,985.71	2,283.57
	34707		1,066.96	1,013.61	1,165.65
	34708		1,683.42	1,599.25	1,839.14
	34709		294.83	280.09	322.10

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	34710		732.09	695.49	799.81
	34711		270.09	256.59	295.08
	34712		600.17	570.16	655.68
	34713		112.61	106.98	123.03
	34714		249.18	236.72	272.23
	34715		275.14	261.38	300.59
	34716		343.47	326.30	375.25
	34717		405.75	385.46	443.28
	34718		1,131.90	1,075.31	1,236.61
	34808		185.93	176.63	203.12
	34812		189.09	179.64	206.59
	34813		216.71	205.87	236.75
	34820		311.76	296.17	340.60
	34830		1,633.27	1,551.61	1,784.35
	34831		1,786.03	1,696.73	1,951.24
	34832		1,755.44	1,667.67	1,917.82
	34833		363.82	345.63	397.47
	34834		119.21	113.25	130.24
	35001		1,020.15	969.14	1,114.51
	35002		1,054.74	1,002.00	1,152.30
	35005		923.64	877.46	1,009.08
	35011		925.73	879.44	1,011.36
	35013		1,098.26	1,043.35	1,199.85
	35021		1,209.98	1,149.48	1,321.90
	35022		1,379.12	1,310.16	1,506.68
	35045		882.46	838.34	964.09
	35081		1,599.96	1,519.96	1,747.95
	35082		1,989.41	1,889.94	2,173.43
	35091		1,635.78	1,553.99	1,787.09
	35092		2,339.69	2,222.71	2,556.12
	35102		1,730.34	1,643.82	1,890.39

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	35103		2,007.36	1,906.99	2,193.04
	35111		1,231.12	1,169.56	1,344.99
	35112		1,514.81	1,439.07	1,654.93
	35121		1,465.24	1,391.98	1,600.78
	35122		1,751.28	1,663.72	1,913.28
	35131		1,278.13	1,214.22	1,396.35
	35132		1,514.81	1,439.07	1,654.93
	35141		1,006.03	955.73	1,099.09
	35142		1,213.06	1,152.41	1,325.27
	35151		1,140.68	1,083.65	1,246.20
	35152		1,294.70	1,229.97	1,414.47
	35180		728.17	691.76	795.52
	35182		1,695.92	1,611.12	1,852.79
	35184		894.84	850.10	977.62
	35188		1,264.05	1,200.85	1,380.98
	35189		1,398.74	1,328.80	1,528.12
	35190		691.91	657.31	755.91
	35201		853.35	810.68	932.28
	35206		726.52	690.19	793.72
	35207		673.14	639.48	735.40
	35211		1,324.48	1,258.26	1,447.00
	35216		1,916.84	1,821.00	2,094.15
	35221		1,351.61	1,284.03	1,476.63
	35226		764.92	726.67	835.67
	35231		1,083.45	1,029.28	1,183.67
	35236		923.55	877.37	1,008.98
	35241		1,373.34	1,304.67	1,500.37
	35246		1,489.80	1,415.31	1,627.61
	35251		1,584.20	1,504.99	1,730.74
	35256		938.10	891.20	1,024.88
	35261		911.78	866.19	996.12

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	35266		796.45	756.63	870.12
	35271		1,324.87	1,258.63	1,447.42
	35276		1,396.77	1,326.93	1,525.97
	35281		1,502.94	1,427.79	1,641.96
	35286		852.14	809.53	930.96
	35301		1,040.28	988.27	1,136.51
	35302		1,028.14	976.73	1,123.24
	35303		1,131.39	1,074.82	1,236.04
	35304		1,175.11	1,116.35	1,283.80
	35305		1,119.82	1,063.83	1,223.40
	35306		412.39	391.77	450.54
	35311		1,471.24	1,397.68	1,607.33
	35321		835.17	793.41	912.42
	35331		1,295.09	1,230.34	1,414.89
	35341		1,262.75	1,199.61	1,379.55
	35351		1,187.99	1,128.59	1,297.88
	35355		947.95	900.55	1,035.63
	35361		1,410.78	1,340.24	1,541.28
	35363		1,504.92	1,429.67	1,644.12
	35371		749.99	712.49	819.36
	35372		898.87	853.93	982.02
	35390		146.29	138.98	159.83
	35400		134.13	127.42	146.53
	35500		293.05	278.40	320.16
	35501		1,353.07	1,285.42	1,478.23
	35506		1,181.34	1,122.27	1,290.61
	35508		1,232.62	1,170.99	1,346.64
	35509		1,309.50	1,244.03	1,430.63
	35510		1,139.90	1,082.91	1,245.35
	35511		1,038.98	987.03	1,135.08
	35512		1,117.99	1,062.09	1,221.40

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	35515		1,232.62	1,170.99	1,346.64
	35516		1,131.05	1,074.50	1,235.68
	35518		1,058.12	1,005.21	1,155.99
	35521		1,139.04	1,082.09	1,244.40
	35522		1,084.40	1,030.18	1,184.71
	35523		1,139.96	1,082.96	1,245.40
	35525		1,019.41	968.44	1,113.71
	35526		1,643.21	1,561.05	1,795.21
	35531		1,806.49	1,716.17	1,973.60
	35533		1,396.04	1,326.24	1,525.18
	35535		1,763.29	1,675.13	1,926.40
	35536		1,565.80	1,487.51	1,710.64
	35537		1,930.93	1,834.38	2,109.54
	35538		2,162.73	2,054.59	2,362.78
	35539		2,030.16	1,928.65	2,217.95
	35540		2,263.61	2,150.43	2,472.99
	35556		1,282.01	1,217.91	1,400.60
	35558		1,119.31	1,063.34	1,222.84
	35560		1,579.94	1,500.94	1,726.08
	35563		1,226.65	1,165.32	1,340.12
	35565		1,182.54	1,123.41	1,291.92
	35566		1,528.44	1,452.02	1,669.82
	35570		1,365.96	1,297.66	1,492.31
	35571		1,220.30	1,159.29	1,333.18
	35572		313.22	297.56	342.19
	35583		1,323.61	1,257.43	1,446.04
	35585		1,534.27	1,457.56	1,676.19
	35587		1,234.45	1,172.73	1,348.64
	35600		171.53	162.95	187.39
	35601		1,290.95	1,226.40	1,410.36
	35602		1,172.55	1,113.92	1,281.01

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	35606		1,081.37	1,027.30	1,181.40
	35612		969.30	920.84	1,058.97
	35616		1,021.51	970.43	1,115.99
	35621		1,006.40	956.08	1,099.49
	35623		1,217.73	1,156.84	1,330.37
	35626		1,493.28	1,418.62	1,631.41
	35631		1,703.37	1,618.20	1,860.93
	35632		1,673.60	1,589.92	1,828.41
	35633		1,835.55	1,743.77	2,005.34
	35634		1,638.00	1,556.10	1,789.52
	35636		1,478.23	1,404.32	1,614.97
	35637		1,537.32	1,460.45	1,679.52
	35638		1,606.54	1,526.21	1,755.14
	35642		918.39	872.47	1,003.34
	35645		878.98	835.03	960.28
	35646		1,569.05	1,490.60	1,714.19
	35647		1,385.49	1,316.22	1,513.65
	35650		948.25	900.84	1,035.97
	35654		1,256.65	1,193.82	1,372.89
	35656		986.88	937.54	1,078.17
	35661		995.82	946.03	1,087.93
	35663		1,129.82	1,073.33	1,234.33
	35665		1,081.84	1,027.75	1,181.91
	35666		1,181.50	1,122.43	1,290.79
	35671		1,040.48	988.46	1,136.73
	35681		73.35	69.68	80.13
	35682		322.69	306.56	352.54
	35683		378.13	359.22	413.10
	35685		182.86	173.72	199.78
	35686		148.85	141.41	162.62
	35691		877.55	833.67	958.72

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	35693		777.42	738.55	849.33
	35694		916.57	870.74	1,001.35
	35695		950.74	903.20	1,038.68
	35697		134.91	128.16	147.38
	35700		139.76	132.77	152.69
	35701		382.60	363.47	417.99
	35702		373.64	354.96	408.20
	35703		382.57	363.44	417.96
	35800		657.95	625.05	718.81
	35820		1,885.54	1,791.26	2,059.95
	35840		1,126.14	1,069.83	1,230.30
	35860		781.81	742.72	854.13
	35870		1,156.07	1,098.27	1,263.01
	35875		543.69	516.51	593.99
	35876		867.91	824.51	948.19
	35879		852.58	809.95	931.44
	35881		947.13	899.77	1,034.74
	35883		1,101.72	1,046.63	1,203.62
	35884		1,149.11	1,091.65	1,255.40
	35901		441.64	419.56	482.49
	35903		519.65	493.67	567.72
	35905		1,556.55	1,478.72	1,700.53
	35907		1,754.21	1,666.50	1,916.48
	36002		146.58	139.25	160.14
#	36002		92.03	87.43	100.54
#	36005		42.18	40.07	46.08
	36005		228.21	216.80	249.32
	36010		479.32	455.35	523.65
#	36010		96.54	91.71	105.47
	36011		730.30	693.79	797.86
#	36011		138.20	131.29	150.98

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	36012		756.14	718.33	826.08
#	36012		155.46	147.69	169.84
	36013		721.40	685.33	788.13
#	36013		113.06	107.41	123.52
	36014		701.01	665.96	765.85
#	36014		131.90	125.31	144.11
	36015		742.33	705.21	810.99
#	36015		150.23	142.72	164.13
	36100		487.16	462.80	532.22
#	36100		136.56	129.73	149.19
#	36140		80.03	76.03	87.43
	36140		466.19	442.88	509.31
	36160		510.26	484.75	557.46
#	36160		107.87	102.48	117.85
	36200		532.16	505.55	581.38
#	36200		125.16	118.90	136.74
#	36215		188.92	179.47	206.39
	36215		992.80	943.16	1,084.63
#	36216		246.62	234.29	269.43
	36216		1,014.64	963.91	1,108.50
#	36217		305.74	290.45	334.02
	36217		1,842.08	1,749.98	2,012.48
#	36218		46.98	44.63	51.32
	36218		215.24	204.48	235.15
	36221		892.04	847.44	974.56
#	36221		181.03	171.98	197.78
#	36222		256.23	243.42	279.93
	36222		1,180.24	1,121.23	1,289.41
#	36223		301.54	286.46	329.43
	36223		1,786.39	1,697.07	1,951.63
#	36224		336.63	319.80	367.77

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	36224		2,188.63	2,079.20	2,391.08
#	36225		298.64	283.71	326.27
	36225		1,673.16	1,589.50	1,827.93
#	36226		333.89	317.20	364.78
	36226		2,129.20	2,022.74	2,326.15
	36227		261.67	248.59	285.88
#	36227		109.97	104.47	120.14
#	36228		228.71	217.27	249.86
	36228		1,436.52	1,364.69	1,569.39
#	36245		209.48	199.01	228.86
	36245		1,119.39	1,063.42	1,222.93
	36246		754.05	716.35	823.80
#	36246		225.08	213.83	245.90
#	36247		261.89	248.80	286.12
	36247		1,268.65	1,205.22	1,386.00
#	36248		41.73	39.64	45.59
	36248		106.71	101.37	116.58
#	36251		227.35	215.98	248.38
	36251		1,146.46	1,089.14	1,252.51
#	36252		314.02	298.32	343.07
	36252		1,262.55	1,199.42	1,379.33
#	36253		306.98	291.63	335.37
	36253		1,768.24	1,679.83	1,931.80
#	36254		367.55	349.17	401.55
	36254		1,787.43	1,698.06	1,952.77
	36260		627.99	596.59	686.08
	36261		400.51	380.48	437.55
	36262		309.77	294.28	338.42
	36400		26.36	25.04	28.80
#	36400		15.63	14.85	17.08
	36405		23.09	21.94	25.23

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	36405		12.67	12.04	13.85
#	36406		7.65	7.27	8.36
	36406		17.45	16.58	19.07
#	36410		8.03	7.63	8.77
	36410		18.14	17.23	19.81
	36420		46.90	44.56	51.24
	36425		33.15	31.49	36.21
	36430		43.74	41.55	47.78
	36440		41.97	39.87	45.85
	36450		143.57	136.39	156.85
	36455		116.01	110.21	126.74
	36456		81.96	77.86	89.54
	36460		300.01	285.01	327.76
#	36465		107.01	101.66	116.91
	36465		1,190.70	1,131.17	1,300.85
#	36466		135.12	128.36	147.61
	36466		1,241.48	1,179.41	1,356.32
#	36470		34.17	32.46	37.33
	36470		114.16	108.45	124.72
#	36471		67.66	64.28	73.92
	36471		194.54	184.81	212.53
#	36473		160.66	152.63	175.52
	36473		1,092.64	1,038.01	1,193.71
#	36474		79.46	75.49	86.81
	36474		228.41	216.99	249.54
#	36475		249.61	237.13	272.70
	36475		992.50	942.88	1,084.31
	36476		267.57	254.19	292.32
#	36476		119.55	113.57	130.61
#	36478		249.48	237.01	272.56
	36478		922.49	876.37	1,007.83

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	36479		296.16	281.35	323.55
#	36479		120.86	114.82	132.04
#	36481		282.64	268.51	308.79
	36481		1,528.45	1,452.03	1,669.83
#	36482		160.97	152.92	175.86
	36482		1,536.11	1,459.30	1,678.20
#	36483		80.83	76.79	88.31
	36483		137.53	130.65	150.25
	36500		161.95	153.85	176.93
	36510		82.67	78.54	90.32
#	36510		44.98	42.73	49.14
	36511		90.30	85.79	98.66
	36512		85.33	81.06	93.22
	36513		87.76	83.37	95.88
#	36514		78.01	74.11	85.23
	36514		661.84	628.75	723.06
#	36516		75.32	71.55	82.28
	36516		2,051.14	1,948.58	2,240.87
#	36522		77.65	73.77	84.84
	36522		1,256.03	1,193.23	1,372.21
#	36555		79.28	75.32	86.62
	36555		202.49	192.37	221.23
#	36556		77.76	73.87	84.95
	36556		224.87	213.63	245.67
#	36557		306.08	290.78	334.40
	36557		1,181.37	1,122.30	1,290.65
	36558		740.38	703.36	808.86
#	36558		231.03	219.48	252.40
#	36560		362.94	344.79	396.51
	36560		1,261.21	1,198.15	1,377.87
	36561		906.64	861.31	990.51

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	36561		298.60	283.67	326.22
#	36563		341.41	324.34	372.99
	36563		1,095.94	1,041.14	1,197.31
	36565		814.82	774.08	890.19
#	36565		312.51	296.88	341.41
	36566		4,068.89	3,865.45	4,445.27
#	36566		333.00	316.35	363.80
	36568		84.83	80.59	92.68
	36569		86.86	82.52	94.90
#	36570		316.56	300.73	345.84
	36570		1,479.93	1,405.93	1,616.82
#	36571		291.94	277.34	318.94
	36571		1,252.73	1,190.09	1,368.60
#	36572		74.19	70.48	81.05
	36572		341.43	324.36	373.01
#	36573		72.35	68.73	79.04
	36573		341.74	324.65	373.35
#	36575		29.68	28.20	32.43
	36575		137.87	130.98	150.63
	36576		337.83	320.94	369.08
#	36576		169.27	160.81	184.93
	36578		414.34	393.62	452.66
#	36578		187.55	178.17	204.90
#	36580		57.76	54.87	63.10
	36580		182.18	173.07	199.03
	36581		707.70	672.32	773.17
#	36581		163.41	155.24	178.53
	36582		807.26	766.90	881.94
#	36582		258.06	245.16	281.93
#	36583		313.15	297.49	342.11
	36583		1,181.07	1,122.02	1,290.32

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	36584		50.94	48.39	55.65
	36584		286.62	272.29	313.13
#	36585		291.55	276.97	318.52
	36585		1,392.09	1,322.49	1,520.86
	36589		161.64	153.56	176.59
#	36589		123.95	117.75	135.41
	36590		219.22	208.26	239.50
#	36590		171.11	162.55	186.93
	36591		27.96	26.56	30.54
	36592		31.03	29.48	33.90
	36593		35.08	33.33	38.33
	36595		545.61	518.33	596.08
#	36595		157.92	150.02	172.52
#	36596		40.63	38.60	44.39
	36596		110.81	105.27	121.06
#	36597		52.34	49.72	57.18
	36597		108.12	102.71	118.12
#	36598		30.50	28.98	33.33
	36598		108.96	103.51	119.04
	36600		26.18	24.87	28.60
#	36600		13.00	12.35	14.20
	36620		40.83	38.79	44.61
	36625		96.06	91.26	104.95
	36640		99.56	94.58	108.77
	36660		57.22	54.36	62.51
	36680		58.10	55.20	63.48
	36800		107.56	102.18	117.51
	36810		176.47	167.65	192.80
	36815		125.18	118.92	136.76
	36818		634.17	602.46	692.83
	36819		670.81	637.27	732.86

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	36820		669.66	636.18	731.61
	36821		606.61	576.28	662.72
	36823		1,317.37	1,251.50	1,439.23
	36825		727.77	691.38	795.09
	36830		613.17	582.51	669.89
	36831		570.44	541.92	623.21
	36832		694.14	659.43	758.34
	36833		743.24	706.08	811.99
	36835		472.05	448.45	515.72
	36836		7,398.60	7,028.67	8,082.97
#	36836		315.75	299.96	344.95
	36837		8,379.78	7,960.79	9,154.91
#	36837		404.48	384.26	441.90
	36838		1,046.31	993.99	1,143.09
	36860		246.32	234.00	269.10
#	36860		99.52	94.54	108.72
	36861		125.29	119.03	136.88
	36901		643.08	610.93	702.57
#	36901		148.43	141.01	162.16
#	36902		211.75	201.16	231.33
	36902		1,111.55	1,055.97	1,214.37
	36903		4,432.11	4,210.50	4,842.08
#	36903		280.34	266.32	306.27
#	36904		323.75	307.56	353.69
	36904		1,626.87	1,545.53	1,777.36
#	36905		388.97	369.52	424.95
	36905		2,058.32	1,955.40	2,248.71
	36906		5,467.85	5,194.46	5,973.63
#	36906		449.07	426.62	490.61
	36907		542.63	515.50	592.83
#	36907		128.89	122.45	140.82

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	36908		183.81	174.62	200.81
	36908		1,293.55	1,228.87	1,413.20
#	36909		177.80	168.91	194.25
	36909		1,683.50	1,599.33	1,839.23
	37140		2,151.08	2,043.53	2,350.06
	37145		1,997.45	1,897.58	2,182.22
	37160		2,051.21	1,948.65	2,240.95
	37180		1,972.71	1,874.07	2,155.18
	37181		2,151.08	2,043.53	2,350.06
	37182		705.03	669.78	770.25
	37183		4,986.92	4,737.57	5,448.21
#	37183		323.65	307.47	353.59
#	37184		380.29	361.28	415.47
	37184		1,531.39	1,454.82	1,673.04
	37185		434.71	412.97	474.92
#	37185		143.26	136.10	156.52
#	37186		221.52	210.44	242.01
	37186		1,083.63	1,029.45	1,183.87
#	37187		348.86	331.42	381.13
	37187		1,499.97	1,424.97	1,638.72
#	37188		253.08	240.43	276.49
	37188		1,287.11	1,222.75	1,406.16
#	37191		192.65	183.02	210.47
	37191		1,747.07	1,659.72	1,908.68
#	37192		318.60	302.67	348.07
	37192		1,130.75	1,074.21	1,235.34
#	37193		305.02	289.77	333.24
	37193		1,323.73	1,257.54	1,446.17
#	37197		267.61	254.23	292.36
	37197		1,381.94	1,312.84	1,509.77
	37200		186.23	176.92	203.46

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	37211		343.41	326.24	375.18
	37212		298.47	283.55	326.08
	37213		205.41	195.14	224.41
	37214		108.88	103.44	118.96
	37215		900.18	855.17	983.45
	37217		993.00	943.35	1,084.85
	37218		748.62	711.19	817.87
#	37236		397.15	377.29	433.88
	37236		2,424.15	2,302.94	2,648.38
#	37237		191.58	182.00	209.30
	37237		1,135.20	1,078.44	1,240.21
#	37238		274.74	261.00	300.15
	37238		3,030.84	2,879.30	3,311.20
#	37239		133.50	126.83	145.85
	37239		1,535.60	1,458.82	1,677.64
#	37241		374.61	355.88	409.26
	37241		4,065.14	3,861.88	4,441.16
	37242		6,163.48	5,855.31	6,733.61
#	37242		418.06	397.16	456.73
	37243		7,378.87	7,009.93	8,061.42
#	37243		485.41	461.14	530.31
#	37244		569.72	541.23	622.41
	37244		5,653.78	5,371.09	6,176.75
#	37246		312.53	296.90	341.44
	37246		1,632.20	1,550.59	1,783.18
	37247		564.26	536.05	616.46
#	37247		153.90	146.21	168.14
#	37248		262.57	249.44	286.86
	37248		1,221.52	1,160.44	1,334.51
	37249		404.67	384.44	442.11
#	37249		130.07	123.57	142.11

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	37252		829.47	788.00	906.20
#	37252		80.46	76.44	87.91
#	37253		63.43	60.26	69.30
	37253		161.81	153.72	176.78
#	37254		341.72	324.63	373.32
	37254		1,935.37	1,838.60	2,114.39
	37255		481.89	457.80	526.47
#	37255		138.64	131.71	151.47
#	37256		501.03	475.98	547.38
	37256		2,279.48	2,165.51	2,490.34
	37257		549.76	522.27	600.61
#	37257		179.54	170.56	196.14
#	37258		408.78	388.34	446.59
	37258		3,309.22	3,143.76	3,615.32
#	37259		185.20	175.94	202.33
	37259		1,125.15	1,068.89	1,229.22
	37260		7,797.36	7,407.49	8,518.61
#	37260		590.99	561.44	645.66
	37261		3,104.28	2,949.07	3,391.43
#	37261		196.79	186.95	214.99
	37262		3,141.26	2,984.20	3,431.83
#	37262		137.85	130.96	150.60
	37263		5,017.90	4,767.01	5,482.06
#	37263		362.60	344.47	396.14
	37264		2,017.24	1,916.38	2,203.84
#	37264		138.88	131.94	151.73
	37265		6,313.84	5,998.15	6,897.87
#	37265		490.58	466.05	535.96
#	37266		184.84	175.60	201.94
	37266		2,258.12	2,145.21	2,466.99
	37267		4,819.82	4,578.83	5,265.65

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	37267		409.09	388.64	446.94
	37268		3,100.45	2,945.43	3,387.24
#	37268		173.03	164.38	189.04
#	37269		687.74	653.35	751.35
	37269		10,669.51	10,136.03	11,656.43
	37270		3,230.83	3,069.29	3,529.68
#	37270		232.32	220.70	253.81
#	37271		418.36	397.44	457.06
	37271		9,732.63	9,246.00	10,632.90
#	37272		184.55	175.32	201.62
	37272		2,162.51	2,054.38	2,362.54
#	37273		585.92	556.62	640.11
	37273		12,195.05	11,585.30	13,323.10
#	37274		254.22	241.51	277.74
	37274		2,306.66	2,191.33	2,520.03
#	37275		510.34	484.82	557.54
	37275		9,478.91	9,004.96	10,355.70
	37276		3,193.03	3,033.38	3,488.39
#	37276		196.35	186.53	214.51
#	37277		694.04	659.34	758.24
	37277		14,218.00	13,507.10	15,533.17
#	37278		275.86	262.07	301.38
	37278		3,582.07	3,402.97	3,913.42
	37279		4,271.38	4,057.81	4,666.48
#	37279		184.27	175.06	201.32
#	37280		456.04	433.24	498.23
	37280		2,520.12	2,394.11	2,753.23
	37281		689.01	654.56	752.74
#	37281		137.05	130.20	149.73
#	37282		572.15	543.54	625.07
	37282		5,652.53	5,369.90	6,175.39

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	37283		811.25	770.69	886.29
#	37283		195.24	185.48	213.30
#	37284		469.42	445.95	512.84
	37284		5,212.68	4,952.05	5,694.86
	37285		2,573.16	2,444.50	2,811.18
#	37285		154.80	147.06	169.12
#	37286		629.46	597.99	687.69
	37286		9,572.90	9,094.26	10,458.40
	37287		4,555.74	4,327.95	4,977.14
#	37287		232.96	221.31	254.51
	37288		7,213.06	6,852.41	7,880.27
#	37288		619.33	588.36	676.61
	37289		866.75	823.41	946.92
#	37289		218.26	207.35	238.45
#	37290		779.26	740.30	851.35
	37290		9,844.07	9,351.87	10,754.65
#	37291		297.55	282.67	325.07
	37291		1,015.61	964.83	1,109.55
#	37292		688.90	654.46	752.63
	37292		9,453.98	8,981.28	10,328.47
#	37293		302.68	287.55	330.68
	37293		3,248.49	3,086.07	3,548.98
#	37294		825.90	784.61	902.30
	37294		14,024.70	13,323.47	15,321.99
	37295		5,543.28	5,266.12	6,056.04
#	37295		381.69	362.61	417.00
#	37296		510.77	485.23	558.01
	37296		2,833.82	2,692.13	3,095.95
	37297		778.11	739.20	850.08
#	37297		182.94	173.79	199.86
#	37298		629.71	598.22	687.95

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	37298		3,191.50	3,031.93	3,486.72
	37299		846.77	804.43	925.09
#	37299		227.70	216.32	248.77
	37565		649.91	617.41	710.02
	37600		658.54	625.61	719.45
	37605		686.15	651.84	749.62
	37606		748.18	710.77	817.39
	37607		346.02	328.72	378.03
	37609		303.00	287.85	331.03
#	37609		185.93	176.63	203.12
	37615		457.06	434.21	499.34
	37616		1,069.64	1,016.16	1,168.58
	37617		1,212.69	1,152.06	1,324.87
	37618		366.42	348.10	400.32
	37619		1,594.63	1,514.90	1,742.14
	37650		428.08	406.68	467.68
	37660		1,225.71	1,164.42	1,339.08
	37700		226.77	215.43	247.74
	37718		365.89	347.60	399.74
	37722		427.26	405.90	466.79
	37735		541.35	514.28	591.42
	37760		535.88	509.09	585.45
	37761		489.54	465.06	534.82
	37765		401.59	381.51	438.74
#	37765		246.83	234.49	269.66
	37766		479.06	455.11	523.38
#	37766		303.76	288.57	331.86
	37780		220.94	209.89	241.37
	37785		328.29	311.88	358.66
#	37785		232.98	221.33	254.53
	37788		1,120.80	1,064.76	1,224.47

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	37790		437.53	415.65	478.00
	38100		1,075.77	1,021.98	1,175.28
	38101		1,089.45	1,034.98	1,190.23
	38102		238.51	226.58	260.57
	38115		1,206.30	1,145.99	1,317.89
	38120		995.69	945.91	1,087.80
	38200		109.46	103.99	119.59
	38205		67.98	64.58	74.27
	38206		66.82	63.48	73.00
#	38220		54.94	52.19	60.02
	38220		157.92	150.02	172.52
#	38221		57.47	54.60	62.79
	38221		157.68	149.80	172.27
#	38222		62.34	59.22	68.10
	38222		167.46	159.09	182.95
	38228		302.89	287.75	330.91
#	38228		147.82	140.43	161.49
	38230		174.85	166.11	191.03
	38232		158.18	150.27	172.81
	38240		198.31	188.39	216.65
	38241		146.69	139.36	160.26
	38242		104.18	98.97	113.82
	38243		100.26	95.25	109.54
	38300		358.37	340.45	391.52
#	38300		209.43	198.96	228.80
	38305		482.45	458.33	527.08
	38308		441.01	418.96	481.80
	38380		509.38	483.91	556.50
	38381		769.33	730.86	840.49
	38382		666.78	633.44	728.46
	38500		356.29	338.48	389.25

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	38500		242.59	230.46	265.03
#	38505		74.41	70.69	81.29
	38505		162.06	153.96	177.05
	38510		534.07	507.37	583.48
#	38510		375.32	356.55	410.03
	38520		435.35	413.58	475.62
	38525		425.03	403.78	464.35
	38530		523.20	497.04	571.60
	38531		427.89	406.50	467.48
	38542		463.17	440.01	506.01
	38550		508.68	483.25	555.74
	38555		976.08	927.28	1,066.37
	38562		662.27	629.16	723.53
	38564		658.06	625.16	718.93
	38570		477.74	453.85	521.93
	38571		593.63	563.95	648.54
	38572		823.19	782.03	899.33
	38573		1,079.29	1,025.33	1,179.13
	38700		702.03	666.93	766.97
	38720		1,186.67	1,127.34	1,296.44
	38724		1,253.41	1,190.74	1,369.35
	38740		668.04	634.64	729.84
	38745		834.98	793.23	912.21
	38746		198.42	188.50	216.78
	38747		242.27	230.16	264.68
	38760		776.25	737.44	848.06
	38765		1,221.84	1,160.75	1,334.86
	38770		735.01	698.26	803.00
	38780		974.56	925.83	1,064.70
	38790		74.70	70.97	81.62
	38792		77.74	73.85	84.93

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	38792		27.48	26.11	30.03
	38794		254.19	241.48	277.70
	38900		144.41	137.19	157.77
#	38900		124.18	117.97	135.67
	39000		485.24	460.98	530.13
	39010		759.69	721.71	829.97
	39200		832.90	791.26	909.95
	39220		1,067.64	1,014.26	1,166.40
	39401		293.52	278.84	320.67
	39402		380.03	361.03	415.18
	39501		807.00	766.65	881.65
	39503		5,415.41	5,144.64	5,916.34
	39540		818.53	777.60	894.24
	39541		888.62	844.19	970.82
	39545		868.60	825.17	948.95
	39560		755.45	717.68	825.33
	39561		1,210.28	1,149.77	1,322.24
#	40490		55.83	53.04	61.00
	40490		114.67	108.94	125.28
	40500		501.09	476.04	547.45
#	40500		322.42	306.30	352.25
	40510		475.98	452.18	520.01
#	40510		309.88	294.39	338.55
	40520		495.42	470.65	541.25
#	40520		318.89	302.95	348.39
	40525		487.64	463.26	532.75
	40527		543.94	516.74	594.25
	40530		541.17	514.11	591.23
#	40530		358.82	340.88	392.01
	40650		542.93	515.78	593.15
#	40650		337.60	320.72	368.83

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	40652		544.16	516.95	594.49
#	40652		350.78	333.24	383.23
	40654		587.58	558.20	641.93
#	40654		384.39	365.17	419.95
	40700		895.35	850.58	978.17
	40701		1,048.95	996.50	1,145.98
	40702		884.66	840.43	966.49
	40720		907.74	862.35	991.70
	40761		949.15	901.69	1,036.94
	40800		197.13	187.27	215.36
#	40800		111.01	105.46	121.28
	40801		291.89	277.30	318.90
#	40801		183.71	174.52	200.70
	40804		196.94	187.09	215.15
#	40804		111.13	105.57	121.41
	40805		277.67	263.79	303.36
#	40805		178.98	170.03	195.53
#	40806		27.67	26.29	30.23
	40806		94.17	89.46	102.88
#	40808		79.69	75.71	87.07
	40808		158.15	150.24	172.78
	40810		203.48	193.31	222.31
#	40810		110.62	105.09	120.85
	40812		266.90	253.56	291.59
#	40812		163.31	155.14	178.41
	40814		363.81	345.62	397.46
#	40814		255.93	243.13	279.60
	40816		389.11	369.65	425.10
#	40816		271.12	257.56	296.19
	40818		344.96	327.71	376.87
#	40818		236.77	224.93	258.67

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	40819		263.18	250.02	287.52
#	40819		182.27	173.16	199.13
	40820		236.30	224.49	258.16
#	40820		145.58	138.30	159.05
	40830		219.53	208.55	239.83
#	40830		134.02	127.32	146.42
	40831		296.65	281.82	324.09
#	40831		187.24	177.88	204.56
	40840		846.53	804.20	924.83
#	40840		552.62	524.99	603.74
	40842		804.63	764.40	879.06
#	40842		535.24	508.48	584.75
#	40843		767.62	729.24	838.63
	40843		1,240.81	1,178.77	1,355.59
	40844		1,558.10	1,480.20	1,702.23
#	40844		1,042.31	990.19	1,138.72
	40845		1,430.29	1,358.78	1,562.60
#	40845		1,037.70	985.82	1,133.69
	41000		151.35	143.78	165.35
#	41000		99.55	94.57	108.76
	41005		216.98	206.13	237.05
#	41005		107.57	102.19	117.52
	41006		332.54	315.91	363.30
#	41006		209.95	199.45	229.37
	41007		320.64	304.61	350.30
#	41007		201.12	191.06	219.72
	41008		393.73	374.04	430.15
#	41008		238.04	226.14	260.06
	41009		411.24	390.68	449.28
#	41009		256.47	243.65	280.20
	41010		197.70	187.82	215.99

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	41010		98.40	93.48	107.50
	41015		391.54	371.96	427.75
#	41015		271.71	258.12	296.84
	41016		459.78	436.79	502.31
#	41016		314.51	298.78	343.60
	41017		455.41	432.64	497.54
#	41017		310.76	295.22	339.50
	41018		523.24	497.08	571.64
#	41018		363.87	345.68	397.53
	41019		402.47	382.35	439.70
	41100		177.95	169.05	194.41
#	41100		94.90	90.16	103.68
	41105		179.40	170.43	195.99
#	41105		97.87	92.98	106.93
#	41108		81.44	77.37	88.98
	41108		160.21	152.20	175.03
	41110		214.06	203.36	233.86
#	41110		115.07	109.32	125.72
	41112		324.95	308.70	355.01
#	41112		217.99	207.09	238.15
	41113		350.22	332.71	382.62
#	41113		237.14	225.28	259.07
	41114		537.48	510.61	587.20
	41115		241.68	229.60	264.04
#	41115		129.21	122.75	141.16
	41116		317.49	301.62	346.86
#	41116		194.60	184.87	212.60
	41120		940.43	893.41	1,027.42
	41130		1,148.41	1,090.99	1,254.64
	41135		1,876.28	1,782.47	2,049.84
	41140		1,881.35	1,787.28	2,055.37

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	41145		2,364.16	2,245.95	2,582.84
	41150		1,898.39	1,803.47	2,073.99
	41153		2,059.05	1,956.10	2,249.52
	41155		2,570.66	2,442.13	2,808.45
	41250		317.55	301.67	346.92
#	41250		161.55	153.47	176.49
	41251		403.18	383.02	440.47
#	41251		218.68	207.75	238.91
	41252		328.18	311.77	358.54
#	41252		191.50	181.93	209.22
	41510		408.82	388.38	446.64
	41512		594.61	564.88	649.61
	41520		342.26	325.15	373.92
#	41520		222.43	211.31	243.01
	41530		857.15	814.29	936.43
#	41530		345.35	328.08	377.29
	41800		357.34	339.47	390.39
#	41800		178.97	170.02	195.52
	41805		297.88	282.99	325.44
#	41805		181.12	172.06	197.87
	41806		401.90	381.81	439.08
#	41806		251.73	239.14	275.01
	41822		360.58	342.55	393.93
#	41822		182.83	173.69	199.74
	41823		542.81	515.67	593.02
#	41823		342.99	325.84	374.72
	41825		202.98	192.83	221.75
#	41825		107.05	101.70	116.96
	41826		284.48	270.26	310.80
#	41826		173.23	164.57	189.26
	41827		411.79	391.20	449.88

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	41827		256.72	243.88	280.46
	41828		361.15	343.09	394.55
#	41828		196.88	187.04	215.10
	41830		477.08	453.23	521.21
#	41830		284.92	270.67	311.27
	41872		483.52	459.34	528.24
#	41872		286.76	272.42	313.28
	41874		370.32	351.80	404.57
#	41874		218.92	207.97	239.17
	42000		151.76	144.17	165.80
#	42000		95.98	91.18	104.86
	42100		142.79	135.65	156.00
#	42100		98.36	93.44	107.46
	42104		206.85	196.51	225.99
#	42104		118.89	112.95	129.89
	42106		248.06	235.66	271.01
#	42106		145.70	138.42	159.18
	42107		449.09	426.64	490.64
#	42107		296.78	281.94	324.23
	42120		882.99	838.84	964.67
	42140		286.32	272.00	312.80
#	42140		145.96	138.66	159.46
	42145		596.33	566.51	651.49
	42160		220.16	209.15	240.52
#	42160		125.15	118.89	136.72
	42180		243.72	231.53	266.26
#	42180		164.65	156.42	179.88
	42182		316.80	300.96	346.10
#	42182		223.94	212.74	244.65
	42200		825.37	784.10	901.72
	42205		853.40	810.73	932.34

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	42210		952.80	905.16	1,040.93
	42215		632.90	601.26	691.45
	42220		524.76	498.52	573.30
	42225		929.97	883.47	1,015.99
	42226		806.00	765.70	880.56
	42227		749.35	711.88	818.66
	42235		663.94	630.74	725.35
	42260		822.02	780.92	898.06
#	42260		578.38	549.46	631.88
	42280		175.91	167.11	192.18
#	42280		96.22	91.41	105.12
	42281		229.17	217.71	250.37
#	42281		148.57	141.14	162.31
	42300		204.28	194.07	223.18
#	42300		137.47	130.60	150.19
	42305		377.54	358.66	412.46
	42310		174.13	165.42	190.23
#	42310		123.56	117.38	134.99
	42320		249.34	236.87	272.40
#	42320		158.01	150.11	172.63
	42330		227.03	215.68	248.03
#	42330		146.73	139.39	160.30
	42335		406.38	386.06	443.97
#	42335		232.92	221.27	254.46
	42340		500.60	475.57	546.91
#	42340		301.71	286.62	329.61
	42400		89.53	85.05	97.81
#	42400		46.62	44.29	50.93
	42405		294.50	279.78	321.75
#	42405		198.27	188.36	216.61
	42408		541.12	514.06	591.17

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	42408		315.55	299.77	344.74
	42409		366.54	348.21	400.44
#	42409		204.42	194.20	223.33
	42410		548.95	521.50	599.73
	42415		911.39	865.82	995.69
	42420		1,017.30	966.44	1,111.41
	42425		722.52	686.39	789.35
	42426		1,159.63	1,101.65	1,266.90
	42440		363.82	345.63	397.47
	42450		451.32	428.75	493.06
#	42450		320.46	304.44	350.11
	42500		428.98	407.53	468.66
#	42500		304.55	289.32	332.72
	42505		551.34	523.77	602.34
#	42505		400.86	380.82	437.94
	42507		429.39	407.92	469.11
	42509		705.13	669.87	770.35
	42510		525.58	499.30	574.20
#	42550		52.24	49.63	57.07
	42550		139.28	132.32	152.17
	42600		514.10	488.40	561.66
#	42600		312.14	296.53	341.01
	42650		73.48	69.81	80.28
#	42650		52.02	49.42	56.83
#	42660		68.73	65.29	75.08
	42660		98.15	93.24	107.23
	42665		348.27	330.86	380.49
#	42665		191.36	181.79	209.06
	42700		189.30	179.84	206.82
#	42700		124.33	118.11	135.83
	42720		434.31	412.59	474.48

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	42720		331.03	314.48	361.65
	42725		698.98	664.03	763.63
	42800		152.10	144.50	166.18
#	42800		103.07	97.92	112.61
	42804		202.66	192.53	221.41
#	42804		108.57	103.14	118.61
	42806		226.90	215.56	247.89
#	42806		124.23	118.02	135.72
	42808		224.37	213.15	245.12
#	42808		145.30	138.04	158.75
	42809		204.07	193.87	222.95
#	42809		114.58	108.85	125.18
	42810		367.33	348.96	401.30
#	42810		249.64	237.16	272.73
	42815		467.30	443.94	510.53
	42820		255.63	242.85	279.28
	42821		266.61	253.28	291.27
	42825		236.89	225.05	258.81
	42826		225.68	214.40	246.56
	42830		189.58	180.10	207.12
	42831		206.12	195.81	225.18
	42835		177.57	168.69	193.99
	42836		217.04	206.19	237.12
	42842		883.39	839.22	965.10
	42844		1,196.76	1,136.92	1,307.46
	42845		1,897.16	1,802.30	2,072.65
	42860		173.89	165.20	189.98
	42870		524.67	498.44	573.21
	42890		1,226.20	1,164.89	1,339.62
	42892		1,606.95	1,526.60	1,755.59
	42894		2,033.32	1,931.65	2,221.40

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	42900		285.68	271.40	312.11
	42950		704.94	669.69	770.14
	42953		857.69	814.81	937.03
	42955		670.37	636.85	732.38
	42960		143.08	135.93	156.32
	42961		364.41	346.19	398.12
	42962		448.94	426.49	490.46
	42970		356.94	339.09	389.95
	42971		392.40	372.78	428.70
	42972		437.35	415.48	477.80
	42975		82.64	78.51	90.29
	43020		545.23	517.97	595.67
	43030		459.74	436.75	502.26
	43045		1,256.01	1,193.21	1,372.19
	43100		549.48	522.01	600.31
	43101		967.74	919.35	1,057.25
	43107		2,772.61	2,633.98	3,029.08
	43108		4,145.29	3,938.03	4,528.73
	43112		3,222.11	3,061.00	3,520.15
	43113		4,069.60	3,866.12	4,446.04
	43116		4,631.49	4,399.92	5,059.91
	43117		3,044.94	2,892.69	3,326.59
	43118		3,388.11	3,218.70	3,701.51
	43121		2,696.12	2,561.31	2,945.51
	43122		2,348.39	2,230.97	2,565.62
	43123		4,216.14	4,005.33	4,606.13
	43124		3,580.38	3,401.36	3,911.56
	43130		707.33	671.96	772.75
	43135		1,395.15	1,325.39	1,524.20
	43180		474.68	450.95	518.59
	43191		134.21	127.50	146.63

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	43192		145.69	138.41	159.17
	43193		146.68	139.35	160.25
	43194		161.80	153.71	176.77
	43195		158.04	150.14	172.66
	43196		170.22	161.71	185.97
#	43197		68.67	65.24	75.03
	43197		186.66	177.33	203.93
#	43198		82.07	77.97	89.67
	43198		207.11	196.75	226.26
#	43200		78.49	74.57	85.76
	43200		268.81	255.37	293.68
#	43201		91.09	86.54	99.52
	43201		261.79	248.70	286.01
	43202		367.15	348.79	401.11
#	43202		91.93	87.33	100.43
	43204		119.08	113.13	130.10
	43205		124.38	118.16	135.88
	43206		320.55	304.52	350.20
#	43206		117.05	111.20	127.88
	43210		378.21	359.30	413.20
	43211		204.94	194.69	223.89
	43212		169.08	160.63	184.72
#	43213		224.90	213.66	245.71
	43213		1,168.83	1,110.39	1,276.95
	43214		167.78	159.39	183.30
	43215		410.12	389.61	448.05
#	43215		126.63	120.30	138.35
	43216		425.39	404.12	464.74
#	43216		117.69	111.81	128.58
	43217		439.51	417.53	480.16
#	43217		140.70	133.67	153.72

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	43220		886.54	842.21	968.54
#	43220		104.73	99.49	114.41
	43226		389.92	370.42	425.98
#	43226		116.55	110.72	127.33
	43227		612.14	581.53	668.76
#	43227		145.69	138.41	159.17
	43229		730.35	693.83	797.90
#	43229		173.19	164.53	189.21
	43231		136.50	129.68	149.13
	43232		175.79	167.00	192.05
	43233		203.34	193.17	222.15
	43235		303.75	288.56	331.84
#	43235		109.14	103.68	119.23
	43236		418.21	397.30	456.90
#	43236		122.16	116.05	133.46
	43237		171.38	162.81	187.23
	43238		202.61	192.48	221.35
	43239		393.08	373.43	429.44
#	43239		122.16	116.05	133.46
	43240		339.91	322.91	371.35
	43241		125.73	119.44	137.36
	43242		227.87	216.48	248.95
	43243		207.84	197.45	227.07
	43244		213.61	202.93	233.37
	43245		612.80	582.16	669.48
#	43245		155.85	148.06	170.27
	43246		177.63	168.75	194.06
	43247		402.66	382.53	439.91
#	43247		155.95	148.15	170.37
	43248		430.93	409.38	470.79
#	43248		146.53	139.20	160.08

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	43249		134.81	128.07	147.28
	43249		1,092.84	1,038.20	1,193.93
	43250		469.08	445.63	512.47
#	43250		151.57	143.99	165.59
	43251		513.47	487.80	560.97
#	43251		171.45	162.88	187.31
	43252		356.98	339.13	390.00
#	43252		148.58	141.15	162.32
	43253		228.25	216.84	249.37
	43254		235.00	223.25	256.74
	43255		645.21	612.95	704.89
#	43255		175.39	166.62	191.61
	43257		202.65	192.52	221.40
	43259		196.97	187.12	215.19
	43260		278.88	264.94	304.68
	43261		293.61	278.93	320.77
	43262		309.22	293.76	337.82
	43263		309.83	294.34	338.49
	43264		315.23	299.47	344.39
	43265		374.58	355.85	409.23
	43266		191.16	181.60	208.84
	43270		751.06	713.51	820.54
#	43270		196.04	186.24	214.18
	43273		101.51	96.43	110.89
	43274		399.81	379.82	436.79
	43275		326.31	309.99	356.49
	43276		416.90	396.06	455.47
	43277		327.89	311.50	358.23
	43278		374.25	355.54	408.87
	43279		1,204.24	1,144.03	1,315.63
	43280		1,013.51	962.83	1,107.25

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	43281		1,432.10	1,360.50	1,564.58
	43282		1,611.38	1,530.81	1,760.43
	43283		143.95	136.75	157.26
	43284		622.86	591.72	680.48
	43285		640.18	608.17	699.40
	43286		2,958.49	2,810.57	3,232.16
	43287		3,314.49	3,148.77	3,621.09
	43288		3,486.50	3,312.18	3,809.01
	43290		2,460.16	2,337.15	2,687.72
#	43290		155.81	148.02	170.22
	43291		475.06	451.31	519.01
#	43291		140.70	133.67	153.72
	43300		542.44	515.32	592.62
	43305		936.03	889.23	1,022.61
	43310		1,406.49	1,336.17	1,536.60
	43312		1,492.24	1,417.63	1,630.27
	43313		2,715.54	2,579.76	2,966.72
	43314		2,888.07	2,743.67	3,155.22
	43320		1,310.61	1,245.08	1,431.84
	43325		1,275.03	1,211.28	1,392.97
	43327		789.21	749.75	862.21
	43328		1,065.73	1,012.44	1,164.31
	43330		1,253.99	1,191.29	1,369.98
	43331		1,283.23	1,219.07	1,401.93
	43332		1,080.23	1,026.22	1,180.15
	43333		1,179.10	1,120.15	1,288.17
	43334		1,173.01	1,114.36	1,281.51
	43335		1,260.46	1,197.44	1,377.06
	43336		1,371.07	1,302.52	1,497.90
	43337		1,459.20	1,386.24	1,594.18
	43338		105.13	99.87	114.85

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	43340		1,294.72	1,229.98	1,414.48
	43341		1,339.61	1,272.63	1,463.52
	43351		1,272.43	1,208.81	1,390.13
	43352		1,031.15	979.59	1,126.53
	43360		2,132.48	2,025.86	2,329.74
	43361		2,517.63	2,391.75	2,750.51
	43400		1,424.37	1,353.15	1,556.12
	43405		1,400.99	1,330.94	1,530.58
	43410		891.47	846.90	973.94
	43415		2,423.11	2,301.95	2,647.24
	43420		871.43	827.86	952.04
	43425		1,378.31	1,309.39	1,505.80
#	43450		71.86	68.27	78.51
	43450		199.35	189.38	217.79
	43453		768.42	730.00	839.50
#	43453		76.41	72.59	83.48
	43460		186.09	176.79	203.31
	43497		710.12	674.61	775.80
	43500		749.85	712.36	819.21
	43501		1,270.61	1,207.08	1,388.14
	43502		1,427.54	1,356.16	1,559.58
	43510		900.91	855.86	984.24
	43520		678.36	644.44	741.11
	43605		799.64	759.66	873.61
	43610		920.05	874.05	1,005.16
	43611		1,148.25	1,090.84	1,254.47
	43620		1,844.53	1,752.30	2,015.15
	43621		2,102.58	1,997.45	2,297.07
	43622		2,143.58	2,036.40	2,341.86
	43631		1,358.28	1,290.37	1,483.93
	43632		1,884.11	1,789.90	2,058.39

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	43633		1,783.39	1,694.22	1,948.35
	43634		1,973.92	1,875.22	2,156.50
	43635		102.27	97.16	111.73
	43640		1,121.73	1,065.64	1,225.49
	43641		1,133.90	1,077.21	1,238.79
	43644		1,623.97	1,542.77	1,774.19
	43645		1,725.06	1,638.81	1,884.63
	43651		629.60	598.12	687.84
	43652		729.55	693.07	797.03
	43653		558.36	530.44	610.01
	43752		34.53	32.80	37.72
	43753		20.56	19.53	22.46
#	43754		45.91	43.61	50.15
	43754		313.46	297.79	342.46
#	43755		53.91	51.21	58.89
	43755		209.29	198.83	228.65
#	43756		45.91	43.61	50.15
	43756		280.97	266.92	306.96
#	43757		68.97	65.52	75.35
	43757		378.81	359.87	413.85
#	43761		88.97	84.52	97.20
	43761		120.54	114.51	131.69
#	43762		34.79	33.05	38.01
	43762		252.99	240.34	276.39
#	43763		82.34	78.22	89.95
	43763		347.75	330.36	379.91
	43770		1,066.04	1,012.74	1,164.65
	43771		1,205.16	1,144.90	1,316.64
	43772		894.53	849.80	977.27
	43773		1,205.16	1,144.90	1,316.64
	43774		907.08	861.73	990.99

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	43775		1,013.74	963.05	1,107.51
	43800		870.32	826.80	950.82
	43810		957.09	909.24	1,045.63
	43820		1,257.27	1,194.41	1,373.57
	43825		1,232.19	1,170.58	1,346.17
	43830		670.63	637.10	732.67
	43831		589.63	560.15	644.17
	43832		985.84	936.55	1,077.03
	43840		1,274.21	1,210.50	1,392.08
	43843		1,207.46	1,147.09	1,319.15
	43845		1,833.36	1,741.69	2,002.94
	43846		1,549.83	1,472.34	1,693.19
	43847		1,692.39	1,607.77	1,848.94
	43848		1,797.79	1,707.90	1,964.09
	43860		1,520.58	1,444.55	1,661.23
	43865		1,594.86	1,515.12	1,742.39
	43870		670.44	636.92	732.46
	43880		1,502.09	1,426.99	1,641.04
	43886		364.00	345.80	397.67
	43887		328.19	311.78	358.55
	43888		453.69	431.01	495.66
	43889		711.55	675.97	777.37
	44005		1,021.75	970.66	1,116.26
	44010		777.80	738.91	849.75
	44015		128.09	121.69	139.94
	44020		915.12	869.36	999.76
	44021		909.05	863.60	993.14
	44025		919.23	873.27	1,004.26
	44050		881.02	836.97	962.52
	44055		1,383.14	1,313.98	1,511.08
	44100		91.22	86.66	99.66

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	44110		794.58	754.85	868.08
	44111		902.76	857.62	986.26
	44120		1,138.88	1,081.94	1,244.23
	44121		219.00	208.05	239.26
	44125		1,098.18	1,043.27	1,199.76
	44126		2,297.23	2,182.37	2,509.73
	44127		2,644.71	2,512.47	2,889.34
	44128		221.49	210.42	241.98
	44130		1,231.03	1,169.48	1,344.90
	44139		107.96	102.56	117.94
	44140		1,250.61	1,188.08	1,366.29
	44141		1,688.74	1,604.30	1,844.95
	44143		1,531.55	1,454.97	1,673.22
	44144		1,635.93	1,554.13	1,787.25
	44145		1,516.59	1,440.76	1,656.87
	44146		1,939.62	1,842.64	2,119.04
	44147		1,763.10	1,674.95	1,926.19
	44150		1,723.01	1,636.86	1,882.39
	44151		2,010.90	1,910.36	2,196.91
	44155		1,914.07	1,818.37	2,091.13
	44156		2,148.13	2,040.72	2,346.83
	44157		2,043.00	1,940.85	2,231.98
	44158		2,092.77	1,988.13	2,286.35
	44160		1,156.94	1,099.09	1,263.95
	44180		864.11	820.90	944.04
	44186		621.74	590.65	679.25
	44187		1,014.46	963.74	1,108.30
	44188		1,131.31	1,074.74	1,235.95
	44202		1,289.82	1,225.33	1,409.13
	44203		218.69	207.76	238.92
	44204		1,413.60	1,342.92	1,544.36

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	44205		1,225.07	1,163.82	1,338.39
	44206		1,601.01	1,520.96	1,749.10
	44207		1,650.35	1,567.83	1,803.00
	44208		1,798.85	1,708.91	1,965.25
	44210		1,619.21	1,538.25	1,768.99
	44211		1,911.54	1,815.96	2,088.35
	44212		1,850.70	1,758.17	2,021.90
	44213		166.43	158.11	181.83
	44227		1,520.57	1,444.54	1,661.22
	44300		794.37	754.65	867.85
	44310		965.85	917.56	1,055.19
	44312		562.57	534.44	614.61
	44314		930.45	883.93	1,016.52
	44316		1,326.99	1,260.64	1,449.74
	44320		1,118.75	1,062.81	1,222.23
	44322		965.65	917.37	1,054.98
	44340		598.17	568.26	653.50
	44345		981.54	932.46	1,072.33
	44346		1,096.01	1,041.21	1,197.39
	44360		126.05	119.75	137.71
	44361		139.01	132.06	151.87
	44363		168.11	159.70	183.66
	44364		178.66	169.73	195.19
	44365		159.40	151.43	174.14
	44366		208.58	198.15	227.87
	44369		213.95	203.25	233.74
	44370		232.96	221.31	254.51
	44372		210.83	200.29	230.33
	44373		169.08	160.63	184.72
	44376		246.59	234.26	269.40
	44377		259.05	246.10	283.02

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	44378		332.88	316.24	363.68
	44379		355.99	338.19	388.92
#	44380		51.86	49.27	56.66
	44380		208.47	198.05	227.76
#	44381		76.28	72.47	83.34
	44381		984.66	935.43	1,075.74
#	44382		66.49	63.17	72.65
	44382		311.36	295.79	340.16
	44384		134.54	127.81	146.98
#	44385		66.56	63.23	72.71
	44385		229.60	218.12	250.84
#	44386		80.04	76.04	87.45
	44386		324.61	308.38	354.64
#	44388	53	70.38	66.86	76.89
	44388		335.26	318.50	366.28
	44388	53	167.84	159.45	183.37
#	44388		140.04	133.04	153.00
	44389		431.35	409.78	471.25
#	44389		152.46	144.84	166.57
	44390		425.84	404.55	465.23
#	44390		184.03	174.83	201.05
	44391		659.04	626.09	720.00
#	44391		201.48	191.41	220.12
	44392		410.90	390.36	448.91
#	44392		179.21	170.25	195.79
	44394		458.95	436.00	501.40
#	44394		198.44	188.52	216.80
#	44401		211.29	200.73	230.84
	44401		2,384.17	2,264.96	2,604.70
	44402		227.24	215.88	248.26
	44403		263.88	250.69	288.29

**WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026**

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
- LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	44404		438.63	416.70	479.21
#	44404		151.78	144.19	165.82
	44405		575.72	546.93	628.97
#	44405		161.06	153.01	175.96
	44406		200.29	190.28	218.82
	44407		239.25	227.29	261.38
	44408		201.94	191.84	220.62
	44500		16.42	15.60	17.94
	44602		1,297.78	1,232.89	1,417.82
	44603		1,490.44	1,415.92	1,628.31
	44604		976.96	928.11	1,067.33
	44605		1,221.96	1,160.86	1,334.99
	44615		994.72	944.98	1,086.73
	44620		800.81	760.77	874.89
	44625		931.03	884.48	1,017.15
	44626		1,460.75	1,387.71	1,595.87
	44640		1,286.37	1,222.05	1,405.36
	44650		1,325.64	1,259.36	1,448.26
	44660		1,215.85	1,155.06	1,328.32
	44661		1,417.68	1,346.80	1,548.82
	44680		1,011.30	960.74	1,104.85
	44700		913.20	867.54	997.67
	44701		154.44	146.72	168.73
	44720		249.62	237.14	272.71
	44721		349.11	331.65	381.40
	44800		734.25	697.54	802.17
	44820		806.72	766.38	881.34
	44850		706.53	671.20	771.88
	44900		742.02	704.92	810.66
	44950		604.75	574.51	660.69
	44955		75.61	71.83	82.60

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	44960		824.96	783.71	901.27
	44970		574.65	545.92	627.81
	45000		404.92	384.67	442.37
	45005		345.96	328.66	377.96
#	45005		168.82	160.38	184.44
	45020		542.49	515.37	592.68
	45100		294.52	279.79	321.76
	45108		366.24	347.93	400.12
	45110		1,662.18	1,579.07	1,815.93
	45111		1,004.98	954.73	1,097.94
	45112		1,633.65	1,551.97	1,784.77
	45113		1,684.03	1,599.83	1,839.80
	45114		1,695.10	1,610.35	1,851.90
	45116		1,398.00	1,328.10	1,527.32
	45119		1,696.15	1,611.34	1,853.04
	45120		1,499.51	1,424.53	1,638.21
	45121		1,633.71	1,552.02	1,784.82
	45123		1,025.10	973.85	1,119.93
	45126		2,477.98	2,354.08	2,707.19
	45130		998.04	948.14	1,090.36
	45135		1,183.83	1,124.64	1,293.34
	45136		1,619.26	1,538.30	1,769.05
	45150		411.30	390.74	449.35
	45160		973.12	924.46	1,063.13
	45171		595.92	566.12	651.04
	45172		779.61	740.63	851.72
	45190		657.11	624.25	717.89
#	45300		44.59	42.36	48.71
	45300		139.60	132.62	152.51
#	45303		79.22	75.26	86.55
	45303		946.54	899.21	1,034.09

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	45305		68.16	64.75	74.46
	45305		186.76	177.42	204.03
	45307		224.58	213.35	245.35
#	45307		95.56	90.78	104.40
#	45308		81.03	76.98	88.53
	45308		214.65	203.92	234.51
#	45309		85.75	81.46	93.68
	45309		221.52	210.44	242.01
	45315		238.43	226.51	260.49
#	45315		99.91	94.91	109.15
	45317		227.93	216.53	249.01
#	45317		101.66	96.58	111.07
	45320		233.47	221.80	255.07
#	45320		99.24	94.28	108.42
	45321		97.92	93.02	106.97
	45327		109.71	104.22	119.85
#	45330		52.61	49.98	57.48
	45330		200.63	190.60	219.19
#	45331		65.55	62.27	71.61
	45331		300.61	285.58	328.42
	45332		293.78	279.09	320.95
#	45332		94.58	89.85	103.33
#	45333		85.38	81.11	93.28
	45333		343.74	326.55	375.53
	45334		506.53	481.20	553.38
#	45334		104.44	99.22	114.10
#	45335		61.27	58.21	66.94
	45335		304.92	289.67	333.12
	45337		99.36	94.39	108.55
	45338		315.04	299.29	344.18
#	45338		107.56	102.18	117.51

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	45340		71.30	67.74	77.90
	45340		470.33	446.81	513.83
	45341		110.07	104.57	120.26
	45342		150.25	142.74	164.15
	45346		2,297.36	2,182.49	2,509.86
#	45346		141.94	134.84	155.07
	45347		135.26	128.50	147.78
	45349		173.74	165.05	189.81
#	45350		90.59	86.06	98.97
	45350		688.52	654.09	752.20
#	45378	53	81.86	77.77	89.44
	45378		359.19	341.23	392.41
	45378	53	179.94	170.94	196.58
#	45378		163.35	155.18	178.46
	45379		455.52	432.74	497.65
#	45379		208.50	198.08	227.79
	45380		453.58	430.90	495.54
#	45380		176.22	167.41	192.52
	45381		463.08	439.93	505.92
#	45381		176.22	167.41	192.52
	45382		686.83	652.49	750.36
#	45382		224.98	213.73	245.79
	45384		510.97	485.42	558.23
#	45384		202.66	192.53	221.41
	45385		475.51	451.73	519.49
#	45385		221.75	210.66	242.26
	45386		629.03	597.58	687.22
#	45386		185.87	176.58	203.07
#	45388		237.07	225.22	259.00
	45388		2,458.38	2,335.46	2,685.78
	45389		251.43	238.86	274.69

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	45390		288.24	273.83	314.90
	45391		224.23	213.02	244.97
	45392		264.03	250.83	288.45
	45393		217.81	206.92	237.96
	45395		1,788.44	1,699.02	1,953.87
	45397		1,930.42	1,833.90	2,108.99
	45398		844.41	802.19	922.52
#	45398		208.48	198.06	227.77
	45400		1,038.04	986.14	1,134.06
	45402		1,389.80	1,320.31	1,518.36
	45500		559.74	531.75	611.51
	45505		579.60	550.62	633.21
#	45520		36.72	34.88	40.11
	45520		156.85	149.01	171.36
	45540		968.64	920.21	1,058.24
	45541		880.89	836.85	962.38
	45550		1,344.72	1,277.48	1,469.10
	45560		628.03	596.63	686.12
	45562		1,115.86	1,060.07	1,219.08
	45563		1,565.27	1,487.01	1,710.06
	45800		1,205.91	1,145.61	1,317.45
	45805		1,388.78	1,319.34	1,517.24
	45820		1,208.61	1,148.18	1,320.41
	45825		1,456.32	1,383.50	1,591.03
	45900		208.25	197.84	227.52
	45905		164.81	156.57	180.06
	45910		184.14	174.93	201.17
	45915		383.80	364.61	419.30
#	45915		226.27	214.96	247.20
	45990		99.01	94.06	108.17
	46020		109.64	104.16	119.78

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	46030		79.81	75.82	87.19
	46030		266.45	253.13	291.10
	46040		602.31	572.19	658.02
#	46040		423.03	401.88	462.16
	46045		436.44	414.62	476.81
	46050		250.45	237.93	273.62
#	46050		100.28	95.27	109.56
	46060		477.96	454.06	522.17
	46070		278.87	264.93	304.67
	46080		300.35	285.33	328.13
#	46080		148.34	140.92	162.06
	46083		213.02	202.37	232.73
#	46083		104.83	99.59	114.53
	46200		501.55	476.47	547.94
#	46200		333.61	316.93	364.47
	46220		259.53	246.55	283.53
#	46220		116.40	110.58	127.17
	46221		308.14	292.73	336.64
#	46221		190.15	180.64	207.74
	46230		325.06	308.81	355.13
#	46230		163.55	155.37	178.68
	46250		510.68	485.15	557.92
#	46250		310.55	295.02	339.27
	46255		553.69	526.01	604.91
#	46255		342.53	325.40	374.21
	46257		403.84	383.65	441.20
	46258		471.68	448.10	515.32
	46260		468.97	445.52	512.35
	46261		505.43	480.16	552.18
	46262		576.84	548.00	630.20
	46270		571.62	543.04	624.50

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	46270		395.70	375.92	432.31
	46275		601.14	571.08	656.74
#	46275		412.66	392.03	450.83
	46280		469.46	445.99	512.89
	46285		601.52	571.44	657.16
#	46285		414.27	393.56	452.59
	46288		539.50	512.53	589.41
	46320		220.01	209.01	240.36
#	46320		106.00	100.70	115.81
	46500		335.46	318.69	366.49
#	46500		185.29	176.03	202.43
	46505		327.48	311.11	357.78
#	46505		239.22	227.26	261.35
#	46600		39.24	37.28	42.87
	46600		120.45	114.43	131.59
#	46601		84.54	80.31	92.36
	46601		158.39	150.47	173.04
	46604		638.31	606.39	697.35
#	46604		61.54	58.46	67.23
#	46606		70.15	66.64	76.64
	46606		286.51	272.18	313.01
	46607		220.23	209.22	240.60
#	46607		112.35	106.73	122.74
#	46608		81.03	76.98	88.53
	46608		301.99	286.89	329.92
#	46610		75.19	71.43	82.14
	46610		286.05	271.75	312.51
#	46611		73.81	70.12	80.64
	46611		226.74	215.40	247.71
#	46612		90.15	85.64	98.49
	46612		343.60	326.42	375.38

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	46614		60.41	57.39	66.00
	46614		172.27	163.66	188.21
#	46615		82.71	78.57	90.36
	46615		181.70	172.62	198.51
	46700		626.34	595.02	684.27
	46705		564.11	535.90	616.29
	46706		174.80	166.06	190.97
	46707		501.28	476.22	547.65
	46710		1,060.93	1,007.88	1,159.06
	46712		2,078.45	1,974.53	2,270.71
	46715		544.49	517.27	594.86
	46716		1,198.02	1,138.12	1,308.84
	46730		1,895.52	1,800.74	2,070.85
	46735		2,168.79	2,060.35	2,369.40
	46740		2,062.03	1,958.93	2,252.77
	46742		2,369.37	2,250.90	2,588.54
	46744		3,311.03	3,145.48	3,617.30
	46746		3,639.66	3,457.68	3,976.33
	46748		3,938.07	3,741.17	4,302.35
	46750		679.95	645.95	742.84
	46751		653.30	620.64	713.74
	46753		606.12	575.81	662.18
	46754		361.59	343.51	395.04
#	46754		231.65	220.07	253.08
	46760		1,029.83	978.34	1,125.09
	46761		823.83	782.64	900.04
	46900		253.72	241.03	277.18
#	46900		128.68	122.25	140.59
	46910		279.75	265.76	305.62
#	46910		126.82	120.48	138.55
	46916		240.11	228.10	262.32

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	46916		119.05	113.10	130.07
	46917		433.53	411.85	473.63
#	46917		118.48	112.56	129.44
	46922		324.01	307.81	353.98
#	46922		131.24	124.68	143.38
	46924		581.46	552.39	635.25
#	46924		168.95	160.50	184.58
	46930		233.58	221.90	255.19
#	46930		150.83	143.29	164.78
	46940		275.55	261.77	301.04
#	46940		134.57	127.84	147.02
	46942		262.99	249.84	287.32
#	46942		121.40	115.33	132.63
	46945		336.50	319.68	367.63
	46946		369.81	351.32	404.02
	46947		372.85	354.21	407.34
	46948		432.59	410.96	472.60
#	47000		76.12	72.31	83.16
	47000		270.11	256.60	295.09
	47001		93.70	89.02	102.37
	47010		1,139.24	1,082.28	1,244.62
	47015		1,100.83	1,045.79	1,202.66
	47100		807.31	766.94	881.98
	47120		2,168.24	2,059.83	2,368.80
	47122		3,164.83	3,006.59	3,457.58
	47125		2,840.59	2,698.56	3,103.34
	47130		3,039.60	2,887.62	3,320.76
	47135		5,047.90	4,795.51	5,514.84
	47140		3,350.99	3,183.44	3,660.96
	47141		3,995.76	3,795.97	4,365.37
	47142		4,391.33	4,171.76	4,797.52

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	47146		299.01	284.06	326.67
	47147		348.28	330.87	380.50
	47300		1,068.75	1,015.31	1,167.61
	47350		1,282.37	1,218.25	1,400.99
	47360		1,749.33	1,661.86	1,911.14
	47361		2,785.38	2,646.11	3,043.03
	47362		1,335.13	1,268.37	1,458.63
	47370		1,172.35	1,113.73	1,280.79
	47371		1,183.43	1,124.26	1,292.90
	47380		1,345.98	1,278.68	1,470.48
	47381		1,386.62	1,317.29	1,514.88
#	47382		642.34	610.22	701.75
	47382		3,201.99	3,041.89	3,498.17
	47383		5,376.43	5,107.61	5,873.75
#	47383		403.32	383.15	440.62
	47384		424.82	403.58	464.12
	47400		2,001.36	1,901.29	2,186.48
	47420		1,238.44	1,176.52	1,353.00
	47425		1,284.41	1,220.19	1,403.22
	47460		1,194.63	1,134.90	1,305.14
	47480		829.42	787.95	906.14
	47490		290.78	276.24	317.68
#	47531		61.42	58.35	67.10
	47531		370.34	351.82	404.59
	47532		758.22	720.31	828.36
#	47532		183.28	174.12	200.24
#	47533		227.56	216.18	248.61
	47533		1,038.79	986.85	1,134.88
#	47534		318.43	302.51	347.89
	47534		1,145.29	1,088.03	1,251.23
	47535		792.80	753.16	866.13

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	47535		169.74	161.25	185.44
	47536		564.16	535.95	616.34
#	47536		114.57	108.84	125.17
#	47537		83.60	79.42	91.33
	47537		431.14	409.58	471.02
	47538		3,224.06	3,062.86	3,522.29
#	47538		202.56	192.43	221.29
#	47539		368.59	350.16	402.68
	47539		3,676.95	3,493.10	4,017.07
#	47540		378.05	359.15	413.02
	47540		3,663.12	3,479.96	4,001.95
#	47541		294.77	280.03	322.03
	47541		1,110.59	1,055.06	1,213.32
	47542		447.23	424.87	488.60
#	47542		118.08	112.18	129.01
	47543		353.89	336.20	386.63
#	47543		123.73	117.54	135.17
	47544		739.28	702.32	807.67
#	47544		135.54	128.76	148.07
	47550		146.74	139.40	160.31
	47552		256.66	243.83	280.40
	47553		255.61	242.83	279.25
	47554		398.60	378.67	435.47
	47555		304.28	289.07	332.43
	47556		344.86	327.62	376.76
	47562		629.02	597.57	687.21
	47563		681.93	647.83	745.00
	47564		1,058.57	1,005.64	1,156.49
	47570		734.95	698.20	802.93
	47600		1,008.38	957.96	1,101.65
	47605		1,060.38	1,007.36	1,158.46

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	47610		1,174.94	1,116.19	1,283.62
	47612		1,193.67	1,133.99	1,304.09
	47620		1,286.48	1,222.16	1,405.48
	47700		1,003.40	953.23	1,096.21
	47701		1,622.73	1,541.59	1,772.83
	47711		1,447.58	1,375.20	1,581.48
	47712		1,860.13	1,767.12	2,032.19
	47715		1,252.53	1,189.90	1,368.39
	47720		1,092.71	1,038.07	1,193.78
	47721		1,274.88	1,211.14	1,392.81
	47740		1,236.94	1,175.09	1,351.35
	47741		1,385.30	1,316.04	1,513.45
	47760		2,083.96	1,979.76	2,276.72
	47765		2,810.53	2,670.00	3,070.50
	47780		2,292.33	2,177.71	2,504.37
	47785		2,989.02	2,839.57	3,265.51
	47800		1,463.67	1,390.49	1,599.06
	47801		1,032.70	981.07	1,128.23
	47900		1,297.26	1,232.40	1,417.26
	48000		1,754.21	1,666.50	1,916.48
	48001		2,141.35	2,034.28	2,339.42
	48020		1,112.39	1,056.77	1,215.29
	48100		841.44	799.37	919.28
	48102		468.97	445.52	512.35
#	48102		203.88	193.69	222.74
	48105		2,560.86	2,432.82	2,797.74
	48120		1,048.01	995.61	1,144.95
	48140		1,458.15	1,385.24	1,593.03
	48145		1,527.28	1,450.92	1,668.56
	48146		1,767.16	1,678.80	1,930.62
	48148		1,177.41	1,118.54	1,286.32

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	48150		2,878.56	2,734.63	3,144.82
	48152		2,683.29	2,549.13	2,931.50
	48153		2,873.80	2,730.11	3,139.63
	48154		2,694.81	2,560.07	2,944.08
	48155		1,707.06	1,621.71	1,864.97
	48400		96.45	91.63	105.37
	48500		1,087.94	1,033.54	1,188.57
	48510		1,039.15	987.19	1,135.27
	48520		1,035.20	983.44	1,130.96
	48540		1,223.79	1,162.60	1,336.99
	48545		1,264.57	1,201.34	1,381.54
	48547		1,671.76	1,588.17	1,826.40
	48548		1,561.90	1,483.81	1,706.38
	48552		214.35	203.63	234.17
	48554		2,527.91	2,401.51	2,761.74
	48556		1,235.56	1,173.78	1,349.85
	49000		726.26	689.95	793.44
	49002		975.14	926.38	1,065.34
	49010		867.01	823.66	947.21
	49013		415.85	395.06	454.32
	49014		349.35	331.88	381.66
	49020		1,487.23	1,412.87	1,624.80
	49040		957.02	909.17	1,045.55
	49060		1,024.99	973.74	1,119.80
	49062		730.85	694.31	798.46
#	49082		70.26	66.75	76.76
	49082		229.93	218.43	251.19
	49083		268.02	254.62	292.81
#	49083		92.42	87.80	100.97
	49084		96.99	92.14	105.96
#	49180		71.52	67.94	78.13

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	49180		162.54	154.41	177.57
#	49185		105.40	100.13	115.15
	49185		1,115.84	1,060.05	1,219.06
	49186		1,218.50	1,157.58	1,331.22
	49187		1,547.08	1,469.73	1,690.19
	49188		1,851.89	1,759.30	2,023.20
	49189		2,149.45	2,041.98	2,348.28
	49190		2,645.07	2,512.82	2,889.74
	49215		2,004.44	1,904.22	2,189.85
	49250		562.17	534.06	614.17
	49255		746.38	709.06	815.42
	49320		313.78	298.09	342.80
	49321		326.79	310.45	357.02
	49322		353.49	335.82	386.19
	49323		600.42	570.40	655.96
	49324		365.56	347.28	399.37
	49325		388.70	369.27	424.66
	49326		171.86	163.27	187.76
	49327		118.16	112.25	129.09
#	49400		78.89	74.95	86.19
	49400		145.09	137.84	158.52
	49402		797.89	758.00	871.70
	49405		783.06	743.91	855.50
#	49405		167.36	158.99	182.84
	49406		782.45	743.33	854.83
#	49406		167.36	158.99	182.84
	49407		691.86	657.27	755.86
#	49407		180.98	171.93	197.72
	49411		444.59	422.36	485.71
#	49411		158.04	150.14	172.66
	49412		74.82	71.08	81.74

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	49418		876.57	832.74	957.65
#	49418		174.75	166.01	190.91
	49419		390.86	371.32	427.02
	49421		209.15	198.69	228.49
	49422		203.46	193.29	222.28
#	49423		61.08	58.03	66.73
	49423		509.45	483.98	556.58
#	49424		32.09	30.49	35.06
	49424		159.58	151.60	174.34
	49425		742.80	705.66	811.51
	49426		638.94	606.99	698.04
	49427		35.82	34.03	39.13
	49428		410.05	389.55	447.98
	49429		433.96	412.26	474.10
	49435		107.68	102.30	117.65
	49436		528.77	502.33	577.68
#	49436		175.71	166.92	191.96
	49440		737.57	700.69	805.79
#	49440		177.96	169.06	194.42
#	49441		217.54	206.66	237.66
	49441		918.75	872.81	1,003.73
	49442		693.67	658.99	757.84
#	49442		176.95	168.10	193.32
	49446		711.83	676.24	777.68
#	49446		127.09	120.74	138.85
#	49450		56.77	53.93	62.02
	49450		522.60	496.47	570.94
#	49451		76.63	72.80	83.72
	49451		559.01	531.06	610.72
	49452		677.82	643.93	740.52
#	49452		117.59	111.71	128.47

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	49460		658.54	625.61	719.45
#	49460		42.84	40.70	46.81
#	49465		25.79	24.50	28.18
	49465		121.40	115.33	132.63
	49491		760.22	722.21	830.54
	49492		909.12	863.66	993.21
	49495		395.95	376.15	432.57
	49496		591.70	562.12	646.44
	49500		406.06	385.76	443.62
	49501		582.52	553.39	636.40
	49505		503.67	478.49	550.26
	49507		564.00	535.80	616.17
	49520		605.09	574.84	661.07
	49521		682.42	648.30	745.55
	49525		550.71	523.17	601.65
	49540		640.72	608.68	699.98
	49550		554.71	526.97	606.02
	49553		605.21	574.95	661.19
	49555		579.99	550.99	633.64
	49557		689.79	655.30	753.60
	49591		317.39	301.52	346.75
	49592		440.62	418.59	481.38
	49593		529.90	503.41	578.92
	49594		689.45	654.98	753.23
	49595		711.20	675.64	776.99
	49596		946.79	899.45	1,034.37
	49600		700.44	665.42	765.23
	49605		4,533.66	4,306.98	4,953.03
	49606		1,062.67	1,009.54	1,160.97
	49610		659.70	626.72	720.73
	49611		585.76	556.47	639.94

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	49613		389.80	370.31	425.86
	49614		528.95	502.50	577.88
	49615		589.43	559.96	643.95
	49616		791.59	752.01	864.81
	49617		816.31	775.49	891.81
	49618		1,144.12	1,086.91	1,249.95
	49621		688.97	654.52	752.70
	49622		857.96	815.06	937.32
	49623		186.44	177.12	203.69
	49650		419.14	398.18	457.91
	49651		544.21	517.00	594.55
	49900		791.68	752.10	864.92
	49904		1,282.02	1,217.92	1,400.61
	49905		318.37	302.45	347.82
	50010		634.48	602.76	693.17
	50020		908.60	863.17	992.65
	50040		826.98	785.63	903.47
	50045		833.36	791.69	910.44
	50060		1,013.70	963.02	1,107.47
	50065		1,073.07	1,019.42	1,172.33
	50070		1,052.67	1,000.04	1,150.05
	50075		1,291.43	1,226.86	1,410.89
	50080		623.43	592.26	681.10
	50081		997.58	947.70	1,089.86
	50100		1,022.85	971.71	1,117.47
	50120		847.70	805.32	926.12
	50125		876.21	832.40	957.26
	50130		920.55	874.52	1,005.70
	50200		459.95	436.95	502.49
#	50200		109.65	104.17	119.80
	50205		710.91	675.36	776.66

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	50220		959.08	911.13	1,047.80
	50225		1,054.36	1,001.64	1,151.89
	50230		1,139.93	1,082.93	1,245.37
	50234		1,156.38	1,098.56	1,263.34
	50236		1,300.68	1,235.65	1,421.00
	50240		1,184.55	1,125.32	1,294.12
	50250		1,081.90	1,027.81	1,181.98
	50280		844.75	802.51	922.89
	50290		803.83	763.64	878.19
	50320		1,467.02	1,393.67	1,602.72
	50327		197.31	187.44	215.56
	50328		172.19	163.58	188.12
	50329		164.79	156.55	180.03
	50340		927.02	880.67	1,012.77
	50360		2,290.50	2,175.98	2,502.38
	50365		2,787.64	2,648.26	3,045.50
	50370		1,161.12	1,103.06	1,268.52
	50380		1,958.34	1,860.42	2,139.48
	50382		889.46	844.99	971.74
#	50382		217.98	207.08	238.14
	50384		769.44	730.97	840.62
#	50384		197.57	187.69	215.84
#	50385		189.34	179.87	206.85
	50385		929.47	883.00	1,015.45
	50386		701.91	666.81	766.83
#	50386		143.52	136.34	156.79
#	50387		72.26	68.65	78.95
	50387		483.24	459.08	527.94
#	50389		45.98	43.68	50.23
	50389		367.47	349.10	401.47
	50390		81.27	77.21	88.79

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	50391		85.16	80.90	93.04
	50391		124.08	117.88	135.56
	50396		99.35	94.38	108.54
	50400		1,027.84	976.45	1,122.92
	50405		1,238.11	1,176.20	1,352.63
	50430		576.78	547.94	630.13
#	50430		135.16	128.40	147.66
#	50431		58.24	55.33	63.63
	50431		286.56	272.23	313.06
	50432		807.35	766.98	882.03
#	50432		177.55	168.67	193.97
#	50433		219.56	208.58	239.87
	50433		1,004.44	954.22	1,097.35
	50434		807.42	767.05	882.11
#	50434		166.59	158.26	182.00
#	50435		87.22	82.86	95.29
	50435		523.64	497.46	572.08
	50436		135.49	128.72	148.03
	50437		223.59	212.41	244.27
	50500		1,211.17	1,150.61	1,323.20
	50520		1,094.28	1,039.57	1,195.51
	50525		1,380.67	1,311.64	1,508.39
	50526		1,476.11	1,402.30	1,612.65
	50540		1,020.08	969.08	1,114.44
	50541		816.91	776.06	892.47
	50542		1,039.20	987.24	1,135.33
	50543		1,323.18	1,257.02	1,445.57
	50544		1,100.22	1,045.21	1,201.99
	50545		1,182.99	1,123.84	1,292.42
	50546		1,073.93	1,020.23	1,173.26
	50547		1,533.89	1,457.20	1,675.78

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	50548		1,188.44	1,129.02	1,298.37
	50551		367.00	348.65	400.95
#	50551		259.12	246.16	283.08
	50553		392.07	372.47	428.34
#	50553		276.22	262.41	301.77
	50555		418.64	397.71	457.37
#	50555		299.73	284.74	327.45
	50557		425.69	404.41	465.07
#	50557		303.41	288.24	331.48
	50561		482.73	458.59	527.38
#	50561		346.35	329.03	378.38
	50562		510.96	485.41	558.22
	50570		430.64	409.11	470.48
	50572		464.83	441.59	507.83
	50574		493.93	469.23	539.61
	50575		623.08	591.93	680.72
	50576		492.23	467.62	537.76
	50580		530.50	503.98	579.58
	50590		734.28	697.57	802.21
#	50590		514.84	489.10	562.47
#	50592		296.73	281.89	324.17
	50592		2,429.46	2,307.99	2,654.19
#	50593		398.11	378.20	434.93
	50593		3,249.51	3,087.03	3,550.08
	50600		835.56	793.78	912.85
	50605		934.53	887.80	1,020.97
	50606		448.31	425.89	489.77
#	50606		127.43	121.06	139.22
	50610		841.69	799.61	919.55
	50620		806.14	765.83	880.70
	50630		796.46	756.64	870.14

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	50650		926.08	879.78	1,011.75
	50660		1,016.40	965.58	1,110.42
#	50684		45.65	43.37	49.88
	50684		120.43	114.41	131.57
#	50686		79.53	75.55	86.88
	50686		140.82	133.78	153.85
	50688		69.64	66.16	76.08
#	50690		61.17	58.11	66.83
	50690		111.44	105.87	121.75
	50693		882.86	838.72	964.53
#	50693		176.13	167.32	192.42
#	50694		229.18	217.72	250.38
	50694		992.29	942.68	1,084.08
#	50695		293.59	278.91	320.75
	50695		1,192.47	1,132.85	1,302.78
	50700		827.31	785.94	903.83
#	50705		161.52	153.44	176.46
	50705		1,639.33	1,557.36	1,790.96
	50706		741.37	704.30	809.95
#	50706		156.32	148.50	170.78
	50715		1,116.94	1,061.09	1,220.25
	50722		902.53	857.40	986.01
	50725		980.88	931.84	1,071.62
	50727		466.19	442.88	509.31
	50728		630.08	598.58	688.37
	50740		1,153.55	1,095.87	1,260.25
	50750		1,025.10	973.85	1,119.93
	50760		1,023.62	972.44	1,118.31
	50770		1,025.10	973.85	1,119.93
	50780		1,002.62	952.49	1,095.36
	50782		957.83	909.94	1,046.43

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	50783		1,002.71	952.57	1,095.46
	50785		1,080.24	1,026.23	1,180.16
	50800		825.39	784.12	901.74
	50810		1,327.13	1,260.77	1,449.89
	50815		1,090.29	1,035.78	1,191.15
	50820		1,173.64	1,114.96	1,282.20
	50825		1,458.83	1,385.89	1,593.77
	50830		1,593.61	1,513.93	1,741.02
	50840		1,096.71	1,041.87	1,198.15
	50845		1,119.97	1,063.97	1,223.57
	50860		844.42	802.20	922.53
	50900		754.89	717.15	824.72
	50920		788.76	749.32	861.72
	50930		980.55	931.52	1,071.25
	50940		794.47	754.75	867.96
	50945		863.08	819.93	942.92
	50947		1,229.59	1,168.11	1,343.33
	50948		1,127.73	1,071.34	1,232.04
	50951		382.52	363.39	417.90
#	50951		268.82	255.38	293.69
	50953		406.24	385.93	443.82
#	50953		287.33	272.96	313.90
	50955		432.96	411.31	473.01
#	50955		309.45	293.98	338.08
	50957		436.75	414.91	477.15
#	50957		311.10	295.55	339.88
	50961		394.46	374.74	430.95
#	50961		278.92	264.97	304.72
	50970		325.02	308.77	355.09
	50972		314.29	298.58	343.37
	50974		413.83	393.14	452.11

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	50976		408.17	387.76	445.92
	50980		312.27	296.66	341.16
	51020		428.65	407.22	468.30
	51040		267.24	253.88	291.96
	51045		450.02	427.52	491.65
	51050		428.12	406.71	467.72
	51060		526.52	500.19	575.22
	51065		523.76	497.57	572.21
	51080		372.73	354.09	407.20
	51100		71.22	67.66	77.81
#	51100		33.83	32.14	36.96
#	51101		44.59	42.36	48.71
	51101		146.96	139.61	160.55
	51102		231.35	219.78	252.75
#	51102		125.61	119.33	137.23
	51500		573.73	545.04	626.80
	51520		537.96	511.06	587.72
	51525		767.88	729.49	838.91
	51530		690.51	655.98	754.38
	51535		698.53	663.60	763.14
	51550		866.70	823.37	946.88
	51555		1,124.73	1,068.49	1,228.76
	51565		1,145.07	1,087.82	1,250.99
	51570		1,299.96	1,234.96	1,420.20
	51575		1,604.95	1,524.70	1,753.41
	51580		1,677.53	1,593.65	1,832.70
	51585		1,863.24	1,770.08	2,035.59
	51590		1,708.26	1,622.85	1,866.28
	51595		1,931.41	1,834.84	2,110.07
	51596		2,083.33	1,979.16	2,276.03
	51597		2,035.51	1,933.73	2,223.79

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	51600		37.49	35.62	40.96
	51600		193.48	183.81	211.38
	51605		34.50	32.78	37.70
#	51610		56.87	54.03	62.13
	51610		121.53	115.45	132.77
	51700		73.94	70.24	80.78
#	51700		26.14	24.83	28.55
	51701		43.62	41.44	47.66
#	51701		22.17	21.06	24.22
	51702		62.01	58.91	67.75
#	51702		22.78	21.64	24.89
#	51703		67.46	64.09	73.70
	51703		147.14	139.78	160.75
#	51705		46.65	44.32	50.97
	51705		96.30	91.49	105.21
#	51710		72.20	68.59	78.88
	51710		134.11	127.40	146.51
	51715		332.28	315.67	363.02
#	51715		176.29	167.48	192.60
	51720		87.56	83.18	95.66
#	51720		38.22	36.31	41.76
	51721		533.02	506.37	582.33
#	51721		191.31	181.74	209.00
	51725	26	75.47	71.70	82.46
	51725		187.79	178.40	205.16
	51725	TC	112.31	106.69	122.69
	51726	26	83.20	79.04	90.90
	51726		254.66	241.93	278.22
	51726	TC	171.46	162.89	187.32
	51727		311.61	296.03	340.43
	51727	TC	206.71	196.37	225.83

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	51727	26	104.91	99.66	114.61
	51728		316.53	300.70	345.81
	51728	TC	213.45	202.78	233.20
	51728	26	103.09	97.94	112.63
	51729		334.26	317.55	365.18
	51729	TC	209.54	199.06	228.92
	51729	26	124.72	118.48	136.25
	51736	26	8.61	8.18	9.41
	51736	TC	5.59	5.31	6.11
	51736		14.20	13.49	15.51
	51741	26	8.61	8.18	9.41
	51741	TC	6.20	5.89	6.77
	51741		14.81	14.07	16.18
	51784		63.70	60.52	69.60
	51784	26	36.66	34.83	40.05
	51784	TC	27.04	25.69	29.54
	51785		368.15	349.74	402.20
	51785	TC	274.51	260.78	299.90
	51785	26	93.64	88.96	102.30
	51792	26	55.77	52.98	60.93
	51792		231.29	219.73	252.69
	51792	TC	175.52	166.74	191.75
	51797	26	38.95	37.00	42.55
	51797		144.99	137.74	158.40
	51797	TC	106.04	100.74	115.85
	51798		11.79	11.20	12.88
	51800		925.42	879.15	1,011.02
	51820		968.28	919.87	1,057.85
	51840		615.13	584.37	672.03
	51841		710.58	675.05	776.31
	51845		524.87	498.63	573.42

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	51860		676.13	642.32	738.67
	51865		804.22	764.01	878.61
	51880		424.57	403.34	463.84
	51900		738.65	701.72	806.98
	51920		685.97	651.67	749.42
	51925		939.28	892.32	1,026.17
	51940		1,452.03	1,379.43	1,586.34
	51960		1,230.26	1,168.75	1,344.06
	51980		640.82	608.78	700.10
	51990		666.15	632.84	727.77
	51992		744.57	707.34	813.44
#	52000		71.08	67.53	77.66
	52000		203.78	193.59	222.63
	52001		405.34	385.07	442.83
#	52001		252.41	239.79	275.76
	52005		266.28	252.97	290.92
#	52005		118.57	112.64	129.54
	52007		407.45	387.08	445.14
#	52007		147.25	139.89	160.87
	52010		346.31	328.99	378.34
#	52010		146.49	139.17	160.05
	52204		335.94	319.14	367.01
#	52204		126.31	119.99	137.99
	52214		680.57	646.54	743.52
#	52214		152.52	144.89	166.62
	52224		712.62	676.99	778.54
#	52224		176.29	167.48	192.60
	52234		216.17	205.36	236.16
	52235		253.94	241.24	277.43
	52240		344.21	327.00	376.05
	52250		211.15	200.59	230.68

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	52260		185.22	175.96	202.35
	52265		328.32	311.90	358.69
#	52265		143.82	136.63	157.12
	52270		379.54	360.56	414.64
#	52270		161.34	153.27	176.26
	52275		493.81	469.12	539.49
#	52275		218.60	207.67	238.82
	52276		232.94	221.29	254.48
	52277		285.01	270.76	311.37
	52281		295.15	280.39	322.45
#	52281		135.78	128.99	148.34
	52282		296.81	281.97	324.27
	52283		318.67	302.74	348.15
#	52283		178.00	169.10	194.47
	52284		2,473.22	2,349.56	2,701.99
#	52284		145.58	138.30	159.05
	52285		312.92	297.27	341.86
#	52285		172.86	164.22	188.85
	52287		345.98	328.68	377.98
#	52287		148.92	141.47	162.69
	52290		214.86	204.12	234.74
	52300		246.67	234.34	269.49
	52301		254.73	241.99	278.29
	52305		244.53	232.30	267.15
	52310		284.60	270.37	310.93
#	52310		134.12	127.41	146.52
	52315		439.53	417.55	480.18
#	52315		242.16	230.05	264.56
	52317		822.09	780.99	898.14
#	52317		304.46	289.24	332.63
	52318		414.57	393.84	452.92

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	52320		216.14	205.33	236.13
	52325		281.53	267.45	307.57
	52327		225.95	214.65	246.85
	52330		560.34	532.32	612.17
#	52330		230.88	219.34	252.24
	52332		352.66	335.03	385.28
#	52332		138.75	131.81	151.58
	52334		162.59	154.46	177.63
	52341		249.88	237.39	273.00
	52342		271.71	258.12	296.84
	52343		302.27	287.16	330.23
	52344		324.41	308.19	354.42
	52345		346.19	328.88	378.21
	52346		391.46	371.89	427.67
	52351		266.10	252.80	290.72
	52352		311.32	295.75	340.11
	52353		343.45	326.28	375.22
	52354		366.37	348.05	400.26
	52355		409.87	389.38	447.79
	52356		365.15	346.89	398.92
	52400		425.53	404.25	464.89
	52402		231.50	219.93	252.92
#	52441		183.74	174.55	200.73
	52441		1,157.39	1,099.52	1,264.45
	52442		796.95	757.10	870.67
#	52442		44.26	42.05	48.36
	52443		5,431.40	5,159.83	5,933.80
#	52443		172.05	163.45	187.97
	52450		431.13	409.57	471.01
	52500		345.92	328.62	377.91
	52597		542.73	515.59	592.93

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	52601		520.30	494.29	568.43
	52630		369.77	351.28	403.97
	52640		295.27	280.51	322.59
	52648		522.67	496.54	571.02
	52649		651.68	619.10	711.97
	52700		400.12	380.11	437.13
	53000		135.84	129.05	148.41
	53010		274.86	261.12	300.29
	53020		85.64	81.36	93.56
	53025		61.84	58.75	67.56
	53040		357.13	339.27	390.16
	53060		185.88	176.59	203.08
#	53060		147.57	140.19	161.22
	53080		383.37	364.20	418.83
	53085		584.13	554.92	638.16
	53200		162.46	154.34	177.49
#	53200		127.52	121.14	139.31
	53210		689.93	655.43	753.74
	53215		827.46	786.09	904.00
	53220		410.24	389.73	448.19
	53230		548.82	521.38	599.59
	53235		571.06	542.51	623.89
	53240		386.40	367.08	422.14
	53250		361.64	343.56	395.09
	53260		207.87	197.48	227.10
#	53260		163.74	155.55	178.88
	53265		224.74	213.50	245.53
#	53265		168.66	160.23	184.26
	53270		212.88	202.24	232.58
#	53270		167.22	158.86	182.69
	53275		236.34	224.52	258.20

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	53400		717.63	681.75	784.01
	53405		781.16	742.10	853.42
	53410		873.38	829.71	954.17
	53415		1,005.85	955.56	1,098.89
	53420		752.12	714.51	821.69
	53425		834.58	792.85	911.78
	53430		868.42	825.00	948.75
	53431		1,024.98	973.73	1,119.79
	53440		675.36	641.59	737.83
	53442		708.04	672.64	773.54
	53444		710.94	675.39	776.70
	53445		681.41	647.34	744.44
	53446		580.07	551.07	633.73
	53447		724.12	687.91	791.10
	53448		1,136.79	1,079.95	1,241.94
	53449		553.06	525.41	604.22
	53450		373.35	354.68	407.88
	53460		416.02	395.22	454.50
	53500		668.26	634.85	730.08
	53502		441.18	419.12	481.99
	53505		440.87	418.83	481.65
	53510		569.74	541.25	622.44
	53515		711.92	676.32	777.77
	53520		505.81	480.52	552.60
	53600		88.20	83.79	96.36
#	53600		56.02	53.22	61.20
	53601		85.81	81.52	93.75
#	53601		47.50	45.13	51.90
	53605		55.99	53.19	61.17
#	53620		76.86	73.02	83.97
	53620		165.43	157.16	180.73

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	53621		63.62	60.44	69.51
	53621		158.32	150.40	172.96
	53660		74.92	71.17	81.85
#	53660		36.92	35.07	40.33
	53661		73.73	70.04	80.55
#	53661		35.72	33.93	39.02
	53665		33.15	31.49	36.21
#	53850		323.99	307.79	353.96
	53850		1,329.83	1,263.34	1,452.84
#	53852		346.87	329.53	378.96
	53852		1,303.67	1,238.49	1,424.26
#	53854		347.18	329.82	379.29
	53854		3,137.90	2,981.01	3,428.16
#	53855		72.09	68.49	78.76
	53855		606.27	575.96	662.35
#	53860		199.89	189.90	218.39
	53860		2,209.12	2,098.66	2,413.46
	53865		2,843.75	2,701.56	3,106.79
#	53865		145.27	138.01	158.71
#	53866		73.31	69.64	80.09
	53866		139.20	132.24	152.08
	54000		159.52	151.54	174.27
#	54000		102.21	97.10	111.67
	54001		194.97	185.22	213.00
#	54001		127.23	120.87	139.00
	54015		274.43	260.71	299.82
	54050		138.62	131.69	151.44
#	54050		93.57	88.89	102.22
#	54055		84.26	80.05	92.06
	54055		132.38	125.76	144.62
	54056		136.71	129.87	149.35

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	54056		95.64	90.86	104.49
#	54057		88.51	84.08	96.69
	54057		136.93	130.08	149.59
	54060		191.87	182.28	209.62
#	54060		119.85	113.86	130.94
	54065		213.27	202.61	233.00
#	54065		147.07	139.72	160.68
	54100		193.19	183.53	211.06
#	54100		102.17	97.06	111.62
	54105		275.60	261.82	301.09
#	54105		192.55	182.92	210.36
	54110		562.58	534.45	614.62
	54111		715.17	679.41	781.32
	54112		837.65	795.77	915.14
	54115		462.90	439.76	505.72
#	54115		389.66	370.18	425.71
	54120		570.38	541.86	623.14
	54125		741.26	704.20	809.83
	54130		1,062.44	1,009.32	1,160.72
	54135		1,339.44	1,272.47	1,463.34
#	54150		84.37	80.15	92.17
	54150		146.59	139.26	160.15
	54160		219.23	208.27	239.51
#	54160		130.97	124.42	143.08
	54161		178.61	169.68	195.13
	54162		254.93	242.18	278.51
#	54162		181.68	172.60	198.49
	54163		202.52	192.39	221.25
	54164		180.73	171.69	197.44
#	54200		80.79	76.75	88.26
	54200		115.42	109.65	126.10

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	54205		481.81	457.72	526.38
	54220		241.40	229.33	263.73
#	54220		128.92	122.47	140.84
#	54230		72.18	68.57	78.86
	54230		106.50	101.18	116.36
	54231		144.31	137.09	157.65
#	54231		103.86	98.67	113.47
	54235		91.51	86.93	99.97
#	54235		67.00	63.65	73.20
	54240	26	66.03	62.73	72.14
	54240	TC	43.05	40.90	47.04
	54240		109.08	103.63	119.17
	54250	TC	13.56	12.88	14.81
	54250		121.22	115.16	132.43
	54250	26	107.67	102.29	117.63
	54300		582.26	553.15	636.12
	54304		670.15	636.64	732.14
	54308		642.85	610.71	702.32
	54312		734.27	697.56	802.19
	54316		886.98	842.63	969.02
	54318		640.65	608.62	699.91
	54322		699.15	664.19	763.82
	54324		863.90	820.71	943.82
	54326		841.72	799.63	919.57
	54328		836.70	794.87	914.10
	54332		901.12	856.06	984.47
	54336		1,057.93	1,005.03	1,155.78
	54340		514.29	488.58	561.87
	54344		843.44	801.27	921.46
	54348		901.90	856.81	985.33
	54352		1,254.44	1,191.72	1,370.48

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	54360		647.21	614.85	707.08
	54380		717.04	681.19	783.37
	54385		833.02	791.37	910.08
	54390		1,104.28	1,049.07	1,206.43
	54400		479.44	455.47	523.79
	54401		605.89	575.60	661.94
	54405		723.27	687.11	790.18
	54406		657.79	624.90	718.64
	54408		711.20	675.64	776.99
	54410		774.83	736.09	846.50
	54411		920.98	874.93	1,006.17
	54415		482.77	458.63	527.42
	54416		646.27	613.96	706.05
	54417		805.22	764.96	879.70
	54420		630.27	598.76	688.57
	54430		574.98	546.23	628.16
	54435		377.76	358.87	412.70
	54437		611.68	581.10	668.27
	54450		70.16	66.65	76.65
#	54450		50.55	48.02	55.22
	54500		66.50	63.18	72.66
	54505		190.22	180.71	207.82
	54512		485.10	460.85	529.98
	54520		300.81	285.77	328.64
	54522		529.49	503.02	578.47
	54530		462.73	439.59	505.53
	54535		667.67	634.29	729.43
	54550		446.05	423.75	487.31
	54560		617.21	586.35	674.30
	54600		411.50	390.93	449.57
	54620		269.63	256.15	294.57

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	54640		390.96	371.41	427.12
	54650		641.00	608.95	700.29
	54660		328.28	311.87	358.65
	54670		372.55	353.92	407.01
	54680		705.83	670.54	771.12
	54690		588.20	558.79	642.61
	54692		676.19	642.38	738.74
	54700		196.93	187.08	215.14
	54800		110.71	105.17	120.95
	54830		341.81	324.72	373.43
	54840		293.78	279.09	320.95
	54860		381.99	362.89	417.32
	54861		513.65	487.97	561.17
	54865		329.97	313.47	360.49
	54900		718.32	682.40	784.76
	54901		944.61	897.38	1,031.99
#	55000		76.16	72.35	83.20
	55000		121.21	115.15	132.42
	55040		309.66	294.18	338.31
	55041		464.43	441.21	507.39
	55060		348.11	330.70	380.31
	55100		237.44	225.57	259.41
#	55100		160.21	152.20	175.03
	55110		357.39	339.52	390.45
	55120		325.46	309.19	355.57
	55150		449.05	426.60	490.59
	55175		333.82	317.13	364.70
	55180		616.92	586.07	673.98
	55200		379.58	360.60	414.69
#	55200		253.93	241.23	277.41
	55250		330.77	314.23	361.36

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	55250		212.78	202.14	232.46
	55300		164.47	156.25	179.69
	55400		451.28	428.72	493.03
	55500		361.87	343.78	395.35
	55520		443.35	421.18	484.36
	55530		321.41	305.34	351.14
	55535		392.08	372.48	428.35
	55540		534.85	508.11	584.33
	55550		391.19	371.63	427.37
	55600		383.98	364.78	419.50
	55605		475.15	451.39	519.10
	55650		645.46	613.19	705.17
	55680		316.66	300.83	345.95
	55705		221.07	210.02	241.52
#	55705		98.79	93.85	107.93
	55706		202.63	192.50	221.38
	55707		324.04	307.84	354.02
#	55707		135.26	128.50	147.78
	55708		397.95	378.05	434.76
#	55708		168.71	160.27	184.31
	55709		546.35	519.03	596.88
#	55709		162.04	153.94	177.03
	55710		613.15	582.49	669.86
#	55710		187.46	178.09	204.80
	55711		347.28	329.92	379.41
#	55711		134.59	127.86	147.04
	55712		568.88	540.44	621.51
#	55712		156.99	149.14	171.51
	55713		716.51	680.68	782.78
#	55713		185.70	176.42	202.88
	55714		697.95	663.05	762.51

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	55714		168.98	160.53	184.61
	55715		78.55	74.62	85.81
#	55715		47.29	44.93	51.67
	55720		410.07	389.57	448.01
	55725		539.52	512.54	589.42
	55801		976.63	927.80	1,066.97
	55810		1,160.17	1,102.16	1,267.48
	55812		1,424.91	1,353.66	1,556.71
	55815		1,558.67	1,480.74	1,702.85
	55821		750.00	712.50	819.38
	55831		769.93	731.43	841.14
	55840		1,039.50	987.53	1,135.66
	55842		1,037.07	985.22	1,133.00
	55845		1,204.41	1,144.19	1,315.82
	55860		780.57	741.54	852.77
	55862		975.68	926.90	1,065.94
	55865		1,185.04	1,125.79	1,294.66
	55866		1,077.14	1,023.28	1,176.77
	55867		941.37	894.30	1,028.45
	55868		1,102.95	1,047.80	1,204.97
	55869		1,324.93	1,258.68	1,447.48
	55870		179.84	170.85	196.48
#	55870		126.82	120.48	138.55
#	55873		682.61	648.48	745.75
	55873		5,273.25	5,009.59	5,761.03
	55874		3,410.08	3,239.58	3,725.52
#	55874		141.87	134.78	155.00
	55875		679.64	645.66	742.51
#	55876		89.67	85.19	97.97
	55876		145.14	137.88	158.56
	55877		667.11	633.75	728.81

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	55880		873.46	829.79	954.26
	55881		8,543.02	8,115.87	9,333.25
#	55881		431.03	409.48	470.90
	55882		8,885.89	8,441.60	9,707.84
#	55882		528.42	502.00	577.30
	55920		381.10	362.05	416.36
	56405		140.05	133.05	153.01
#	56405		113.38	107.71	123.87
	56420		172.86	164.22	188.85
#	56420		97.77	92.88	106.81
	56440		161.89	153.80	176.87
	56441		175.55	166.77	191.79
#	56441		137.24	130.38	149.94
	56442		42.95	40.80	46.92
	56501		176.10	167.30	192.40
#	56501		116.33	110.51	127.09
	56515		263.15	249.99	287.49
#	56515		186.84	177.50	204.13
	56605		90.31	85.79	98.66
#	56605		52.01	49.41	56.82
	56606		38.09	36.19	41.62
#	56606		25.52	24.24	27.88
	56620		534.08	507.38	583.49
	56625		611.96	581.36	668.56
	56630		888.99	844.54	971.22
	56631		1,101.55	1,046.47	1,203.44
	56632		1,322.99	1,256.84	1,445.37
	56633		1,142.04	1,084.94	1,247.68
	56634		1,220.11	1,159.10	1,332.97
	56637		1,425.15	1,353.89	1,556.97
	56640		1,425.24	1,353.98	1,557.08

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	56700		178.29	169.38	194.79
	56740		279.79	265.80	305.67
	56800		224.37	213.15	245.12
	56805		1,020.82	969.78	1,115.25
	56810		238.63	226.70	260.71
#	56820		75.48	71.71	82.47
	56820		123.60	117.42	135.03
	56821		165.51	157.23	180.81
#	56821		101.46	96.39	110.85
	57000		175.87	167.08	192.14
	57010		402.78	382.64	440.04
#	57020		69.21	65.75	75.61
	57020		115.79	110.00	126.50
	57022		157.60	149.72	172.18
	57023		281.09	267.04	307.10
	57061		154.86	147.12	169.19
#	57061		102.15	97.04	111.60
	57065		232.71	221.07	254.23
#	57065		163.14	154.98	178.23
#	57100		58.64	55.71	64.07
	57100		101.55	96.47	110.94
	57105		168.25	159.84	183.82
#	57105		131.78	125.19	143.97
	57106		482.87	458.73	527.54
	57107		1,316.04	1,250.24	1,437.78
	57109		1,618.40	1,537.48	1,768.10
	57110		794.72	754.98	868.23
	57111		1,618.40	1,537.48	1,768.10
	57120		467.79	444.40	511.06
	57130		213.86	203.17	233.65
#	57130		151.34	143.77	165.34

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	57135		234.13	222.42	255.78
#	57135		165.48	157.21	180.79
	57150		50.67	48.14	55.36
#	57150		22.47	21.35	24.55
	57155		382.70	363.57	418.11
#	57155		236.82	224.98	258.73
	57156		214.51	203.78	234.35
#	57156		125.63	119.35	137.25
	57160		68.29	64.88	74.61
#	57160		40.71	38.67	44.47
	57170		70.57	67.04	77.10
#	57170		41.76	39.67	45.62
	57180		180.06	171.06	196.72
#	57180		104.67	99.44	114.36
	57200		297.89	283.00	325.45
	57210		349.37	331.90	381.69
	57220		305.62	290.34	333.89
	57230		367.78	349.39	401.80
	57240		540.54	513.51	590.54
	57250		541.14	514.08	591.19
	57260		684.18	649.97	747.47
	57265		765.59	727.31	836.41
	57267		220.60	209.57	241.01
	57268		449.71	427.22	491.30
	57270		716.97	681.12	783.29
	57280		853.20	810.54	932.12
	57282		611.20	580.64	667.74
	57283		615.23	584.47	672.14
	57284		735.94	699.14	804.01
	57285		611.02	580.47	667.54
	57287		649.80	617.31	709.91

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	57288		657.36	624.49	718.16
	57289		694.38	659.66	758.61
	57291		483.31	459.14	528.01
	57292		728.39	691.97	795.77
	57295		442.83	420.69	483.79
	57296		841.22	799.16	919.03
	57300		554.10	526.40	605.36
	57305		890.27	845.76	972.62
	57307		982.40	933.28	1,073.27
	57308		619.52	588.54	676.82
	57310		440.64	418.61	481.40
	57311		495.96	471.16	541.83
	57320		496.49	471.67	542.42
	57330		681.52	647.44	744.56
	57335		1,032.55	980.92	1,128.06
	57400		115.32	109.55	125.98
	57410		95.74	90.95	104.59
	57415		153.50	145.83	167.70
#	57420		81.20	77.14	88.71
	57420		133.00	126.35	145.30
	57421		176.35	167.53	192.66
#	57421		109.54	104.06	119.67
	57423		818.46	777.54	894.17
	57425		857.58	814.70	936.91
	57426		769.54	731.06	840.72
#	57452		81.85	77.76	89.42
	57452		121.38	115.31	132.61
	57454		161.85	153.76	176.82
#	57454		118.63	112.70	129.61
	57455		155.99	148.19	170.42
#	57455		96.85	92.01	105.81

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	57456		89.48	85.01	97.76
	57456		145.87	138.58	159.37
	57460		295.03	280.28	322.32
#	57460		141.48	134.41	154.57
	57461		334.67	317.94	365.63
#	57461		162.44	154.32	177.47
	57465		53.89	51.20	58.88
#	57465		37.03	35.18	40.46
#	57500		67.77	64.38	74.04
	57500		143.77	136.58	157.07
	57505		141.60	134.52	154.70
#	57505		96.24	91.43	105.14
	57510		158.04	150.14	172.66
#	57510		101.65	96.57	111.06
	57511		182.40	173.28	199.27
#	57511		128.76	122.32	140.67
	57513		188.22	178.81	205.63
#	57513		128.15	121.74	140.00
	57520		348.12	330.71	380.32
#	57520		268.44	255.02	293.27
	57522		290.92	276.37	317.83
#	57522		227.48	216.11	248.53
	57530		333.58	316.90	364.44
	57531		1,651.86	1,569.27	1,804.66
	57540		696.36	661.54	760.77
	57545		733.40	696.73	801.24
	57550		380.23	361.22	415.40
	57555		545.08	517.83	595.50
	57556		517.96	492.06	565.87
	57558		144.31	137.09	157.65
#	57558		111.52	105.94	121.83

**WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026**

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	57700		310.19	294.68	338.88
	57720		293.44	278.77	320.59
	57800		71.24	67.68	77.83
#	57800		43.05	40.90	47.04
#	58100		55.54	52.76	60.67
	58100		95.07	90.32	103.87
	58110		50.10	47.60	54.74
#	58110		35.69	33.91	39.00
	58120		288.61	274.18	315.31
#	58120		207.40	197.03	226.58
	58140		810.50	769.98	885.48
	58145		494.19	469.48	539.90
	58146		1,014.13	963.42	1,107.93
	58150		930.30	883.79	1,016.36
	58152		1,089.67	1,035.19	1,190.47
	58180		864.54	821.31	944.51
	58200		1,254.38	1,191.66	1,370.41
	58210		1,674.77	1,591.03	1,829.68
	58240		2,668.65	2,535.22	2,915.50
	58260		738.38	701.46	806.68
	58262		815.98	775.18	891.46
	58263		875.33	831.56	956.29
	58267		937.38	890.51	1,024.09
	58270		790.96	751.41	864.12
	58275		873.22	829.56	953.99
	58280		930.55	884.02	1,016.62
	58285		1,323.94	1,257.74	1,446.40
	58290		1,011.17	960.61	1,104.70
	58291		1,092.62	1,037.99	1,193.69
	58292		1,151.22	1,093.66	1,257.71
	58294		1,069.36	1,015.89	1,168.27

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	58301		58.16	55.25	63.54
	58301		107.51	102.13	117.45
	58321		80.71	76.67	88.17
#	58321		42.10	40.00	46.00
	58322		89.70	85.22	98.00
#	58322		50.17	47.66	54.81
	58323		14.42	13.70	15.76
#	58323		10.43	9.91	11.40
#	58340		51.34	48.77	56.09
	58340		220.81	209.77	241.24
	58345		253.39	240.72	276.83
	58346		410.96	390.41	448.97
#	58350		81.24	77.18	88.76
	58350		135.79	129.00	148.35
	58353		832.03	790.43	908.99
#	58353		201.62	191.54	220.27
#	58356		306.65	291.32	335.02
	58356		1,509.55	1,434.07	1,649.18
	58400		410.08	389.58	448.02
	58410		717.48	681.61	783.85
	58520		702.70	667.57	767.71
	58540		806.82	766.48	881.45
	58541		644.36	612.14	703.96
	58542		730.45	693.93	798.02
	58543		740.17	703.16	808.63
	58544		799.33	759.36	873.26
	58545		806.36	766.04	880.95
	58546		980.30	931.29	1,070.98
	58548		1,723.73	1,637.54	1,883.17
	58550		783.72	744.53	856.21
	58552		875.15	831.39	956.10

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	58553		986.39	937.07	1,077.63
	58554		1,161.58	1,103.50	1,269.03
	58555		311.75	296.16	340.58
#	58555		134.31	127.59	146.73
#	58558		204.67	194.44	223.61
	58558		1,182.31	1,123.19	1,291.67
	58559		249.89	237.40	273.01
	58560		275.86	262.07	301.38
	58561		315.23	299.47	344.39
	58562		381.94	362.84	417.27
#	58562		195.30	185.54	213.37
#	58563		217.59	206.71	237.72
	58563		1,861.81	1,768.72	2,034.03
#	58565		399.94	379.94	436.93
	58565		1,481.17	1,407.11	1,618.18
	58570		723.22	687.06	790.12
	58571		824.61	783.38	900.89
	58572		943.21	896.05	1,030.46
	58573		1,103.27	1,048.11	1,205.33
	58575		1,771.71	1,683.12	1,935.59
#	58580		360.51	342.48	393.85
	58580		2,431.64	2,310.06	2,656.57
	58600		329.16	312.70	359.61
	58605		298.99	284.04	326.65
	58611		65.62	62.34	71.69
	58615		223.25	212.09	243.90
	58660		626.04	594.74	683.95
	58661		585.63	556.35	639.80
	58662		644.61	612.38	704.24
	58670		329.77	313.28	360.27
	58671		329.77	313.28	360.27

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	58672		644.21	612.00	703.80
	58673		699.44	664.47	764.14
	58674		718.63	682.70	785.11
	58700		725.19	688.93	792.27
	58720		693.09	658.44	757.21
	58740		820.59	779.56	896.49
	58750		799.73	759.74	873.70
	58752		797.28	757.42	871.03
	58760		721.65	685.57	788.41
	58770		757.93	720.03	828.03
	58800		343.12	325.96	374.85
#	58800		277.22	263.36	302.86
	58805		375.94	357.14	410.71
	58820		297.83	282.94	325.38
	58822		628.72	597.28	686.87
	58825		623.99	592.79	681.71
	58900		384.01	364.81	419.53
	58920		628.12	596.71	686.22
	58925		693.39	658.72	757.53
	58940		508.39	482.97	555.42
	58943		1,123.96	1,067.76	1,227.92
	58950		1,061.06	1,008.01	1,159.21
	58951		1,327.17	1,260.81	1,449.93
	58952		1,514.35	1,438.63	1,654.42
	58953		1,842.94	1,750.79	2,013.41
	58954		1,992.81	1,893.17	2,177.15
	58956		1,256.06	1,193.26	1,372.25
	58958		1,452.84	1,380.20	1,587.23
	58960		936.64	889.81	1,023.28
	58970		231.89	220.30	253.35
#	58970		172.74	164.10	188.72

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	58976		249.72	237.23	272.81
#	58976		186.59	177.26	203.85
#	59000		73.49	69.82	80.29
	59000		116.40	110.58	127.17
	59001		161.79	153.70	176.76
	59012		182.50	173.38	199.39
	59015		158.62	150.69	173.29
#	59015		119.09	113.14	130.11
	59020		70.06	66.56	76.54
	59020	26	36.89	35.05	40.31
	59020	TC	33.17	31.51	36.24
	59025		48.81	46.37	53.33
	59025	26	29.43	27.96	32.15
	59025	TC	19.38	18.41	21.17
	59030		100.80	95.76	110.12
	59050		45.26	43.00	49.45
	59051		37.10	35.25	40.54
	59070		396.96	377.11	433.68
#	59070		279.58	265.60	305.44
	59072		470.75	447.21	514.29
	59074		383.17	364.01	418.61
#	59074		279.58	265.60	305.44
	59076		470.75	447.21	514.29
	59100		775.42	736.65	847.15
	59120		738.94	701.99	807.29
	59121		739.67	702.69	808.09
	59130		859.27	816.31	938.76
	59136		814.26	773.55	889.58
	59140		379.09	360.14	414.16
	59150		717.14	681.28	783.47
	59151		699.05	664.10	763.72

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	59160		255.97	243.17	279.65
#	59160		168.01	159.61	183.55
#	59200		60.89	57.85	66.53
	59200		125.55	119.27	137.16
	59300		219.24	208.28	239.52
#	59300		134.96	128.21	147.44
	59320		138.75	131.81	151.58
	59325		218.45	207.53	238.66
	59350		251.04	238.49	274.26
	59400		2,216.38	2,105.56	2,421.39
	59409		733.40	696.73	801.24
	59410		989.32	939.85	1,080.83
	59412		95.33	90.56	104.14
	59414		83.72	79.53	91.46
	59425		566.38	538.06	618.77
#	59425		398.44	378.52	435.30
#	59426		730.71	694.17	798.30
	59426		1,039.94	987.94	1,136.13
	59430		255.73	242.94	279.38
#	59430		164.41	156.19	179.62
	59510		2,483.56	2,359.38	2,713.29
	59514		839.19	797.23	916.81
	59515		1,243.02	1,180.87	1,358.00
	59525		434.71	412.97	474.92
	59610		2,341.80	2,224.71	2,558.42
	59612		839.78	797.79	917.46
	59614		1,086.01	1,031.71	1,186.47
	59618		2,512.51	2,386.88	2,744.91
	59620		869.41	825.94	949.83
	59622		1,281.34	1,217.27	1,399.86
	59812		352.34	334.72	384.93

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	59812		279.09	265.14	304.91
	59820		420.62	399.59	459.53
#	59820		347.07	329.72	379.18
	59821		418.30	397.39	457.00
#	59821		341.68	324.60	373.29
	59830		418.34	397.42	457.03
	59840		239.64	227.66	261.81
#	59840		200.10	190.10	218.62
	59841		417.76	396.87	456.40
#	59841		337.47	320.60	368.69
	59850		355.61	337.83	388.50
	59851		385.16	365.90	420.79
	59852		528.12	501.71	576.97
	59855		386.86	367.52	422.65
	59856		451.71	429.12	493.49
	59857		526.76	500.42	575.48
	59866		216.26	205.45	236.27
	59870		476.43	452.61	520.50
	59871		121.50	115.43	132.74
	60000		178.58	169.65	195.10
#	60000		140.57	133.54	153.57
#	60100		65.74	62.45	71.82
	60100		105.27	100.01	115.01
	60200		613.67	582.99	670.44
	60210		642.45	610.33	701.88
	60212		970.57	922.04	1,060.35
	60220		634.81	603.07	693.53
	60225		842.49	800.37	920.43
	60240		826.06	784.76	902.47
	60252		1,175.17	1,116.41	1,283.87
	60254		1,480.45	1,406.43	1,617.39

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	60260		967.13	918.77	1,056.59
	60270		1,227.57	1,166.19	1,341.12
	60271		943.87	896.68	1,031.18
	60280		400.33	380.31	437.36
	60281		516.33	490.51	564.09
#	60300		41.88	39.79	45.76
	60300		98.27	93.36	107.36
	60500		886.97	842.62	969.01
	60502		1,199.13	1,139.17	1,310.05
	60505		1,190.51	1,130.98	1,300.63
	60512		212.93	202.28	232.62
	60520		980.31	931.29	1,070.98
	60521		1,080.59	1,026.56	1,180.54
	60522		1,300.98	1,235.93	1,421.32
	60540		1,007.86	957.47	1,101.09
	60545		1,172.54	1,113.91	1,281.00
	60600		1,235.25	1,173.49	1,349.51
	60605		1,525.15	1,448.89	1,666.22
	60650		1,105.26	1,050.00	1,207.50
#	60660		278.87	264.93	304.67
	60660		2,381.57	2,262.49	2,601.86
	60661		392.52	372.89	428.82
#	60661		191.78	182.19	209.52
	61000		111.19	105.63	121.47
	61001		105.74	100.45	115.52
	61020		98.40	93.48	107.50
	61026		104.53	99.30	114.20
	61050		68.75	65.31	75.11
	61055		98.28	93.37	107.38
	61070		50.82	48.28	55.52
	61105		488.93	464.48	534.15

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	61107		292.89	278.25	319.99
	61108		918.65	872.72	1,003.63
	61120		765.62	727.34	836.44
	61140		1,263.33	1,200.16	1,380.18
	61150		1,336.28	1,269.47	1,459.89
	61151		994.61	944.88	1,086.61
	61154		1,279.80	1,215.81	1,398.18
	61156		1,224.52	1,163.29	1,337.78
	61210		341.85	324.76	373.47
	61215		545.55	518.27	596.01
	61250		877.31	833.44	958.46
	61253		994.61	944.88	1,086.61
	61304		1,612.01	1,531.41	1,761.12
	61305		1,965.54	1,867.26	2,147.35
	61312		2,015.28	1,914.52	2,201.70
	61313		1,950.40	1,852.88	2,130.81
	61314		1,792.20	1,702.59	1,957.98
	61315		2,023.81	1,922.62	2,211.01
	61316		81.28	77.22	88.80
	61320		1,844.80	1,752.56	2,015.44
	61321		2,076.74	1,972.90	2,268.84
	61322		2,313.07	2,197.42	2,527.03
	61323		2,313.51	2,197.83	2,527.50
	61330		1,765.84	1,677.55	1,929.18
	61333		1,966.71	1,868.37	2,148.63
	61340		1,427.47	1,356.10	1,559.52
	61343		2,121.28	2,015.22	2,317.50
	61345		1,996.18	1,896.37	2,180.83
	61450		1,873.53	1,779.85	2,046.83
	61458		1,969.64	1,871.16	2,151.83
	61460		2,055.72	1,952.93	2,245.87

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	61500		1,194.92	1,135.17	1,305.45
	61501		1,049.62	997.14	1,146.71
	61510		2,162.61	2,054.48	2,362.65
	61512		2,476.56	2,352.73	2,705.64
	61514		1,861.94	1,768.84	2,034.17
	61516		1,825.95	1,734.65	1,994.85
	61517		80.94	76.89	88.42
	61518		2,696.06	2,561.26	2,945.45
	61519		2,841.88	2,699.79	3,104.76
	61520		3,526.64	3,350.31	3,852.86
	61521		3,032.87	2,881.23	3,313.41
	61522		2,131.54	2,024.96	2,328.70
	61524		2,035.32	1,933.55	2,223.58
	61526		3,045.67	2,893.39	3,327.40
	61530		2,956.87	2,809.03	3,230.38
	61531		1,230.46	1,168.94	1,344.28
	61533		1,506.08	1,430.78	1,645.40
	61534		1,629.75	1,548.26	1,780.50
	61535		1,017.15	966.29	1,111.23
	61536		2,495.56	2,370.78	2,726.40
	61537		2,373.55	2,254.87	2,593.10
	61538		2,564.46	2,436.24	2,801.68
	61539		2,293.18	2,178.52	2,505.30
	61540		2,123.03	2,016.88	2,319.41
	61541		2,096.84	1,992.00	2,290.80
	61543		2,118.60	2,012.67	2,314.57
	61544		1,854.18	1,761.47	2,025.69
	61545		3,086.24	2,931.93	3,371.72
	61546		2,243.50	2,131.33	2,451.03
	61548		1,489.77	1,415.28	1,627.57
	61550		1,208.87	1,148.43	1,320.69

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	61552		1,475.90	1,402.11	1,612.43
	61556		1,679.93	1,595.93	1,835.32
	61557		1,671.10	1,587.55	1,825.68
	61558		1,851.57	1,758.99	2,022.84
	61559		2,348.89	2,231.45	2,566.17
	61563		1,936.14	1,839.33	2,115.23
	61564		2,343.30	2,226.14	2,560.06
	61566		2,182.94	2,073.79	2,384.86
	61567		2,485.52	2,361.24	2,715.43
	61570		1,836.65	1,744.82	2,006.54
	61571		1,949.26	1,851.80	2,129.57
	61575		2,427.18	2,305.82	2,651.69
	61576		4,171.11	3,962.55	4,556.93
	61580		2,184.75	2,075.51	2,386.84
	61581		2,317.02	2,201.17	2,531.35
	61582		3,021.98	2,870.88	3,301.51
	61583		2,903.62	2,758.44	3,172.21
	61584		2,809.28	2,668.82	3,069.14
	61585		3,235.12	3,073.36	3,534.36
	61586		2,582.05	2,452.95	2,820.89
	61590		2,646.36	2,514.04	2,891.15
	61591		2,765.59	2,627.31	3,021.41
	61592		3,022.91	2,871.76	3,302.52
	61595		2,163.49	2,055.32	2,363.62
	61596		2,070.15	1,966.64	2,261.64
	61597		2,959.27	2,811.31	3,233.01
	61598		2,826.05	2,684.75	3,087.46
	61600		1,889.51	1,795.03	2,064.28
	61601		2,377.92	2,259.02	2,597.87
	61605		1,887.99	1,793.59	2,062.63
	61606		2,725.01	2,588.76	2,977.07

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	61607		2,485.70	2,361.42	2,715.63
	61608		3,161.58	3,003.50	3,454.03
	61611		435.10	413.35	475.35
	61613		3,206.90	3,046.56	3,503.54
	61615		2,794.74	2,655.00	3,053.25
	61616		3,149.47	2,992.00	3,440.80
	61618		1,215.30	1,154.54	1,327.72
	61619		1,565.42	1,487.15	1,710.22
	61623		525.36	499.09	573.95
	61624		1,061.78	1,008.69	1,159.99
	61626		9,005.38	8,555.11	9,838.38
#	61626		764.98	726.73	835.74
	61630		1,263.40	1,200.23	1,380.26
	61635		1,366.49	1,298.17	1,492.90
	61645		767.52	729.14	838.51
	61650		531.84	505.25	581.04
	61651		227.36	215.99	248.39
	61680		2,215.46	2,104.69	2,420.39
	61682		3,928.45	3,732.03	4,291.83
	61684		2,748.79	2,611.35	3,003.05
	61686		4,291.93	4,077.33	4,688.93
	61690		2,131.32	2,024.75	2,328.46
	61692		3,499.24	3,324.28	3,822.92
	61697		4,043.48	3,841.31	4,417.51
	61698		4,417.47	4,196.60	4,826.09
	61700		3,235.68	3,073.90	3,534.99
	61702		3,853.77	3,661.08	4,210.24
	61703		1,349.18	1,281.72	1,473.98
	61705		2,517.27	2,391.41	2,750.12
	61708		2,465.27	2,342.01	2,693.31
	61710		2,084.76	1,980.52	2,277.60

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	61711		2,510.12	2,384.61	2,742.30
	61715	26	1,287.20	1,222.84	1,406.27
	61720		1,261.51	1,198.43	1,378.19
	61735		1,571.91	1,493.31	1,717.31
	61736		1,158.70	1,100.77	1,265.89
	61737		1,370.95	1,302.40	1,497.76
	61750		1,386.57	1,317.24	1,514.83
	61751		1,381.49	1,312.42	1,509.28
	61760		1,556.54	1,478.71	1,700.52
	61770		1,589.48	1,510.01	1,736.51
	61781		219.00	208.05	239.26
	61782		144.78	137.54	158.17
	61783		210.51	199.98	229.98
	61790		890.76	846.22	973.15
	61791		1,123.49	1,067.32	1,227.42
	61796		1,010.06	959.56	1,103.49
	61797		203.77	193.58	222.62
	61798		1,342.25	1,275.14	1,466.41
	61799		280.53	266.50	306.48
	61800		146.69	139.36	160.26
	61850		986.11	936.80	1,077.32
	61860		1,534.72	1,457.98	1,676.68
	61863		1,493.49	1,418.82	1,631.64
	61864		263.95	250.75	288.36
	61867		2,217.19	2,106.33	2,422.28
	61868		464.34	441.12	507.29
	61880		608.90	578.46	665.23
	61885		545.91	518.61	596.40
	61886		911.93	866.33	996.28
	61888		399.60	379.62	436.56
	61889		1,756.17	1,668.36	1,918.61

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	61891		831.25	789.69	908.14
	61892		1,093.23	1,038.57	1,194.36
	62000		1,036.10	984.30	1,131.95
	62005		1,262.22	1,199.11	1,378.98
	62010		1,517.49	1,441.62	1,657.86
	62100		1,457.08	1,384.23	1,591.86
	62115		1,676.01	1,592.21	1,831.04
	62117		1,914.58	1,818.85	2,091.68
	62120		2,111.33	2,005.76	2,306.62
	62121		1,423.70	1,352.52	1,555.40
	62140		975.24	926.48	1,065.45
	62141		1,112.66	1,057.03	1,215.58
	62142		894.17	849.46	976.88
	62143		1,037.93	986.03	1,133.93
	62145		1,366.80	1,298.46	1,493.23
	62146		1,241.37	1,179.30	1,356.20
	62147		1,365.86	1,297.57	1,492.21
	62148		117.37	111.50	128.23
	62160		175.47	166.70	191.71
	62161		1,501.91	1,426.81	1,640.83
	62162		1,857.04	1,764.19	2,028.82
	62164		2,061.74	1,958.65	2,252.45
	62165		1,399.18	1,329.22	1,528.60
	62180		1,574.77	1,496.03	1,720.43
	62190		940.30	893.29	1,027.28
	62192		1,009.74	959.25	1,103.14
	62194		516.81	490.97	564.62
	62200		1,359.77	1,291.78	1,485.55
	62201		1,218.53	1,157.60	1,331.24
	62220		968.41	919.99	1,057.99
	62223		1,015.80	965.01	1,109.76

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	62225		560.82	532.78	612.70
	62230		834.31	792.59	911.48
	62252	TC	50.03	47.53	54.66
	62252	26	49.42	46.95	53.99
	62252		99.45	94.48	108.65
	62256		629.83	598.34	688.09
	62258		1,102.66	1,047.53	1,204.66
	62263		627.46	596.09	685.50
#	62263		291.27	276.71	318.22
	62264		425.38	404.11	464.73
#	62264		212.08	201.48	231.70
	62267		248.46	236.04	271.45
#	62267		134.76	128.02	147.22
	62268		319.60	303.62	349.16
	62269		221.39	210.32	241.87
#	62270		59.52	56.54	65.02
	62270		156.97	149.12	171.49
#	62272		85.75	81.46	93.68
	62272		206.81	196.47	225.94
	62273		165.49	157.22	180.80
#	62273		101.44	96.37	110.83
	62280		307.25	291.89	335.67
#	62280		134.40	127.68	146.83
	62281		236.42	224.60	258.29
#	62281		134.05	127.35	146.45
	62282		322.28	306.17	352.10
#	62282		127.06	120.71	138.82
#	62284		71.43	67.86	78.04
	62284		170.73	162.19	186.52
	62287		522.86	496.72	571.23
	62290		350.01	332.51	382.39

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	62290		141.31	134.24	154.38
	62291		319.57	303.59	349.13
#	62291		132.62	125.99	144.89
	62292		501.93	476.83	548.35
	62294		951.51	903.93	1,039.52
	62302		232.75	221.11	254.28
#	62302		101.89	96.80	111.32
	62303		236.36	224.54	258.22
#	62303		101.51	96.43	110.89
	62304		230.49	218.97	251.82
#	62304		100.55	95.52	109.85
	62305		251.01	238.46	274.23
#	62305		104.51	99.28	114.17
#	62320		87.26	82.90	95.34
	62320		156.83	148.99	171.34
	62321		260.61	247.58	284.72
#	62321		94.50	89.78	103.25
#	62322		73.53	69.85	80.33
	62322		139.12	132.16	151.98
#	62323		88.20	83.79	96.36
	62323		257.07	244.22	280.85
#	62324		85.60	81.32	93.52
	62324		147.51	140.13	161.15
	62325		250.99	238.44	274.21
#	62325		100.21	95.20	109.48
#	62326		81.56	77.48	89.10
	62326		146.84	139.50	160.43
	62327		258.70	245.77	282.64
#	62327		92.29	87.68	100.83
#	62328		73.66	69.98	80.48
	62328		203.91	193.71	222.77

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	62329		259.32	246.35	283.30
#	62329		93.52	88.84	102.17
	62330		468.30	444.89	511.62
	62331		188.63	179.20	206.08
	62350		372.33	353.71	406.77
	62351		902.11	857.00	985.55
	62355		274.08	260.38	299.44
	62360		304.52	289.29	332.68
	62361		455.72	432.93	497.87
	62362		366.18	347.87	400.05
	62365		289.82	275.33	316.63
	62367		32.38	30.76	35.37
#	62367		21.35	20.28	23.32
	62368		45.01	42.76	49.17
#	62368		29.38	27.91	32.10
#	62369		29.68	28.20	32.43
	62369		91.59	87.01	100.06
#	62370		39.31	37.34	42.94
	62370		92.33	87.71	100.87
	63001		1,192.24	1,132.63	1,302.52
	63003		1,196.67	1,136.84	1,307.37
	63005		1,185.26	1,126.00	1,294.90
	63011		1,001.90	951.81	1,094.58
	63012		1,143.60	1,086.42	1,249.38
	63015		1,441.70	1,369.62	1,575.06
	63016		1,462.95	1,389.80	1,598.27
	63017		1,238.94	1,176.99	1,353.54
	63020		1,053.39	1,000.72	1,150.83
	63030		886.11	841.80	968.07
	63032		138.07	131.17	150.85
	63035		208.86	198.42	228.18

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	63040		1,284.17	1,219.96	1,402.95
	63042		1,212.52	1,151.89	1,324.67
	63045		1,243.51	1,181.33	1,358.53
	63046		1,177.49	1,118.62	1,286.41
	63047		1,056.80	1,003.96	1,154.55
	63048		189.78	180.29	207.33
	63050		1,397.98	1,328.08	1,527.29
	63051		1,572.38	1,493.76	1,717.82
	63052		232.73	221.09	254.25
	63053		207.42	197.05	226.61
	63055		1,554.21	1,476.50	1,697.98
	63056		1,403.17	1,333.01	1,532.96
	63057		291.59	277.01	318.56
	63064		1,688.47	1,604.05	1,844.66
	63066		191.17	181.61	208.85
	63075		1,283.84	1,219.65	1,402.60
	63076		219.85	208.86	240.19
	63077		1,303.11	1,237.95	1,423.64
	63078		192.14	182.53	209.91
	63081		1,660.13	1,577.12	1,813.69
	63082		240.68	228.65	262.95
	63085		1,823.69	1,732.51	1,992.39
	63086		173.46	164.79	189.51
	63087		2,272.45	2,158.83	2,482.65
	63088		237.88	225.99	259.89
	63090		1,823.18	1,732.02	1,991.82
	63091		159.74	151.75	174.51
	63101		2,220.37	2,109.35	2,425.75
	63102		2,175.74	2,066.95	2,376.99
	63103		266.45	253.13	291.10
	63170		1,575.88	1,497.09	1,721.65

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	63172		1,398.72	1,328.78	1,528.10
	63173		1,699.04	1,614.09	1,856.20
	63185		1,230.60	1,169.07	1,344.43
	63190		1,114.41	1,058.69	1,217.49
	63191		1,373.49	1,304.82	1,500.54
	63197		1,685.42	1,601.15	1,841.32
	63200		1,532.88	1,456.24	1,674.68
	63250		2,856.46	2,713.64	3,120.69
	63251		2,925.36	2,779.09	3,195.95
	63252		2,924.72	2,778.48	3,195.25
	63265		1,613.63	1,532.95	1,762.89
	63266		1,658.66	1,575.73	1,812.09
	63267		1,317.65	1,251.77	1,439.54
	63268		1,454.19	1,381.48	1,588.70
	63270		2,030.20	1,928.69	2,217.99
	63271		2,019.05	1,918.10	2,205.82
	63272		1,833.26	1,741.60	2,002.84
	63273		1,833.87	1,742.18	2,003.51
	63275		1,733.59	1,646.91	1,893.95
	63276		1,729.12	1,642.66	1,889.06
	63277		1,500.92	1,425.87	1,639.75
	63278		1,578.42	1,499.50	1,724.43
	63280		2,067.74	1,964.35	2,259.00
	63281		2,051.60	1,949.02	2,241.37
	63282		1,941.04	1,843.99	2,120.59
	63283		1,874.17	1,780.46	2,047.53
	63285		2,537.89	2,411.00	2,772.65
	63286		2,507.43	2,382.06	2,739.37
	63287		2,656.96	2,524.11	2,902.73
	63290		2,701.22	2,566.16	2,951.08
	63295		308.20	292.79	336.71

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	63300		1,743.04	1,655.89	1,904.27
	63301		2,156.52	2,048.69	2,355.99
	63302		2,132.41	2,025.79	2,329.66
	63303		2,250.31	2,137.79	2,458.46
	63304		2,290.57	2,176.04	2,502.45
	63305		2,431.81	2,310.22	2,656.75
	63306		2,390.98	2,271.43	2,612.14
	63307		2,337.54	2,220.66	2,553.76
	63308		293.29	278.63	320.42
	63600		1,083.49	1,029.32	1,183.72
	63610		554.31	526.59	605.58
	63620		1,112.29	1,056.68	1,215.18
	63621		235.05	223.30	256.80
#	63650		370.56	352.03	404.83
	63650		2,217.66	2,106.78	2,422.80
	63655		828.42	787.00	905.05
	63661		703.77	668.58	768.87
#	63661		305.05	289.80	333.27
	63662		839.06	797.11	916.68
	63663		904.58	859.35	988.25
#	63663		405.64	385.36	443.16
	63664		875.97	832.17	957.00
	63685		314.76	299.02	343.87
	63688		300.49	285.47	328.29
	63700		1,316.10	1,250.30	1,437.85
	63702		1,429.71	1,358.22	1,561.95
	63704		1,663.45	1,580.28	1,817.32
	63706		1,835.62	1,743.84	2,005.42
	63707		918.85	872.91	1,003.85
	63709		1,077.90	1,024.01	1,177.61
	63710		1,037.21	985.35	1,133.15

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	63740		999.29	949.33	1,091.73
	63741		704.57	669.34	769.74
	63744		727.54	691.16	794.83
	63746		632.97	601.32	691.52
#	64400		47.17	44.81	51.53
	64400		115.52	109.74	126.20
	64405		76.54	72.71	83.62
#	64405		46.50	44.18	50.81
	64408		76.18	72.37	83.23
#	64408		38.48	36.56	42.04
#	64415		66.12	62.81	72.23
	64415		147.34	139.97	160.97
	64416		72.73	69.09	79.45
#	64417		61.07	58.02	66.72
	64417		175.39	166.62	191.61
	64418		86.36	82.04	94.35
#	64418		48.05	45.65	52.50
#	64420		51.83	49.24	56.63
	64420		100.87	95.83	110.20
	64421		33.97	32.27	37.11
#	64421		21.71	20.62	23.71
#	64425		49.18	46.72	53.73
	64425		114.46	108.74	125.05
#	64430		48.40	45.98	52.88
	64430		91.62	87.04	100.10
	64435		72.03	68.43	78.69
#	64435		38.63	36.70	42.21
#	64445		65.74	62.45	71.82
	64445		164.12	155.91	179.30
	64446		71.05	67.50	77.63
#	64447		60.47	57.45	66.07

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	64447		127.90	121.51	139.74
	64448		68.02	64.62	74.31
	64449		60.11	57.10	65.67
	64450		76.81	72.97	83.92
#	64450		37.88	35.99	41.39
#	64451		71.84	68.25	78.49
	64451		226.92	215.57	247.91
#	64454		72.38	68.76	79.07
	64454		220.71	209.67	241.12
	64455		48.61	46.18	53.11
#	64455		30.22	28.71	33.02
#	64461		72.05	68.45	78.72
	64461		143.45	136.28	156.72
	64462		75.42	71.65	82.40
#	64462		44.47	42.25	48.59
#	64463		76.74	72.90	83.84
	64463		248.98	236.53	272.01
#	64466		61.67	58.59	67.38
	64466		135.53	128.75	148.06
#	64467		71.40	67.83	78.00
	64467		253.75	241.06	277.22
#	64468		68.37	64.95	74.69
	64468		156.63	148.80	171.12
#	64469		75.08	71.33	82.03
	64469		389.21	369.75	425.21
#	64473		54.96	52.21	60.04
	64473		128.20	121.79	140.06
#	64474		68.37	64.95	74.69
	64474		250.11	237.60	273.24
	64479		269.69	256.21	294.64
#	64479		114.92	109.17	125.55

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	64480		52.94	50.29	57.83
	64480		135.38	128.61	147.90
	64483		249.67	237.19	272.77
#	64483		97.96	93.06	107.02
#	64484		43.59	41.41	47.62
	64484		111.32	105.75	121.61
#	64486		48.51	46.08	52.99
	64486		119.30	113.34	130.34
#	64487		56.26	53.45	61.47
	64487		230.03	218.53	251.31
#	64488		56.97	54.12	62.24
	64488		140.33	133.31	153.31
#	64489		71.05	67.50	77.63
	64489		375.99	357.19	410.77
	64490		194.58	184.85	212.58
#	64490		92.83	88.19	101.42
#	64491		50.68	48.15	55.37
	64491		97.57	92.69	106.59
#	64492		50.84	48.30	55.55
	64492		97.73	92.84	106.77
#	64493		80.12	76.11	87.53
	64493		180.03	171.03	196.68
	64494		91.40	86.83	99.85
#	64494		43.59	41.41	47.62
#	64495		44.82	42.58	48.97
	64495		94.16	89.45	102.87
	64505		144.55	137.32	157.92
#	64505		96.13	91.32	105.02
#	64510		68.33	64.91	74.65
	64510		145.56	138.28	159.02
	64517		193.76	184.07	211.68

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	64517		112.24	106.63	122.62
#	64520		75.21	71.45	82.17
	64520		226.92	215.57	247.91
#	64530		84.04	79.84	91.82
	64530		221.95	210.85	242.48
#	64553		449.47	427.00	491.05
	64553		4,478.04	4,254.14	4,892.26
#	64555		290.31	275.79	317.16
	64555		2,060.80	1,957.76	2,251.42
	64561		702.51	667.38	767.49
#	64561		269.77	256.28	294.72
#	64566		26.14	24.83	28.55
	64566		109.80	104.31	119.96
#	64567		66.53	63.20	72.68
	64567		1,142.86	1,085.72	1,248.58
	64568		653.70	621.02	714.17
	64569		742.96	705.81	811.68
	64570		756.07	718.27	826.01
	64575		286.98	272.63	313.52
	64580		308.92	293.47	337.49
	64581		586.69	557.36	640.96
	64582		717.50	681.63	783.87
	64583		739.97	702.97	808.42
	64584		626.03	594.73	683.94
	64585		239.20	227.24	261.33
#	64585		132.85	126.21	145.14
	64590		412.70	392.07	450.88
#	64590		264.68	251.45	289.17
	64595		334.14	317.43	365.04
#	64595		207.26	196.90	226.44
	64600		503.58	478.40	550.16

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	64600		225.00	213.75	245.81
#	64605		421.90	400.81	460.93
	64605		1,043.11	990.95	1,139.59
	64610		825.31	784.04	901.65
#	64610		448.66	426.23	490.16
	64611		132.93	126.28	145.22
#	64611		105.04	99.79	114.76
	64612		136.05	129.25	148.64
#	64612		105.40	100.13	115.15
	64615		153.79	146.10	168.02
#	64615		109.97	104.47	120.14
	64616		139.76	132.77	152.69
#	64616		99.31	94.34	108.49
	64617		153.17	145.51	167.34
#	64617		91.57	86.99	100.04
	64620		218.02	207.12	238.19
#	64620		164.39	156.17	179.60
	64624		385.99	366.69	421.69
#	64624		131.00	124.45	143.12
	64625		466.86	443.52	510.05
#	64625		174.18	165.47	190.29
	64628		360.24	342.23	393.56
	64629		167.12	158.76	182.57
	64630		264.27	251.06	288.72
#	64630		181.22	172.16	197.98
	64632		86.90	82.56	94.94
#	64632		60.85	57.81	66.48
	64633		432.73	411.09	472.75
#	64633		170.08	161.58	185.82
#	64634		57.66	54.78	63.00
	64634		249.20	236.74	272.25

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	64635		438.17	416.26	478.70
#	64635		170.32	161.80	186.07
#	64636		50.68	48.15	55.37
	64636		234.87	223.13	256.60
	64640		252.71	240.07	276.08
#	64640		109.59	104.11	119.73
	64642		157.39	149.52	171.95
#	64642		95.79	91.00	104.65
#	64643		60.00	57.00	65.55
	64643		96.78	91.94	105.73
	64644		183.06	173.91	200.00
#	64644		103.08	97.93	112.62
#	64645		71.10	67.55	77.68
	64645		125.35	119.08	136.94
	64646		164.92	156.67	180.17
#	64646		103.93	98.73	113.54
	64647		183.41	174.24	200.38
#	64647		116.29	110.48	127.05
	64650		82.16	78.05	89.76
#	64650		33.43	31.76	36.52
#	64653		43.28	41.12	47.29
	64653		97.52	92.64	106.54
	64654		565.69	537.41	618.02
	64655		642.96	610.81	702.43
	64656		429.73	408.24	469.48
	64657		637.62	605.74	696.60
	64658		479.32	455.35	523.65
	64659		444.34	422.12	485.44
	64680		327.60	311.22	357.90
#	64680		144.02	136.82	157.34
	64681		437.11	415.25	477.54

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	64681		190.09	180.59	207.68
	64702		474.08	450.38	517.94
	64704		300.28	285.27	328.06
	64708		450.26	427.75	491.91
	64712		546.66	519.33	597.23
	64713		734.92	698.17	802.90
	64714		704.29	669.08	769.44
	64716		459.46	436.49	501.96
	64718		558.79	530.85	610.48
	64719		376.94	358.09	411.80
	64721		464.19	440.98	507.13
#	64721		409.64	389.16	447.53
	64722		364.10	345.90	397.79
	64726		252.17	239.56	275.49
	64727		143.71	136.52	157.00
#	64728		122.10	116.00	133.40
	64728		1,241.95	1,179.85	1,356.83
	64732		482.08	457.98	526.68
	64734		543.52	516.34	593.79
	64736		299.14	284.18	326.81
	64738		406.50	386.18	444.11
	64740		419.12	398.16	457.88
	64742		413.65	392.97	451.92
	64744		530.74	504.20	579.83
	64746		428.54	407.11	468.18
	64755		869.62	826.14	950.06
	64760		504.56	479.33	551.23
	64763		498.58	473.65	544.70
	64766		612.52	581.89	669.17
	64771		546.60	519.27	597.16
	64772		506.48	481.16	553.33

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	64774		403.04	382.89	440.32
	64776		366.10	347.80	399.97
	64778		155.69	147.91	170.10
	64782		427.47	406.10	467.02
	64783		186.32	177.00	203.55
	64784		662.85	629.71	724.17
	64786		949.76	902.27	1,037.61
	64787		204.59	194.36	223.51
	64788		381.56	362.48	416.85
	64790		794.69	754.96	868.20
	64792		1,205.53	1,145.25	1,317.04
	64795		185.95	176.65	203.15
	64802		867.04	823.69	947.24
	64804		1,193.63	1,133.95	1,304.04
	64809		1,089.67	1,035.19	1,190.47
	64818		709.24	673.78	774.85
	64820		687.12	652.76	750.67
	64821		646.54	614.21	706.34
	64822		646.54	614.21	706.34
	64823		726.76	690.42	793.98
	64831		628.98	597.53	687.16
	64832		282.20	268.09	308.30
	64834		649.96	617.46	710.08
	64835		744.03	706.83	812.85
	64836		744.03	706.83	812.85
	64837		313.15	297.49	342.11
	64840		872.86	829.22	953.60
	64856		911.78	866.19	996.12
	64857		935.60	888.82	1,022.14
	64858		1,053.67	1,000.99	1,151.14
	64859		213.15	202.49	232.86

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	64861		1,509.17	1,433.71	1,648.77
	64862		1,227.28	1,165.92	1,340.81
	64864		746.98	709.63	816.07
	64865		932.26	885.65	1,018.50
	64866		1,104.00	1,048.80	1,206.12
	64868		854.32	811.60	933.34
	64872		100.04	95.04	109.30
	64874		149.30	141.84	163.12
	64876		168.77	160.33	184.38
	64885		920.54	874.51	1,005.69
	64886		1,108.39	1,052.97	1,210.92
	64890		969.54	921.06	1,059.22
	64891		1,030.55	979.02	1,125.87
	64892		944.67	897.44	1,032.06
	64893		1,006.01	955.71	1,099.07
	64895		1,182.52	1,123.39	1,291.90
	64896		1,275.81	1,212.02	1,393.82
	64897		1,131.86	1,075.27	1,236.56
	64898		1,225.75	1,164.46	1,339.13
	64901		511.49	485.92	558.81
	64902		592.07	562.47	646.84
	64905		883.10	838.95	964.79
	64907		1,160.23	1,102.22	1,267.55
	64910		682.33	648.21	745.44
	64911		932.87	886.23	1,019.16
	64912		802.02	761.92	876.21
	64913		147.01	139.66	160.61
	65091		632.78	601.14	691.31
	65093		629.30	597.84	687.52
	65101		725.18	688.92	792.26
	65103		746.33	709.01	815.36

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	65105		811.82	771.23	886.91
	65110		1,105.13	1,049.87	1,207.35
	65112		1,262.07	1,198.97	1,378.82
	65114		1,313.93	1,248.23	1,435.46
	65125		429.16	407.70	468.86
#	65125		250.48	237.96	273.65
	65130		727.44	691.07	794.73
	65135		736.01	699.21	804.09
	65140		788.90	749.46	861.88
	65150		599.80	569.81	655.28
	65155		819.06	778.11	894.83
	65175		666.97	633.62	728.66
	65205		27.29	25.93	29.82
#	65205		23.92	22.72	26.13
	65210		36.88	35.04	40.30
#	65210		29.52	28.04	32.25
	65220		61.51	58.43	67.19
#	65220		37.30	35.44	40.76
	65222		63.98	60.78	69.90
#	65222		40.99	38.94	44.78
	65235		614.00	583.30	670.80
	65260		813.67	772.99	888.94
	65265		913.20	867.54	997.67
	65270		265.30	252.04	289.85
#	65270		115.43	109.66	126.11
	65272		498.75	473.81	544.88
#	65272		290.66	276.13	317.55
	65273		312.11	296.50	340.98
	65275		563.53	535.35	615.65
#	65275		378.11	359.20	413.08
	65280		550.14	522.63	601.02

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	65285		905.12	859.86	988.84
	65286		663.63	630.45	725.02
#	65286		407.73	387.34	445.44
	65290		403.10	382.95	440.39
	65400		666.53	633.20	728.18
#	65400		505.94	480.64	552.74
#	65410		84.35	80.13	92.15
	65410		137.06	130.21	149.74
	65420		510.82	485.28	558.07
#	65420		322.03	305.93	351.82
	65426		635.96	604.16	694.78
#	65426		399.67	379.69	436.64
#	65430		83.43	79.26	91.15
	65430		111.01	105.46	121.28
	65435		79.75	75.76	87.12
#	65435		58.61	55.68	64.03
	65436		376.28	357.47	411.09
#	65436		308.24	292.83	336.75
	65450		318.84	302.90	348.34
#	65450		276.85	263.01	302.46
	65600		420.13	399.12	458.99
#	65600		289.58	275.10	316.37
	65710		951.29	903.73	1,039.29
	65730		1,035.62	983.84	1,131.42
	65750		1,039.25	987.29	1,135.38
	65755		1,034.34	982.62	1,130.01
	65756		967.36	918.99	1,056.84
	65770		1,152.22	1,094.61	1,258.80
	65772		439.70	417.72	480.38
#	65772		339.49	322.52	370.90
	65775		481.39	457.32	525.92

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	65778		35.48	33.71	38.77
	65778		1,171.87	1,113.28	1,280.27
#	65779		83.85	79.66	91.61
	65779		1,052.00	999.40	1,149.31
	65780		497.42	472.55	543.43
	65781		1,092.24	1,037.63	1,193.27
	65782		946.06	898.76	1,033.57
#	65785		372.69	354.06	407.17
	65785		1,943.97	1,846.77	2,123.79
#	65800		70.50	66.98	77.03
	65800		115.86	110.07	126.58
	65810		387.51	368.13	423.35
	65815		609.76	579.27	666.16
#	65815		397.99	378.09	434.80
	65820		694.13	659.42	758.33
	65850		694.06	659.36	758.26
	65855		235.41	223.64	257.19
#	65855		167.37	159.00	182.85
	65860		296.58	281.75	324.01
#	65860		204.03	193.83	222.90
	65865		399.35	379.38	436.29
	65870		495.93	471.13	541.80
	65875		529.49	503.02	578.47
	65880		554.65	526.92	605.96
	65900		822.47	781.35	898.55
	65920		659.07	626.12	720.04
	65930		531.14	504.58	580.27
	66020		186.13	176.82	203.34
#	66020		110.12	104.61	120.30
	66030		166.48	158.16	181.88
#	66030		93.85	89.16	102.53

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	66130		674.96	641.21	737.39
#	66130		464.11	440.90	507.04
	66150		734.39	697.67	802.32
	66155		734.05	697.35	801.95
	66160		820.82	779.78	896.75
	66170		908.47	863.05	992.51
	66172		994.91	945.16	1,086.93
	66174		521.77	495.68	570.03
	66175		600.94	570.89	656.52
	66179		895.16	850.40	977.96
	66180		941.81	894.72	1,028.93
	66183		853.90	811.21	932.89
	66184		662.82	629.68	724.13
	66185		709.17	673.71	774.77
	66225		771.07	732.52	842.40
	66250		713.76	678.07	779.78
#	66250		462.76	439.62	505.56
	66500		336.32	319.50	367.43
	66505		365.68	347.40	399.51
	66600		760.58	722.55	830.93
	66605		898.68	853.75	981.81
	66625		358.25	340.34	391.39
	66630		471.02	447.47	514.59
	66635		475.34	451.57	519.31
	66680		492.64	468.01	538.21
	66682		549.51	522.03	600.33
	66683		642.90	610.76	702.37
	66700		436.48	414.66	476.86
#	66700		325.23	308.97	355.32
	66710		426.06	404.76	465.47
#	66710		325.23	308.97	355.32

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	66711		428.57	407.14	468.21
	66720		450.78	428.24	492.48
#	66720		348.11	330.70	380.31
	66740		424.53	403.30	463.80
#	66740		325.23	308.97	355.32
	66761		284.75	270.51	311.09
#	66761		195.57	185.79	213.66
	66762		460.31	437.29	502.88
#	66762		355.19	337.43	388.04
	66770		510.92	485.37	558.18
#	66770		402.12	382.01	439.31
	66820		399.98	379.98	436.98
	66821		319.23	303.27	348.76
#	66821		264.07	250.87	288.50
	66825		700.59	665.56	765.39
	66830		585.66	556.38	639.84
	66840		573.13	544.47	626.14
	66850		650.78	618.24	710.98
	66852		690.49	655.97	754.37
	66920		617.18	586.32	674.27
	66930		705.93	670.63	771.22
	66940		648.34	615.92	708.31
	66982		613.52	582.84	670.27
	66984		449.32	426.85	490.88
	66985		638.50	606.58	697.57
	66986		742.99	705.84	811.72
	66989		700.74	665.70	765.56
	66990		69.83	66.34	76.29
	66991		565.47	537.20	617.78
	67005		399.44	379.47	436.39
	67010		453.68	431.00	495.65

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	67015		505.47	480.20	552.23
	67025		708.88	673.44	774.46
#	67025		523.16	497.00	571.55
	67027		695.84	661.05	760.21
#	67028		74.15	70.44	81.01
	67028		109.70	104.22	119.85
	67030		471.33	447.76	514.92
	67031		372.92	354.27	407.41
#	67031		295.69	280.91	323.05
	67036		738.05	701.15	806.32
	67039		787.71	748.32	860.57
	67040		847.54	805.16	925.93
	67041		931.90	885.31	1,018.11
	67042		931.60	885.02	1,017.77
	67043		981.14	932.08	1,071.89
	67101		319.54	303.56	349.09
#	67101		237.41	225.54	259.37
	67105		285.46	271.19	311.87
#	67105		229.07	217.62	250.26
	67107		916.72	870.88	1,001.51
	67108		968.63	920.20	1,058.23
	67110		852.95	810.30	931.85
#	67110		675.81	642.02	738.32
	67113		1,083.48	1,029.31	1,183.71
	67115		417.39	396.52	456.00
	67120		638.91	606.96	698.00
#	67120		460.85	437.81	503.48
	67121		743.34	706.17	812.10
	67141		256.60	243.77	280.34
#	67141		181.82	172.73	198.64
	67145		233.92	222.22	255.55

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	67145		181.82	172.73	198.64
	67208		581.08	552.03	634.83
#	67208		477.19	453.33	521.33
	67210		496.38	471.56	542.29
#	67210		414.56	393.83	452.90
	67218		1,129.20	1,072.74	1,233.65
	67220		509.80	484.31	556.96
#	67220		414.18	393.47	452.49
	67221		272.50	258.88	297.71
#	67221		166.16	157.85	181.53
	67225		28.30	26.89	30.92
#	67225		21.86	20.77	23.89
	67227		283.99	269.79	310.26
#	67227		209.21	198.75	228.56
	67228		327.94	311.54	358.27
#	67228		247.96	235.56	270.89
	67229		945.61	898.33	1,033.08
	67250		762.82	724.68	833.38
	67255		575.93	547.13	629.20
	67311		379.02	360.07	414.08
	67312		544.45	517.23	594.81
	67314		379.02	360.07	414.08
	67316		582.27	553.16	636.13
	67318		564.54	536.31	616.76
	67320		138.26	131.35	151.05
	67331		99.41	94.44	108.61
	67332		160.79	152.75	175.66
	67334		98.36	93.44	107.46
	67335		148.24	140.83	161.95
	67340		231.30	219.74	252.70
	67343		563.77	535.58	615.92

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	67345		242.87	230.73	265.34
#	67345		187.39	178.02	204.72
	67346		157.42	149.55	171.98
	67400		874.40	830.68	955.28
	67405		766.87	728.53	837.81
	67412		837.14	795.28	914.57
	67413		812.16	771.55	887.28
	67414		1,208.59	1,148.16	1,320.38
	67415		81.43	77.36	88.96
	67420		1,457.17	1,384.31	1,591.96
	67430		1,165.04	1,106.79	1,272.81
	67440		1,129.75	1,073.26	1,234.25
	67445		1,269.40	1,205.93	1,386.82
	67450		1,170.34	1,111.82	1,278.59
	67500		76.27	72.46	83.33
#	67500		54.51	51.78	59.55
	67505		81.78	77.69	89.34
#	67505		57.26	54.40	62.56
	67515		50.07	47.57	54.71
#	67515		37.81	35.92	41.31
#	67516		78.47	74.55	85.73
	67516		116.47	110.65	127.25
	67550		917.75	871.86	1,002.64
	67560		937.58	890.70	1,024.31
	67570		1,065.99	1,012.69	1,164.59
	67700		262.23	249.12	286.49
#	67700		98.89	93.95	108.04
#	67710		83.30	79.14	91.01
	67710		223.36	212.19	244.02
	67715		256.85	244.01	280.61
#	67715		98.71	93.77	107.84

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	67800		84.48	80.26	92.30
	67800		124.63	118.40	136.16
	67801		157.92	150.02	172.52
#	67801		107.66	102.28	117.62
	67805		197.16	187.30	215.40
#	67805		134.94	128.19	147.42
	67808		308.78	293.34	337.34
#	67810		54.72	51.98	59.78
	67810		170.26	161.75	186.01
#	67820		18.52	17.59	20.23
	67820		18.21	17.30	19.90
	67825		128.98	122.53	140.91
#	67825		103.54	98.36	113.11
	67830		252.41	239.79	275.76
#	67830		115.42	109.65	126.10
	67835		367.51	349.13	401.50
	67840		262.17	249.06	286.42
#	67840		130.39	123.87	142.45
	67850		198.52	188.59	216.88
#	67850		109.33	103.86	119.44
#	67875		79.12	75.16	86.43
	67875		170.45	161.93	186.22
	67880		447.99	425.59	489.43
#	67880		309.16	293.70	337.76
	67882		547.61	520.23	598.26
#	67882		392.84	373.20	429.18
	67900		627.21	595.85	685.23
#	67900		420.96	399.91	459.90
	67901		754.28	716.57	824.06
#	67901		487.04	462.69	532.09
	67902		598.12	568.21	653.44

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	67903		578.42	549.50	631.93
#	67903		396.98	377.13	433.70
	67904		710.84	675.30	776.60
#	67904		493.55	468.87	539.20
	67906		415.87	395.08	454.34
	67908		519.53	493.55	567.58
#	67908		362.31	344.19	395.82
	67909		526.85	500.51	575.59
#	67909		366.88	348.54	400.82
	67911		463.65	440.47	506.54
	67912		843.77	801.58	921.82
#	67912		411.95	391.35	450.05
	67914		462.75	439.61	505.55
#	67914		280.70	266.67	306.67
	67915		296.56	281.73	323.99
#	67915		172.13	163.52	188.05
	67916		580.01	551.01	633.66
#	67916		359.96	341.96	393.25
	67917		594.38	564.66	649.36
#	67917		380.16	361.15	415.32
	67921		449.70	427.22	491.30
#	67921		265.51	252.23	290.06
	67922		290.12	275.61	316.95
#	67922		172.13	163.52	188.05
	67923		578.94	549.99	632.49
#	67923		359.20	341.24	392.43
	67924		617.60	586.72	674.73
#	67924		380.08	361.08	415.24
	67930		355.73	337.94	388.63
#	67930		193.30	183.64	211.19
	67935		578.48	549.56	631.99

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	67935		360.28	342.27	393.61
	67938		235.76	223.97	257.57
#	67938		96.32	91.50	105.23
	67950		560.99	532.94	612.88
#	67950		385.38	366.11	421.03
	67961		563.46	535.29	615.58
#	67961		378.35	359.43	413.34
	67966		748.91	711.46	818.18
#	67966		539.89	512.90	589.84
	67971		591.85	562.26	646.60
	67973		757.99	720.09	828.10
	67974		756.30	718.49	826.26
	67975		563.17	535.01	615.26
	68020		115.93	110.13	126.65
#	68020		91.72	87.13	100.20
	68040		59.41	56.44	64.91
#	68040		39.18	37.22	42.80
#	68100		79.12	75.16	86.43
	68100		169.53	161.05	185.21
	68110		224.09	212.89	244.82
#	68110		124.48	118.26	136.00
	68115		311.95	296.35	340.80
#	68115		152.28	144.67	166.37
	68130		526.16	499.85	574.83
#	68130		345.65	328.37	377.63
	68135		152.95	145.30	167.10
#	68135		125.68	119.40	137.31
	68200		39.69	37.71	43.37
#	68200		28.35	26.93	30.97
	68320		708.17	672.76	773.67
#	68320		452.27	429.66	494.11

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	68325		543.60	516.42	593.88
	68326		535.43	508.66	584.96
	68328		581.69	552.61	635.50
	68330		592.15	562.54	646.92
#	68330		384.36	365.14	419.91
	68335		536.77	509.93	586.42
	68340		589.91	560.41	644.47
#	68340		345.95	328.65	377.95
	68360		519.01	493.06	567.02
#	68360		343.40	326.23	375.16
	68362		542.63	515.50	592.83
	68371		346.54	329.21	378.59
	68400		277.51	263.63	303.17
#	68400		109.57	104.09	119.70
	68420		311.40	295.83	340.20
#	68420		137.32	130.45	150.02
#	68440		86.70	82.37	94.73
	68440		100.80	95.76	110.12
	68500		888.93	844.48	971.15
	68505		885.25	840.99	967.14
	68510		429.46	407.99	469.19
#	68510		231.17	219.61	252.55
	68520		620.72	589.68	678.13
	68525		204.60	194.37	223.53
	68530		410.37	389.85	448.33
#	68530		207.79	197.40	227.01
	68540		819.10	778.15	894.87
	68550		1,018.40	967.48	1,112.60
	68700		500.70	475.67	547.02
	68705		245.68	233.40	268.41
#	68705		138.72	131.78	151.55

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	68720		679.12	645.16	741.93
	68745		681.72	647.63	744.77
	68750		721.82	685.73	788.59
	68760		207.45	197.08	226.64
#	68760		123.17	117.01	134.56
	68761		135.98	129.18	148.56
#	68761		99.51	94.53	108.71
	68770		519.51	493.53	567.56
	68801		89.43	84.96	97.70
#	68801		68.59	65.16	74.93
	68810		152.66	145.03	166.78
#	68810		108.22	102.81	118.23
	68811		113.93	108.23	124.46
	68815		351.53	333.95	384.04
#	68815		186.34	177.02	203.57
	68816		770.26	731.75	841.51
#	68816		130.04	123.54	142.07
	68840		127.56	121.18	139.36
#	68840		100.29	95.28	109.57
	68841		37.24	35.38	40.69
#	68841		26.82	25.48	29.30
	68850		54.58	51.85	59.63
#	68850		44.77	42.53	48.91
	69000		181.85	172.76	198.67
#	69000		113.81	108.12	124.34
	69005		212.66	202.03	232.33
#	69005		142.79	135.65	156.00
	69020		219.48	208.51	239.79
#	69020		127.85	121.46	139.68
	69100		87.71	83.32	95.82
#	69100		37.14	35.28	40.57

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	69105		55.93	53.13	61.10
	69105		135.31	128.54	147.82
	69110		444.26	422.05	485.36
#	69110		289.50	275.03	316.28
	69120		346.92	329.57	379.01
	69140		804.83	764.59	879.28
	69145		381.95	362.85	417.28
#	69145		228.10	216.70	249.21
	69150		879.63	835.65	961.00
	69155		1,403.80	1,333.61	1,533.65
	69200		78.07	74.17	85.30
#	69200		41.30	39.24	45.13
	69205		84.97	80.72	92.83
	69209		15.70	14.92	17.16
	69210		46.06	43.76	50.32
#	69210		27.05	25.70	29.56
	69220		75.26	71.50	82.23
#	69220		44.00	41.80	48.07
	69222		204.54	194.31	223.46
#	69222		121.18	115.12	132.39
	69300		624.70	593.47	682.49
#	69300		417.53	396.65	456.15
	69310		994.66	944.93	1,086.67
	69320		1,375.55	1,306.77	1,502.79
	69420		181.31	172.24	198.08
#	69420		106.83	101.49	116.71
	69421		133.47	126.80	145.82
#	69424		53.95	51.25	58.94
	69424		122.60	116.47	133.94
	69433		191.71	182.12	209.44
#	69433		115.71	109.92	126.41

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	69436		140.46	133.44	153.46
	69440		602.80	572.66	658.56
	69450		478.11	454.20	522.33
	69501		618.94	587.99	676.19
	69502		819.91	778.91	895.75
	69505		1,086.32	1,032.00	1,186.80
	69511		1,110.79	1,055.25	1,213.54
	69530		1,476.97	1,403.12	1,613.59
	69535		2,313.93	2,198.23	2,527.96
	69540		197.64	187.76	215.92
#	69540		115.20	109.44	125.86
	69550		941.47	894.40	1,028.56
	69552		1,387.92	1,318.52	1,516.30
	69554		2,190.37	2,080.85	2,392.98
	69601		882.67	838.54	964.32
	69602		940.02	893.02	1,026.97
	69603		1,133.57	1,076.89	1,238.42
	69604		960.10	912.10	1,048.92
	69610		367.83	349.44	401.86
#	69610		246.16	233.85	268.93
	69620		703.54	668.36	768.61
#	69620		438.14	416.23	478.66
	69631		772.45	733.83	843.90
	69632		940.14	893.13	1,027.10
	69633		914.01	868.31	998.56
	69635		1,134.44	1,077.72	1,239.38
	69636		1,242.78	1,180.64	1,357.74
	69637		1,238.13	1,176.22	1,352.65
	69641		901.81	856.72	985.23
	69642		1,153.24	1,095.58	1,259.92
	69643		1,058.72	1,005.78	1,156.65

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	69644		1,325.27	1,259.01	1,447.86
	69645		1,304.49	1,239.27	1,425.16
	69646		1,385.33	1,316.06	1,513.47
	69650		696.30	661.49	760.71
	69660		798.19	758.28	872.02
	69661		1,038.43	986.51	1,134.49
	69662		997.51	947.63	1,089.77
	69666		699.97	664.97	764.72
	69667		702.75	667.61	767.75
	69670		816.29	775.48	891.80
	69676		722.73	686.59	789.58
	69700		581.49	552.42	635.28
	69705		2,369.66	2,251.18	2,588.86
#	69705		147.75	140.36	161.41
#	69706		204.98	194.73	223.94
	69706		2,457.85	2,334.96	2,685.20
	69711		729.13	692.67	796.57
	69714		427.45	406.08	466.99
	69716		534.75	508.01	584.21
	69717		482.75	458.61	527.40
	69719		552.36	524.74	603.45
	69720		1,030.84	979.30	1,126.20
	69725		1,599.10	1,519.15	1,747.02
	69726		412.39	391.77	450.54
	69727		459.30	436.34	501.79
	69728		509.85	484.36	557.01
	69729		579.05	550.10	632.62
	69730		588.58	559.15	643.02
	69740		998.18	948.27	1,090.51
	69745		1,063.87	1,010.68	1,162.28
	69801		212.70	202.07	232.38

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	69801		106.66	101.33	116.53
	69805		889.10	844.65	971.35
	69806		797.26	757.40	871.01
	69905		794.90	755.16	868.43
	69910		855.99	813.19	935.17
	69915		1,289.01	1,224.56	1,408.24
	69930		1,041.34	989.27	1,137.66
	69950		1,493.65	1,418.97	1,631.82
	69955		1,680.74	1,596.70	1,836.21
	69960		1,612.10	1,531.50	1,761.23
	69970		1,816.20	1,725.39	1,984.20
	69990		201.66	191.58	220.32
	70010		49.54	47.06	54.12
	70015	26	54.16	51.45	59.17
	70015		151.07	143.52	165.05
	70015	TC	96.92	92.07	105.88
	70030	26	8.57	8.14	9.36
	70030		30.70	29.17	33.55
	70030	TC	22.14	21.03	24.18
	70100	26	8.87	8.43	9.69
	70100		37.75	35.86	41.24
	70100	TC	28.88	27.44	31.56
	70110		40.38	38.36	44.11
	70110	TC	28.88	27.44	31.56
	70110	26	11.50	10.93	12.57
	70120	26	8.57	8.14	9.36
	70120		36.22	34.41	39.57
	70120	TC	27.65	26.27	30.21
	70130		57.27	54.41	62.57
	70130	TC	41.45	39.38	45.29
	70130	26	15.82	15.03	17.28

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	70134		57.19	54.33	62.48
	70134	TC	40.83	38.79	44.61
	70134	26	16.36	15.54	17.87
	70140		29.81	28.32	32.57
	70140	TC	20.30	19.29	22.18
	70140	26	9.52	9.04	10.40
	70150		43.78	41.59	47.83
	70150	TC	31.64	30.06	34.57
	70150	26	12.14	11.53	13.26
	70160	26	8.23	7.82	8.99
	70160		34.97	33.22	38.20
	70160	TC	26.74	25.40	29.21
	70170	26	13.86	13.17	15.15
	70190		34.44	32.72	37.63
	70190	TC	24.28	23.07	26.53
	70190	26	10.16	9.65	11.10
	70200		43.84	41.65	47.90
	70200	TC	31.03	29.48	33.90
	70200	26	12.81	12.17	14.00
	70210	26	8.23	7.82	8.99
	70210		30.37	28.85	33.18
	70210	TC	22.14	21.03	24.18
	70220		35.39	33.62	38.66
	70220	TC	25.20	23.94	27.53
	70220	26	10.19	9.68	11.13
	70240	26	8.90	8.46	9.73
	70240		30.12	28.61	32.90
	70240	TC	21.22	20.16	23.18
	70250	26	8.57	8.14	9.36
	70250		33.46	31.79	36.56
	70250	TC	24.90	23.66	27.21

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	70260		41.08	39.03	44.88
	70260	TC	28.27	26.86	30.89
	70260	26	12.81	12.17	14.00
	70300	TC	8.35	7.93	9.12
	70300	26	5.27	5.01	5.76
	70300		13.62	12.94	14.88
	70310	26	7.90	7.51	8.64
	70310		39.84	37.85	43.53
	70310	TC	31.95	30.35	34.90
	70320		52.93	50.28	57.82
	70320	TC	41.75	39.66	45.61
	70320	26	11.18	10.62	12.21
	70328	26	8.57	8.14	9.36
	70328		31.93	30.33	34.88
	70328	TC	23.36	22.19	25.52
	70330		49.85	47.36	54.46
	70330	TC	38.69	36.76	42.27
	70330	26	11.16	10.60	12.19
	70332		75.08	71.33	82.03
	70332	TC	50.33	47.81	54.98
	70332	26	24.75	23.51	27.04
	70336	26	66.01	62.71	72.12
	70336		242.68	230.55	265.13
	70336	TC	176.67	167.84	193.02
	70350	TC	8.96	8.51	9.79
	70350	26	8.54	8.11	9.33
	70350		17.50	16.63	19.12
	70355	TC	8.65	8.22	9.45
	70355		18.50	17.58	20.22
	70355	26	9.85	9.36	10.76
	70360	26	8.57	8.14	9.36

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	70360		29.17	27.71	31.87
	70360	TC	20.61	19.58	22.52
	70370	TC	77.92	74.02	85.12
	70370	26	15.15	14.39	16.55
	70370		93.06	88.41	101.67
	70371	TC	64.43	61.21	70.39
	70371	26	40.38	38.36	44.11
	70371		104.81	99.57	114.51
	70380	26	7.92	7.52	8.65
	70380		34.35	32.63	37.52
	70380	TC	26.43	25.11	28.88
	70390	TC	85.58	81.30	93.50
	70390	26	17.16	16.30	18.75
	70390		102.74	97.60	112.24
	70450	TC	61.67	58.59	67.38
	70450	26	38.95	37.00	42.55
	70450		100.62	95.59	109.93
	70460	TC	88.41	83.99	96.59
	70460	26	51.53	48.95	56.29
	70460		139.94	132.94	152.88
	70470	26	57.76	54.87	63.10
	70470		163.03	154.88	178.11
	70470	TC	105.26	100.00	115.00
	70471		354.31	336.59	387.08
	70471	TC	237.43	225.56	259.39
	70471	26	116.88	111.04	127.70
	70472	26	36.02	34.22	39.35
	70472		146.11	138.80	159.62
	70472	TC	110.10	104.60	120.29
	70473	26	46.87	44.53	51.21
C	70473		210.75	200.21	230.24

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
C	70473	TC	163.87	155.68	179.03
	70480	TC	91.17	86.61	99.60
	70480	26	58.40	55.48	63.80
	70480		149.57	142.09	163.40
	70481	26	51.53	48.95	56.29
	70481		168.75	160.31	184.36
	70481	TC	117.22	111.36	128.06
	70482	26	57.45	54.58	62.77
	70482		196.12	186.31	214.26
	70482	TC	138.67	131.74	151.50
	70486	TC	81.29	77.23	88.81
	70486	26	39.26	37.30	42.90
	70486		120.54	114.51	131.69
	70487	TC	91.47	86.90	99.94
	70487	26	51.53	48.95	56.29
	70487		143.00	135.85	156.23
	70488	26	57.76	54.87	63.10
	70488		173.14	164.48	189.15
	70488	TC	115.38	109.61	126.05
	70490	TC	83.13	78.97	90.82
	70490	26	58.40	55.48	63.80
	70490		141.53	134.45	154.62
	70491	26	62.68	59.55	68.48
	70491		172.85	164.21	188.84
	70491	TC	110.17	104.66	120.36
	70492	26	72.92	69.27	79.66
	70492		207.00	196.65	226.15
	70492	TC	134.07	127.37	146.48
	70496	26	79.20	75.24	86.53
C	70496		243.07	230.92	265.56
C	70496	TC	163.87	155.68	179.03

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	70498	26	79.20	75.24	86.53
C	70498		243.07	230.92	265.56
C	70498	TC	163.87	155.68	179.03
	70540	26	61.06	58.01	66.71
	70540		210.46	199.94	229.93
	70540	TC	149.40	141.93	163.22
	70542	26	73.54	69.86	80.34
	70542		249.98	237.48	273.10
	70542	TC	176.44	167.62	192.76
	70543		316.45	300.63	345.72
	70543	TC	218.73	207.79	238.96
	70543	26	97.72	92.83	106.75
	70544	26	54.49	51.77	59.54
	70544		201.20	191.14	219.81
	70544	TC	146.71	139.37	160.28
	70545	26	54.49	51.77	59.54
	70545		211.93	201.33	231.53
	70545	TC	157.44	149.57	172.01
	70546	26	67.00	63.65	73.20
	70546		305.72	290.43	333.99
	70546	TC	238.72	226.78	260.80
	70547	26	54.49	51.77	59.54
	70547		201.20	191.14	219.81
	70547	TC	146.71	139.37	160.28
	70548	26	67.98	64.58	74.27
	70548		230.32	218.80	251.62
	70548	TC	162.34	154.22	177.35
	70549	26	81.49	77.42	89.03
	70549		321.13	305.07	350.83
	70549	TC	239.64	227.66	261.81
	70551	26	67.00	63.65	73.20

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	70551		184.22	175.01	201.26
	70551	TC	117.22	111.36	128.06
	70552	26	80.82	76.78	88.30
	70552		252.66	240.03	276.03
	70552	TC	171.84	163.25	187.74
	70553		298.51	283.58	326.12
	70553	TC	194.52	184.79	212.51
	70553	26	103.99	98.79	113.61
	70554		353.87	336.18	386.61
	70554	TC	257.11	244.25	280.89
	70554	26	96.75	91.91	105.70
	70555	26	112.93	107.28	123.37
	70557	26	150.49	142.97	164.42
	70558	26	165.89	157.60	181.24
	70559	26	154.88	147.14	169.21
	71045	26	8.26	7.85	9.03
	71045		23.96	22.76	26.17
	71045	TC	15.70	14.92	17.16
	71046		31.10	29.55	33.98
	71046	TC	21.22	20.16	23.18
	71046	26	9.88	9.39	10.80
	71047		38.60	36.67	42.17
	71047	TC	26.12	24.81	28.53
	71047	26	12.48	11.86	13.64
	71048		42.47	40.35	46.40
	71048	TC	27.96	26.56	30.54
	71048	26	14.51	13.78	15.85
	71100		33.86	32.17	37.00
	71100	TC	23.67	22.49	25.86
	71100	26	10.19	9.68	11.13
	71101		39.29	37.33	42.93

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	71101	TC	26.74	25.40	29.21
	71101	26	12.55	11.92	13.71
	71110		40.19	38.18	43.91
	71110	TC	27.04	25.69	29.54
	71110	26	13.15	12.49	14.36
	71111		48.32	45.90	52.79
	71111	TC	33.48	31.81	36.58
	71111	26	14.84	14.10	16.22
	71120		31.07	29.52	33.95
	71120	TC	21.83	20.74	23.85
	71120	26	9.24	8.78	10.10
	71130		38.76	36.82	42.34
	71130	TC	28.57	27.14	31.21
	71130	26	10.19	9.68	11.13
	71250	TC	76.38	72.56	83.44
	71250	26	48.86	46.42	53.38
	71250		125.24	118.98	136.83
	71260	26	53.15	50.49	58.06
	71260		156.88	149.04	171.40
	71260	TC	103.73	98.54	113.32
	71270	26	56.78	53.94	62.03
	71270		183.81	174.62	200.81
	71270	TC	127.02	120.67	138.77
	71271	TC	79.83	75.84	87.22
	71271	26	48.86	46.42	53.38
	71271		128.69	122.26	140.60
	71275	26	82.58	78.45	90.22
C	71275		246.46	234.14	269.26
C	71275	TC	163.87	155.68	179.03
	71550	26	65.64	62.36	71.71
C	71550		288.36	273.94	315.03

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
C	71550	TC	222.72	211.58	243.32
	71551	26	78.53	74.60	85.79
	71551		346.60	329.27	378.66
	71551	TC	268.07	254.67	292.87
C	71552		428.44	407.02	468.07
C	71552	TC	325.76	309.47	355.89
	71552	26	102.68	97.55	112.18
	71555	26	81.49	77.42	89.03
	71555		312.86	297.22	341.80
	71555	TC	231.37	219.80	252.77
	72020	26	7.59	7.21	8.29
	72020		22.37	21.25	24.44
	72020	TC	14.78	14.04	16.15
	72040		37.23	35.37	40.68
	72040	TC	27.04	25.69	29.54
	72040	26	10.19	9.68	11.13
	72050		51.54	48.96	56.30
	72050	TC	38.69	36.76	42.27
	72050	26	12.86	12.22	14.05
	72052		58.68	55.75	64.11
	72052	TC	44.51	42.28	48.62
	72052	26	14.17	13.46	15.48
	72070		31.07	29.52	33.95
	72070	TC	21.53	20.45	23.52
	72070	26	9.54	9.06	10.42
	72072		36.34	34.52	39.70
	72072	TC	26.12	24.81	28.53
	72072	26	10.22	9.71	11.17
	72074		41.30	39.24	45.13
	72074	TC	30.11	28.60	32.89
	72074	26	11.19	10.63	12.22

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	72080		32.91	31.26	35.95
	72080	TC	23.06	21.91	25.20
	72080	26	9.85	9.36	10.76
	72081		41.40	39.33	45.23
	72081	TC	28.88	27.44	31.56
	72081	26	12.52	11.89	13.67
	72082		66.98	63.63	73.17
	72082	TC	52.17	49.56	56.99
	72082	26	14.81	14.07	16.18
	72083		74.46	70.74	81.35
	72083	TC	57.69	54.81	63.03
	72083	26	16.77	15.93	18.32
	72084	TC	72.47	68.85	79.18
	72084	26	19.39	18.42	21.18
	72084		91.87	87.28	100.37
	72100		37.84	35.95	41.34
	72100	TC	27.35	25.98	29.88
	72100	26	10.49	9.97	11.47
	72110		49.98	47.48	54.60
	72110	TC	37.46	35.59	40.93
	72110	26	12.52	11.89	13.67
	72114		57.76	54.87	63.10
	72114	TC	43.59	41.41	47.62
	72114	26	14.17	13.46	15.48
	72120		39.37	37.40	43.01
	72120	TC	28.88	27.44	31.56
	72120	26	10.49	9.97	11.47
	72125	TC	77.30	73.44	84.46
	72125	26	45.90	43.61	50.15
	72125		123.20	117.04	134.60
	72126	26	55.47	52.70	60.61

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	72126		158.59	150.66	173.26
	72126	TC	103.12	97.96	112.65
	72127	26	57.45	54.58	62.77
	72127		184.17	174.96	201.20
	72127	TC	126.72	120.38	138.44
	72128	TC	77.00	73.15	84.12
	72128	26	45.90	43.61	50.15
	72128		122.89	116.75	134.26
	72129	26	55.47	52.70	60.61
	72129		159.51	151.53	174.26
	72129	TC	104.04	98.84	113.67
	72130	26	57.76	54.87	63.10
	72130		186.01	176.71	203.22
	72130	TC	128.25	121.84	140.12
	72131	TC	76.69	72.86	83.79
	72131	26	45.90	43.61	50.15
	72131		122.59	116.46	133.93
	72132	26	55.47	52.70	60.61
	72132		158.90	150.96	173.60
	72132	TC	103.43	98.26	113.00
	72133	26	57.76	54.87	63.10
	72133		184.79	175.55	201.88
	72133	TC	127.02	120.67	138.77
	72141	26	67.31	63.94	73.53
	72141		179.93	170.93	196.57
	72141	TC	112.62	106.99	123.04
	72142	26	81.88	77.79	89.46
	72142		257.40	244.53	281.21
	72142	TC	175.52	166.74	191.75
	72146	26	67.31	63.94	73.53
	72146		179.62	170.64	196.24

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	72146	TC	112.31	106.69	122.69
	72147	26	81.13	77.07	88.63
	72147		254.81	242.07	278.38
	72147	TC	173.68	165.00	189.75
	72148	26	67.61	64.23	73.86
	72148		180.84	171.80	197.57
	72148	TC	113.23	107.57	123.71
	72149	26	81.13	77.07	88.63
	72149		253.27	240.61	276.70
	72149	TC	172.15	163.54	188.07
	72156		299.43	284.46	327.13
	72156	TC	195.13	185.37	213.18
	72156	26	104.30	99.09	113.95
	72157		300.05	285.05	327.81
	72157	TC	195.75	185.96	213.85
	72157	26	104.30	99.09	113.95
	72158		299.74	284.75	327.46
	72158	TC	195.44	185.67	213.52
	72158	26	104.30	99.09	113.95
	72159	26	81.49	77.42	89.03
	72159		315.62	299.84	344.82
	72159	TC	234.13	222.42	255.78
	72170	26	8.23	7.82	8.99
	72170		26.39	25.07	28.83
	72170	TC	18.15	17.24	19.83
	72190		40.76	38.72	44.53
	72190	TC	28.57	27.14	31.21
	72190	26	12.19	11.58	13.32
	72191	26	81.64	77.56	89.19
C	72191		245.13	232.87	267.80
C	72191	TC	163.49	155.32	178.62

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	72192	TC	76.08	72.28	83.12
	72192	26	49.19	46.73	53.74
	72192		125.27	119.01	136.86
	72193	26	52.84	50.20	57.73
	72193		211.13	200.57	230.66
	72193	TC	158.28	150.37	172.93
	72194	26	55.47	52.70	60.61
C	72194		219.27	208.31	239.56
C	72194	TC	163.80	155.61	178.95
	72195	26	65.95	62.65	72.05
	72195		213.51	202.83	233.25
	72195	TC	147.56	140.18	161.21
	72196	26	78.53	74.60	85.79
	72196		251.90	239.31	275.21
	72196	TC	173.37	164.70	189.41
	72197		314.22	298.51	343.29
	72197	TC	213.83	203.14	233.61
	72197	26	100.39	95.37	109.68
	72198	26	80.88	76.84	88.37
	72198		314.39	298.67	343.47
	72198	TC	233.51	221.83	255.10
	72200	26	8.23	7.82	8.99
	72200		31.60	30.02	34.52
	72200	TC	23.36	22.19	25.52
	72202		36.34	34.52	39.70
	72202	TC	26.12	24.81	28.53
	72202	26	10.22	9.71	11.17
	72220	26	8.23	7.82	8.99
	72220		30.06	28.56	32.84
	72220	TC	21.83	20.74	23.85
	72240	TC	63.21	60.05	69.06

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	72240	26	42.57	40.44	46.51
	72240		105.77	100.48	115.55
	72255	TC	57.08	54.23	62.36
	72255	26	41.58	39.50	45.43
	72255		98.65	93.72	107.78
	72265	TC	64.43	61.21	70.39
	72265	26	39.50	37.53	43.16
	72265		103.94	98.74	113.55
	72270	TC	67.50	64.13	73.75
	72270	26	59.47	56.50	64.98
	72270		126.97	120.62	138.71
	72285	TC	80.67	76.64	88.14
	72285	26	56.00	53.20	61.18
	72285		136.67	129.84	149.32
	72295	TC	75.16	71.40	82.11
	72295	26	39.74	37.75	43.41
	72295		114.90	109.16	125.53
	73000	26	7.90	7.51	8.64
	73000		31.26	29.70	34.16
	73000	TC	23.36	22.19	25.52
	73010	26	8.84	8.40	9.66
	73010		23.63	22.45	25.82
	73010	TC	14.78	14.04	16.15
	73020	26	7.25	6.89	7.92
	73020		20.50	19.48	22.40
	73020	TC	13.25	12.59	14.48
	73030	26	8.87	8.43	9.69
	73030		33.46	31.79	36.56
	73030	TC	24.59	23.36	26.86
	73040	26	26.28	24.97	28.72
	73040		125.35	119.08	136.94

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	73040	TC	99.06	94.11	108.23
	73050		28.56	27.13	31.20
	73050	TC	19.38	18.41	21.17
	73050	26	9.18	8.72	10.03
	73060	26	7.90	7.51	8.64
	73060		30.03	28.53	32.81
	73060	TC	22.14	21.03	24.18
	73070	26	7.90	7.51	8.64
	73070		27.58	26.20	30.13
	73070	TC	19.69	18.71	21.52
	73080	26	8.23	7.82	8.99
	73080		30.98	29.43	33.84
	73080	TC	22.75	21.61	24.85
	73085		90.10	85.60	98.44
	73085	TC	65.35	62.08	71.39
	73085	26	24.75	23.51	27.04
	73090	26	7.59	7.21	8.29
	73090		27.28	25.92	29.81
	73090	TC	19.69	18.71	21.52
	73092	26	7.59	7.21	8.29
	73092		28.81	27.37	31.48
	73092	TC	21.22	20.16	23.18
	73100	26	8.20	7.79	8.96
	73100		32.18	30.57	35.16
	73100	TC	23.98	22.78	26.20
	73110	26	8.54	8.11	9.33
	73110		39.87	37.88	43.56
	73110	TC	31.33	29.76	34.22
	73115	26	26.66	25.33	29.13
	73115		124.19	117.98	135.68
	73115	TC	97.53	92.65	106.55

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	73120	26	7.90	7.51	8.64
	73120		29.42	27.95	32.14
	73120	TC	21.53	20.45	23.52
	73130	26	8.54	8.11	9.33
	73130		35.58	33.80	38.87
	73130	TC	27.04	25.69	29.54
	73140	26	6.58	6.25	7.19
	73140		36.69	34.86	40.09
	73140	TC	30.11	28.60	32.89
	73200	26	45.90	43.61	50.15
C	73200		143.50	136.33	156.78
C	73200	TC	97.60	92.72	106.63
	73201	26	52.84	50.20	57.73
	73201		186.92	177.57	204.21
	73201	TC	134.07	127.37	146.48
	73202	26	55.16	52.40	60.26
C	73202		218.96	208.01	239.21
C	73202	TC	163.80	155.61	178.95
	73206	26	81.64	77.56	89.19
C	73206		245.51	233.23	268.21
C	73206	TC	163.87	155.68	179.03
	73218	26	61.98	58.88	67.71
	73218		282.86	268.72	309.03
	73218	TC	220.88	209.84	241.32
	73219	26	73.84	70.15	80.67
	73219		307.90	292.51	336.39
	73219	TC	234.06	222.36	255.71
	73220		380.57	361.54	415.77
	73220	TC	282.24	268.13	308.35
	73220	26	98.33	93.41	107.42
	73221	26	62.29	59.18	68.06

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	73221		192.68	183.05	210.51
	73221	TC	130.40	123.88	142.46
	73222	26	74.15	70.44	81.01
	73222		292.27	277.66	319.31
	73222	TC	218.12	207.21	238.29
	73223		358.74	340.80	391.92
	73223	TC	260.41	247.39	284.50
	73223	26	98.33	93.41	107.42
	73225	26	77.45	73.58	84.62
	73225		302.99	287.84	331.02
	73225	TC	225.55	214.27	246.41
	73501	26	8.87	8.43	9.69
	73501		31.62	30.04	34.55
	73501	TC	22.75	21.61	24.85
	73502		45.50	43.23	49.71
	73502	TC	35.01	33.26	38.25
	73502	26	10.49	9.97	11.47
	73503		58.59	55.66	64.01
	73503	TC	45.43	43.16	49.63
	73503	26	13.16	12.50	14.38
	73521		39.07	37.12	42.69
	73521	TC	28.57	27.14	31.21
	73521	26	10.49	9.97	11.47
	73522		50.99	48.44	55.71
	73522	TC	37.16	35.30	40.60
	73522	26	13.83	13.14	15.11
	73523		57.48	54.61	62.80
	73523	TC	42.98	40.83	46.95
	73523	26	14.51	13.78	15.85
	73525	26	27.89	26.50	30.48
	73525		124.19	117.98	135.68

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	73525	TC	96.30	91.49	105.21
	73551	26	7.90	7.51	8.64
	73551		27.58	26.20	30.13
	73551	TC	19.69	18.71	21.52
	73552	26	8.57	8.14	9.36
	73552		33.46	31.79	36.56
	73552	TC	24.90	23.66	27.21
	73560	26	7.90	7.51	8.64
	73560		32.18	30.57	35.16
	73560	TC	24.28	23.07	26.53
	73562		39.59	37.61	43.25
	73562	TC	30.41	28.89	33.22
	73562	26	9.18	8.72	10.03
	73564		46.12	43.81	50.38
	73564	TC	35.32	33.55	38.58
	73564	26	10.80	10.26	11.80
	73565	26	8.20	7.79	8.96
	73565		39.23	37.27	42.86
	73565	TC	31.03	29.48	33.90
	73580	TC	78.53	74.60	85.79
	73580	26	31.32	29.75	34.21
	73580		109.85	104.36	120.01
	73590	26	7.59	7.21	8.29
	73590		29.42	27.95	32.14
	73590	TC	21.83	20.74	23.85
	73592	26	7.59	7.21	8.29
	73592		28.81	27.37	31.48
	73592	TC	21.22	20.16	23.18
	73600	26	7.90	7.51	8.64
	73600		30.34	28.82	33.14
	73600	TC	22.44	21.32	24.52

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	73610	26	8.23	7.82	8.99
	73610		34.66	32.93	37.87
	73610	TC	26.43	25.11	28.88
	73615	26	27.58	26.20	30.13
	73615		123.89	117.70	135.36
	73615	TC	96.30	91.49	105.21
	73620	26	7.59	7.21	8.29
	73620		26.97	25.62	29.46
	73620	TC	19.38	18.41	21.17
	73630	26	7.92	7.52	8.65
	73630		31.90	30.31	34.86
	73630	TC	23.98	22.78	26.20
	73650	26	7.59	7.21	8.29
	73650		26.66	25.33	29.13
	73650	TC	19.07	18.12	20.84
	73660	26	6.28	5.97	6.87
	73660		26.88	25.54	29.37
	73660	TC	20.61	19.58	22.52
	73700	TC	77.00	73.15	84.12
	73700	26	45.90	43.61	50.15
	73700		122.89	116.75	134.26
	73701	26	52.84	50.20	57.73
	73701		156.27	148.46	170.73
	73701	TC	103.43	98.26	113.00
	73702	26	55.16	52.40	60.26
	73702		182.80	173.66	199.71
	73702	TC	127.64	121.26	139.45
	73706	26	85.96	81.66	93.91
C	73706		249.83	237.34	272.94
C	73706	TC	163.87	155.68	179.03
	73718	26	61.37	58.30	67.05

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	73718		208.62	198.19	227.92
	73718	TC	147.25	139.89	160.87
	73719	26	73.23	69.57	80.01
	73719		245.07	232.82	267.74
	73719	TC	171.84	163.25	187.74
	73720		314.61	298.88	343.71
	73720	TC	216.59	205.76	236.62
	73720	26	98.02	93.12	107.09
	73721	26	61.98	58.88	67.71
	73721		192.07	182.47	209.84
	73721	TC	130.09	123.59	142.13
	73722	26	74.15	70.44	81.01
	73722		294.41	279.69	321.64
	73722	TC	220.26	209.25	240.64
	73723		357.21	339.35	390.25
	73723	TC	259.19	246.23	283.16
	73723	26	98.02	93.12	107.09
	73725	26	81.97	77.87	89.55
	73725		315.49	299.72	344.68
	73725	TC	233.51	221.83	255.10
	74018	26	8.57	8.14	9.36
	74018		27.95	26.55	30.53
	74018	TC	19.38	18.41	21.17
	74019		33.89	32.20	37.03
	74019	TC	23.36	22.19	25.52
	74019	26	10.52	9.99	11.49
	74021		39.52	37.54	43.17
	74021	TC	27.35	25.98	29.88
	74021	26	12.17	11.56	13.29
	74022		46.48	44.16	50.78
	74022	TC	31.64	30.06	34.57

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	74022	26	14.84	14.10	16.22
	74150	TC	74.85	71.11	81.78
	74150	26	54.16	51.45	59.17
	74150		129.01	122.56	140.94
	74160	26	57.76	54.87	63.10
	74160		215.43	204.66	235.36
	74160	TC	157.67	149.79	172.26
	74170	26	63.35	60.18	69.21
C	74170		227.15	215.79	248.16
C	74170	TC	163.80	155.61	178.95
	74174		354.74	337.00	387.55
	74174	TC	254.97	242.22	278.55
	74174	26	99.78	94.79	109.01
	74175	26	82.28	78.17	89.90
C	74175		245.77	233.48	268.50
C	74175	TC	163.49	155.32	178.62
	74176	26	78.86	74.92	86.16
	74176		173.71	165.02	189.77
	74176	TC	94.84	90.10	103.62
	74177	26	82.89	78.75	90.56
	74177		281.63	267.55	307.68
	74177	TC	198.74	188.80	217.12
	74178		316.96	301.11	346.28
	74178	TC	225.17	213.91	246.00
	74178	26	91.79	87.20	100.28
	74181	26	65.64	62.36	71.71
	74181		182.55	173.42	199.43
	74181	TC	116.91	111.06	127.72
	74182	26	78.22	74.31	85.46
	74182		281.32	267.25	307.34
	74182	TC	203.10	192.95	221.89

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	74183		315.75	299.96	344.95
	74183	TC	215.36	204.59	235.28
	74183	26	100.39	95.37	109.68
	74185	26	81.64	77.56	89.19
	74185		314.23	298.52	343.30
	74185	TC	232.60	220.97	254.12
	74190	26	21.51	20.43	23.49
	74210		85.65	81.37	93.58
	74210	TC	58.91	55.96	64.35
	74210	26	26.74	25.40	29.21
	74220		88.44	84.02	96.62
	74220	TC	61.06	58.01	66.71
	74220	26	27.38	26.01	29.91
	74221	TC	67.50	64.13	73.75
	74221	26	31.70	30.12	34.64
	74221		99.19	94.23	108.36
	74230	TC	87.72	83.33	95.83
	74230	26	24.41	23.19	26.67
	74230		112.14	106.53	122.51
	74235	26	54.16	51.45	59.17
	74240	TC	77.30	73.44	84.46
	74240	26	37.20	35.34	40.64
	74240		114.50	108.78	125.10
	74246	TC	85.27	81.01	93.16
	74246	26	41.24	39.18	45.06
	74246		126.51	120.18	138.21
	74248		75.29	71.53	82.26
	74248	TC	43.59	41.41	47.62
	74248	26	31.70	30.12	34.64
	74250	TC	74.24	70.53	81.11
	74250	26	36.99	35.14	40.41

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	74250		111.23	105.67	121.52
	74251	26	53.18	50.52	58.10
C	74251		216.91	206.06	236.97
C	74251	TC	163.73	155.54	178.87
C	74261		207.13	196.77	226.29
	74261	26	109.60	104.12	119.74
C	74261	TC	97.53	92.65	106.55
C	74262		277.98	264.08	303.69
C	74262	TC	163.80	155.61	178.95
	74262	26	114.18	108.47	124.74
C	74263		339.96	322.96	371.40
C	74263	TC	222.57	211.44	243.16
	74263	26	117.39	111.52	128.25
	74270	26	47.21	44.85	51.58
	74270		139.84	132.85	152.78
	74270	TC	92.63	88.00	101.20
	74280	26	57.12	54.26	62.40
	74280		198.24	188.33	216.58
	74280	TC	141.12	134.06	154.17
	74283		263.83	250.64	288.24
	74283	TC	162.81	154.67	177.87
	74283	26	101.02	95.97	110.37
	74290		75.60	71.82	82.59
	74290	TC	61.06	58.01	66.71
	74290	26	14.54	13.81	15.88
	74300	26	12.93	12.28	14.12
	74301	26	9.24	8.78	10.10
	74328	26	23.55	22.37	25.73
	74329	26	23.86	22.67	26.07
	74330	26	27.26	25.90	29.79
	74340	26	24.75	23.51	27.04

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	74355	26	34.63	32.90	37.84
	74360	26	28.57	27.14	31.21
	74363	26	38.26	36.35	41.80
	74400	26	22.46	21.34	24.54
	74400		122.82	116.68	134.18
	74400	TC	100.36	95.34	109.64
	74410	26	22.69	21.56	24.79
	74410		134.39	127.67	146.82
	74410	TC	111.70	106.12	122.04
	74415	26	22.46	21.34	24.54
	74415		140.90	133.86	153.94
	74415	TC	118.44	112.52	129.40
	74420		76.18	72.37	83.23
	74420	TC	51.87	49.28	56.67
	74420	26	24.31	23.09	26.55
	74425	26	23.44	22.27	25.61
	74425		124.65	118.42	136.18
	74425	TC	101.21	96.15	110.57
	74430		39.43	37.46	43.08
	74430	TC	24.59	23.36	26.86
	74430	26	14.84	14.10	16.22
	74440	TC	76.08	72.28	83.12
	74440	26	17.70	16.82	19.34
	74440		93.78	89.09	102.45
	74445	26	52.87	50.23	57.76
	74450	26	15.18	14.42	16.58
	74455	TC	82.51	78.38	90.14
	74455	26	15.48	14.71	16.92
	74455		98.00	93.10	107.07
	74470	26	24.44	23.22	26.70
	74485	TC	77.30	73.44	84.46

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	74485	26	38.75	36.81	42.33
	74485		116.05	110.25	126.79
C	74712		360.00	342.00	393.30
C	74712	TC	222.72	211.58	243.32
	74712	26	137.28	130.42	149.98
	74713	26	84.51	80.28	92.32
	74713		186.94	177.59	204.23
	74713	TC	102.43	97.31	111.91
	74740		84.05	79.85	91.83
	74740	TC	66.58	63.25	72.74
	74740	26	17.47	16.60	19.09
	74742	26	27.68	26.30	30.25
	74775	26	28.40	26.98	31.03
	75557		264.00	250.80	288.42
	75557	TC	157.98	150.08	172.59
	75557	26	106.02	100.72	115.83
	75559		357.97	340.07	391.08
	75559	TC	224.79	213.55	245.58
	75559	26	133.18	126.52	145.50
	75561		343.48	326.31	375.26
	75561	TC	225.17	213.91	246.00
	75561	26	118.31	112.39	129.25
	75563		404.07	383.87	441.45
	75563	TC	268.07	254.67	292.87
	75563	26	136.00	129.20	148.58
	75565		42.45	40.33	46.38
	75565	TC	31.26	29.70	34.16
	75565	26	11.19	10.63	12.22
	75571	TC	66.96	63.61	73.15
	75571	26	26.40	25.08	28.84
	75571		93.36	88.69	101.99

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	75572	26	79.05	75.10	86.37
	75572		216.26	205.45	236.27
	75572	TC	137.21	130.35	149.90
	75573		292.30	277.69	319.34
	75573	TC	175.59	166.81	191.83
	75573	26	116.71	110.87	127.50
	75574		306.80	291.46	335.18
	75574	TC	197.66	187.78	215.95
	75574	26	109.15	103.69	119.24
	75577	TC	890.68	846.15	973.07
	75577	26	40.77	38.73	44.54
	75577		931.45	884.88	1,017.61
	75580		816.47	775.65	892.00
	75580	TC	782.55	743.42	854.93
	75580	26	33.92	32.22	37.05
	75600	26	23.67	22.49	25.86
	75600		164.79	156.55	180.03
	75600	TC	141.12	134.06	154.17
	75605	TC	63.28	60.12	69.14
	75605	26	51.92	49.32	56.72
	75605		115.20	109.44	125.86
	75625	26	65.99	62.69	72.09
	75625	TC	54.62	51.89	59.67
	75625		120.61	114.58	131.77
	75630	26	90.88	86.34	99.29
	75630	TC	59.29	56.33	64.78
	75630		150.18	142.67	164.07
C	75635		272.32	258.70	297.51
C	75635	TC	163.87	155.68	179.03
	75635	26	108.44	103.02	118.47
	75705		276.78	262.94	302.38

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	75705	TC	154.37	146.65	168.65
	75705	26	122.41	116.29	133.73
	75710	26	80.52	76.49	87.96
	75710	TC	63.28	60.12	69.14
	75710		143.80	136.61	157.10
	75716	26	89.88	85.39	98.20
	75716	TC	66.65	63.32	72.82
	75716		156.53	148.70	171.01
	75726	26	90.36	85.84	98.72
	75726	TC	70.63	67.10	77.17
	75726		160.99	152.94	175.88
	75731	TC	90.63	86.10	99.02
	75731	26	51.87	49.28	56.67
	75731		142.49	135.37	155.68
	75733	26	58.89	55.95	64.34
	75733		164.91	156.66	180.16
	75733	TC	106.02	100.72	115.83
	75736	TC	85.72	81.43	93.64
	75736	26	49.79	47.30	54.40
	75736		135.52	128.74	148.05
	75741	TC	63.89	60.70	69.81
	75741	26	58.02	55.12	63.39
	75741		121.91	115.81	133.18
	75743	26	73.94	70.24	80.78
	75743	TC	65.73	62.44	71.81
	75743		139.67	132.69	152.59
	75746	TC	76.46	72.64	83.54
	75746	26	50.64	48.11	55.33
	75746		127.10	120.75	138.86
	75756	26	53.76	51.07	58.73
	75756		157.87	149.98	172.48

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	75756	TC	104.11	98.90	113.74
	75774		90.79	86.25	99.19
	75774	TC	46.66	44.33	50.98
	75774	26	44.13	41.92	48.21
	75801	26	43.32	41.15	47.32
	75803	26	53.49	50.82	58.44
	75805	26	37.30	35.44	40.76
	75807	26	50.80	48.26	55.50
	75809		79.86	75.87	87.25
	75809	TC	56.77	53.93	62.02
	75809	26	23.09	21.94	25.23
	75810	26	47.11	44.75	51.46
	75820	TC	54.32	51.60	59.34
	75820	26	47.69	45.31	52.11
	75820		102.01	96.91	111.45
	75822	26	67.06	63.71	73.27
	75822	TC	60.45	57.43	66.04
	75822		127.50	121.13	139.30
	75825	TC	56.46	53.64	61.69
	75825	26	51.99	49.39	56.80
	75825		108.46	103.04	118.50
	75827	TC	60.75	57.71	66.37
	75827	26	52.68	50.05	57.56
	75827		113.43	107.76	123.92
	75831	TC	63.28	60.12	69.14
	75831	26	49.86	47.37	54.48
	75831		113.14	107.48	123.60
	75833	TC	77.99	74.09	85.20
	75833	26	71.58	68.00	78.20
	75833		149.56	142.08	163.39
	75840	TC	67.26	63.90	73.49

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	75840	26	51.87	49.28	56.67
	75840		119.13	113.17	130.15
	75860	TC	70.02	66.52	76.50
	75860	26	53.07	50.42	57.98
	75860		123.10	116.95	134.49
	75870	26	62.15	59.04	67.90
	75870		173.85	165.16	189.93
	75870	TC	111.70	106.12	122.04
	75872	TC	67.26	63.90	73.49
	75872	26	51.87	49.28	56.67
	75872		119.13	113.17	130.15
	75880	TC	66.96	63.61	73.15
	75880	26	32.00	30.40	34.96
	75880		98.96	94.01	108.11
	75885	TC	66.04	62.74	72.15
	75885	26	63.12	59.96	68.95
	75885		129.15	122.69	141.09
	75887	TC	66.34	63.02	72.47
	75887	26	63.12	59.96	68.95
	75887		129.46	122.99	141.44
	75889	TC	66.34	63.02	72.47
	75889	26	49.72	47.23	54.31
	75889		116.06	110.26	126.80
	75891	TC	66.65	63.32	72.82
	75891	26	50.03	47.53	54.66
	75891		116.68	110.85	127.48
	75893	TC	77.68	73.80	84.87
	75893	26	25.89	24.60	28.29
	75893		103.57	98.39	113.15
	75894		300.63	285.60	328.44
	75894	TC	173.68	165.00	189.75

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	75894	26	126.95	120.60	138.69
	75898		258.76	245.82	282.69
	75898	TC	153.07	145.42	167.23
	75898	26	105.69	100.41	115.47
	75901	26	22.23	21.12	24.29
	75901		210.85	200.31	230.36
	75901	TC	188.62	179.19	206.07
	75902		80.54	76.51	87.99
	75902	TC	62.59	59.46	68.38
	75902	26	17.95	17.05	19.61
	75970	26	36.51	34.68	39.88
	75984		88.99	84.54	97.22
	75984	TC	52.17	49.56	56.99
	75984	26	36.82	34.98	40.23
	75989	26	53.92	51.22	58.90
	75989	TC	53.40	50.73	58.34
	75989		107.32	101.95	117.24
	76000		41.62	39.54	45.47
	76000	TC	26.43	25.11	28.88
	76000	26	15.19	14.43	16.59
	76010	26	8.26	7.85	9.03
	76010		27.03	25.68	29.53
	76010	TC	18.77	17.83	20.50
	76014		10.19	9.68	11.13
	76015		49.16	46.70	53.71
	76016		67.98	64.58	74.27
	76016	TC	40.60	38.57	44.36
	76016	26	27.38	26.01	29.91
	76017	26	34.32	32.60	37.49
	76017		206.46	196.14	225.56
	76017	TC	172.13	163.52	188.05

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	76018	TC	73.93	70.23	80.76
	76018	26	33.92	32.22	37.05
	76018		107.85	102.46	117.83
	76019	26	27.90	26.51	30.49
	76019		142.90	135.76	156.12
	76019	TC	115.00	109.25	125.64
	76080		55.85	53.06	61.02
	76080	TC	31.95	30.35	34.90
	76080	26	23.90	22.71	26.12
	76098		40.63	38.60	44.39
	76098	TC	26.12	24.81	28.53
	76098	26	14.51	13.78	15.85
	76100		81.02	76.97	88.52
	76100	TC	54.32	51.60	59.34
	76100	26	26.71	25.37	29.18
	76120	TC	87.11	82.75	95.16
	76120	26	18.32	17.40	20.01
	76120		105.43	100.16	115.18
	76125	26	13.85	13.16	15.13
	76145		957.13	909.27	1,045.66
	76376		24.02	22.82	26.24
	76376	TC	14.78	14.04	16.15
	76376	26	9.24	8.78	10.10
	76377		75.08	71.33	82.03
	76377	TC	38.45	36.53	42.01
	76377	26	36.63	34.80	40.02
	76380	TC	80.37	76.35	87.80
	76380	26	44.38	42.16	48.48
	76380		124.75	118.51	136.29
	76391	26	49.53	47.05	54.11
	76391		184.83	175.59	201.93

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	76391	TC	135.30	128.54	147.82
	76506	TC	73.01	69.36	79.76
	76506	26	29.04	27.59	31.73
	76506		102.05	96.95	111.49
	76510		65.26	62.00	71.30
	76510	26	37.30	35.44	40.76
	76510	TC	27.96	26.56	30.54
	76511		54.67	51.94	59.73
	76511	26	34.06	32.36	37.21
	76511	TC	20.61	19.58	22.52
	76512		46.50	44.18	50.81
	76512	26	29.57	28.09	32.30
	76512	TC	16.93	16.08	18.49
	76513		72.05	68.45	78.72
	76513	TC	40.53	38.50	44.28
	76513	26	31.52	29.94	34.43
	76514	26	7.53	7.15	8.22
	76514	TC	3.75	3.56	4.09
	76514		11.28	10.72	12.33
	76516		45.11	42.85	49.28
	76516	TC	23.36	22.19	25.52
	76516	26	21.75	20.66	23.76
	76519		65.44	62.17	71.50
	76519	TC	36.24	34.43	39.59
	76519	26	29.20	27.74	31.90
	76529		81.84	77.75	89.41
	76529	TC	50.64	48.11	55.33
	76529	26	31.20	29.64	34.09
	76536	TC	75.46	71.69	82.44
	76536	26	26.03	24.73	28.44
	76536		101.50	96.43	110.89

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	76604		58.14	55.23	63.51
	76604	TC	30.72	29.18	33.56
	76604	26	27.42	26.05	29.96
	76641	TC	61.06	58.01	66.71
	76641	26	33.32	31.65	36.40
	76641		94.38	89.66	103.11
	76642		78.91	74.96	86.20
	76642	TC	47.88	45.49	52.31
	76642	26	31.03	29.48	33.90
	76700	TC	70.63	67.10	77.17
	76700	26	36.92	35.07	40.33
	76700		107.56	102.18	117.51
	76705		81.05	77.00	88.55
	76705	TC	54.01	51.31	59.01
	76705	26	27.04	25.69	29.54
	76706	TC	73.63	69.95	80.44
	76706	26	25.47	24.20	27.83
	76706		99.09	94.14	108.26
	76770	TC	66.27	62.96	72.40
	76770	26	33.65	31.97	36.77
	76770		99.92	94.92	109.16
	76775		57.73	54.84	63.07
	76775	TC	31.03	29.48	33.90
	76775	26	26.71	25.37	29.18
	76776	26	34.32	32.60	37.49
	76776		134.07	127.37	146.48
	76776	TC	99.75	94.76	108.97
	76800	26	64.03	60.83	69.95
C	76800		161.56	153.48	176.50
C	76800	TC	97.53	92.65	106.55
	76801	TC	64.74	61.50	70.73

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	76801	26	45.79	43.50	50.03
	76801		110.53	105.00	120.75
	76802		58.13	55.22	63.50
	76802	26	38.82	36.88	42.41
	76802	TC	19.31	18.34	21.09
	76805	TC	81.67	77.59	89.23
	76805	26	46.41	44.09	50.70
	76805		128.07	121.67	139.92
	76810		84.45	80.23	92.26
	76810	26	46.38	44.06	50.67
	76810	TC	38.07	36.17	41.60
	76811	26	89.04	84.59	97.28
	76811	TC	84.19	79.98	91.98
	76811		173.23	164.57	189.26
	76812	26	84.12	79.91	91.90
	76812		184.17	174.96	201.20
	76812	TC	100.05	95.05	109.31
	76813	26	55.59	52.81	60.73
	76813	TC	54.32	51.60	59.34
	76813		109.91	104.41	120.07
	76814		71.84	68.25	78.49
	76814	26	46.71	44.37	51.03
	76814	TC	25.13	23.87	27.45
	76815		76.98	73.13	84.10
	76815	TC	46.66	44.33	50.98
	76815	26	30.33	28.81	33.13
	76816	TC	64.74	61.50	70.73
	76816	26	40.10	38.10	43.82
	76816		104.84	99.60	114.54
	76817		87.69	83.31	95.81
	76817	TC	52.79	50.15	57.67

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	76817	26	34.91	33.16	38.13
	76818	TC	66.04	62.74	72.15
	76818	26	49.31	46.84	53.87
	76818		115.35	109.58	126.02
	76819		83.23	79.07	90.93
	76819	TC	47.04	44.69	51.39
	76819	26	36.19	34.38	39.54
	76820		43.02	40.87	47.00
	76820	26	23.64	22.46	25.83
	76820	TC	19.38	18.41	21.17
	76821		85.02	80.77	92.89
	76821	TC	52.17	49.56	56.99
	76821	26	32.85	31.21	35.89
	76825	26	77.52	73.64	84.69
	76825		245.69	233.41	268.42
	76825	TC	168.16	159.75	183.71
	76826	26	38.75	36.81	42.33
	76826		148.00	140.60	161.69
	76826	TC	109.25	103.79	119.36
	76827		65.93	62.63	72.02
	76827	TC	38.99	37.04	42.60
	76827	26	26.94	25.59	29.43
	76828		47.18	44.82	51.54
	76828	26	26.27	24.96	28.70
	76828	TC	20.91	19.86	22.84
	76830	TC	78.30	74.39	85.55
	76830	26	31.97	30.37	34.93
	76830		110.27	104.76	120.47
	76831	TC	75.77	71.98	82.78
	76831	26	34.21	32.50	37.38
	76831		109.98	104.48	120.15

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	76856	TC	66.88	63.54	73.07
	76856	26	31.97	30.37	34.93
	76856		98.86	93.92	108.01
	76857		48.61	46.18	53.11
	76857	TC	25.20	23.94	27.53
	76857	26	23.41	22.24	25.58
	76870	TC	63.21	60.05	69.06
	76870	26	29.38	27.91	32.10
	76870		92.58	87.95	101.14
	76872	TC	81.36	77.29	88.88
	76872	26	31.16	29.60	34.04
	76872		112.52	106.89	122.92
	76873	26	74.72	70.98	81.63
	76873		168.95	160.50	184.58
	76873	TC	94.23	89.52	102.95
	76881		52.27	49.66	57.11
	76881	26	42.09	39.99	45.99
	76881	TC	10.19	9.68	11.13
	76882		61.16	58.10	66.82
	76882	26	31.67	30.09	34.60
	76882	TC	29.49	28.02	32.22
	76883		72.37	68.75	79.06
	76883	26	57.28	54.42	62.58
	76883	TC	15.09	14.34	16.49
C	76885	TC	81.36	77.29	88.88
	76885	26	33.65	31.97	36.77
C	76885		115.01	109.26	125.65
	76886		91.30	86.74	99.75
	76886	TC	62.90	59.76	68.72
	76886	26	28.40	26.98	31.03
	76932	26	33.30	31.64	36.39

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	76936		250.44	237.92	273.61
	76936	TC	158.05	150.15	172.67
	76936	26	92.39	87.77	100.94
	76937		38.22	36.31	41.76
	76937	TC	24.59	23.36	26.86
	76937	26	13.63	12.95	14.89
	76940	26	101.88	96.79	111.31
	76941	26	63.10	59.95	68.94
	76942		61.03	57.98	66.68
	76942	26	30.92	29.37	33.78
	76942	TC	30.11	28.60	32.89
	76945	26	31.54	29.96	34.45
	76946		32.56	30.93	35.57
	76946	26	18.08	17.18	19.76
	76946	TC	14.48	13.76	15.82
	76948		77.58	73.70	84.76
	76948	TC	46.04	43.74	50.30
	76948	26	31.54	29.96	34.45
	76965	26	66.40	63.08	72.54
	76965	TC	26.43	25.11	28.88
	76965		92.83	88.19	101.42
	76975	26	41.75	39.66	45.61
	76977		7.34	6.97	8.02
	76977	TC	4.67	4.44	5.11
	76977	26	2.67	2.54	2.92
	76978	TC	89.02	84.57	97.26
	76978	26	73.54	69.86	80.34
	76978		162.56	154.43	177.59
	76979	TC	61.98	58.88	67.71
	76979	26	38.95	37.00	42.55
	76979		100.93	95.88	110.26

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	76981	TC	76.69	72.86	83.79
	76981	26	28.57	27.14	31.21
	76981		105.26	100.00	115.00
	76982		86.88	82.54	94.92
	76982	TC	59.22	56.26	64.70
	76982	26	27.65	26.27	30.21
	76983		57.41	54.54	62.72
	76983	TC	33.78	32.09	36.90
	76983	26	23.63	22.45	25.82
	76984	26	32.39	30.77	35.39
	76987	26	94.70	89.97	103.47
	76988	26	76.52	72.69	83.59
	76989	26	37.18	35.32	40.62
	76998	26	48.50	46.08	52.99
	77001	TC	74.24	70.53	81.11
	77001	26	17.61	16.73	19.24
	77001		91.85	87.26	100.35
	77002	TC	86.50	82.18	94.51
	77002	26	26.59	25.26	29.05
	77002		113.09	107.44	123.56
	77003	TC	69.95	66.45	76.42
	77003	26	28.06	26.66	30.66
	77003		98.01	93.11	107.08
	77011	26	59.12	56.16	64.58
	77011		207.22	196.86	226.39
	77011	TC	148.10	140.70	161.81
	77012	26	66.52	63.19	72.67
	77012	TC	51.25	48.69	55.99
	77012		117.77	111.88	128.66
	77013	26	175.75	166.96	192.00
	77021	26	69.06	65.61	75.45

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	77021		396.51	376.68	433.18
	77021	TC	327.46	311.09	357.75
	77022	26	188.96	179.51	206.44
	77046	26	65.31	62.04	71.35
	77046		200.30	190.29	218.83
	77046	TC	134.99	128.24	147.48
	77047	26	72.25	68.64	78.94
	77047		203.87	193.68	222.73
	77047	TC	131.62	125.04	143.80
	77048		313.55	297.87	342.55
	77048	TC	217.81	206.92	237.96
	77048	26	95.73	90.94	104.58
	77049		319.38	303.41	348.92
	77049	TC	214.75	204.01	234.61
	77049	26	104.64	99.41	114.32
	77053		49.97	47.47	54.59
	77053	TC	33.48	31.81	36.58
	77053	26	16.49	15.67	18.02
	77054		64.40	61.18	70.36
	77054	TC	43.59	41.41	47.62
	77054	26	20.81	19.77	22.74
	77063		48.83	46.39	53.35
	77063	26	27.38	26.01	29.91
	77063	TC	21.45	20.38	23.44
	77065	TC	79.14	75.18	86.46
	77065	26	37.30	35.44	40.76
	77065		116.44	110.62	127.21
	77066	26	45.90	43.61	50.15
	77066		147.48	140.11	161.13
	77066	TC	101.59	96.51	110.99
	77067	TC	83.74	79.55	91.48

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	77067	26	34.63	32.90	37.84
	77067		118.37	112.45	129.32
	77071		55.31	52.54	60.42
	77072	26	8.90	8.46	9.73
	77072		23.99	22.79	26.21
	77072	TC	15.09	14.34	16.49
	77073		43.55	41.37	47.58
	77073	TC	30.72	29.18	33.56
	77073	26	12.83	12.19	14.02
	77074		61.00	57.95	66.64
	77074	TC	40.53	38.50	44.28
	77074	26	20.47	19.45	22.37
	77075	TC	66.34	63.02	72.47
	77075	26	25.39	24.12	27.74
	77075		91.74	87.15	100.22
	77076	TC	66.65	63.32	72.82
	77076	26	32.00	30.40	34.96
	77076		98.65	93.72	107.78
	77077		44.67	42.44	48.81
	77077	TC	28.57	27.14	31.21
	77077	26	16.10	15.30	17.60
	77078	TC	80.37	76.35	87.80
	77078	26	11.19	10.63	12.22
	77078		91.56	86.98	100.03
	77080		36.89	35.05	40.31
	77080	TC	27.65	26.27	30.21
	77080	26	9.24	8.78	10.10
	77081		29.84	28.35	32.60
	77081	TC	20.61	19.58	22.52
	77081	26	9.24	8.78	10.10
	77084	26	72.56	68.93	79.27

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	77084		293.13	278.47	320.24
	77084	TC	220.57	209.54	240.97
	77085		51.09	48.54	55.82
	77085	TC	36.92	35.07	40.33
	77085	26	14.17	13.46	15.48
	77086	26	7.92	7.52	8.65
	77086		32.51	30.88	35.51
	77086	TC	24.59	23.36	26.86
	77089		37.27	35.41	40.72
	77090		2.83	2.69	3.09
	77091		24.59	23.36	26.86
	77092		9.85	9.36	10.76
	77261		68.27	64.86	74.59
	77262		104.94	99.69	114.64
	77263		165.14	156.88	180.41
	77280	26	36.22	34.41	39.57
	77280		249.60	237.12	272.69
	77280	TC	213.38	202.71	233.12
	77285	26	54.45	51.73	59.49
	77285		418.99	398.04	457.75
	77285	TC	364.54	346.31	398.26
	77290	26	80.03	76.03	87.43
	77290		410.32	389.80	448.27
	77290	TC	330.29	313.78	360.85
	77293		375.10	356.35	409.80
	77293	TC	273.28	259.62	298.56
	77293	26	101.82	96.73	111.24
	77295		459.32	436.35	501.80
	77295	TC	239.56	227.58	261.72
	77295	26	219.77	208.78	240.10
	77300		63.64	60.46	69.53

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	77300	26	32.00	30.40	34.96
	77300	TC	31.64	30.06	34.57
	77301	26	409.84	389.35	447.75
	77301		1,826.51	1,735.18	1,995.46
	77301	TC	1,416.67	1,345.84	1,547.72
	77306	26	72.17	68.56	78.84
	77306	TC	70.33	66.81	76.83
	77306		142.49	135.37	155.68
	77307		275.75	261.96	301.25
	77307	26	148.58	141.15	162.32
	77307	TC	127.17	120.81	138.93
	77316	26	71.86	68.27	78.51
	77316		233.12	221.46	254.68
	77316	TC	161.26	153.20	176.18
	77317		305.26	290.00	333.50
	77317	TC	211.59	201.01	231.16
	77317	26	93.66	88.98	102.33
	77318		434.41	412.69	474.59
	77318	TC	285.83	271.54	312.27
	77318	26	148.58	141.15	162.32
	77321		89.81	85.32	98.12
	77321	26	48.67	46.24	53.18
	77321	TC	41.14	39.08	44.94
	77331		62.61	59.48	68.40
	77331	26	44.76	42.52	48.90
	77331	TC	17.85	16.96	19.50
	77332		38.89	36.95	42.49
	77332	26	23.19	22.03	25.33
	77332	TC	15.70	14.92	17.16
	77333	TC	90.48	85.96	98.85
	77333	26	38.21	36.30	41.75

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	77333		128.69	122.26	140.60
	77334	TC	60.75	57.71	66.37
	77334	26	58.80	55.86	64.24
	77334		119.55	113.57	130.61
	77336		85.09	80.84	92.97
	77338		449.82	427.33	491.43
	77338	TC	229.75	218.26	251.00
	77338	26	220.07	209.07	240.43
	77370		139.61	132.63	152.52
	77372		858.42	815.50	937.83
	77373		899.77	854.78	983.00
	77387		35.61	33.83	38.90
	77387	26	35.61	33.83	38.90
	77402		75.54	71.76	82.52
	77407		284.84	270.60	311.19
	77412		407.50	387.13	445.20
	77427		191.01	181.46	208.68
	77431		103.92	98.72	113.53
	77432		416.19	395.38	454.69
	77435		628.88	597.44	687.06
	77436		74.56	70.83	81.45
	77436	26	40.78	38.74	44.55
	77436	TC	33.78	32.09	36.90
	77437		100.60	95.57	109.91
	77438		101.51	96.43	110.89
	77439		15.59	14.81	17.03
	77439	26	15.59	14.81	17.03
	77469		264.14	250.93	288.57
	77470	TC	35.70	33.92	39.01
	77470		139.52	132.54	152.42
	77470	26	103.82	98.63	113.42

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	77600	26	68.53	65.10	74.87
	77600		507.60	482.22	554.55
	77600	TC	439.07	417.12	479.69
	77605	TC	854.95	812.20	934.03
	77605	26	103.46	98.29	113.03
	77605		958.41	910.49	1,047.06
	77610	26	67.23	63.87	73.45
	77610		622.76	591.62	680.36
	77610	TC	555.53	527.75	606.91
	77615	TC	887.33	842.96	969.40
	77615	26	94.00	89.30	102.70
	77615		981.33	932.26	1,072.10
	77620	26	87.34	82.97	95.42
	77620		679.04	645.09	741.85
	77620	TC	591.69	562.11	646.43
	77750		379.00	360.05	414.06
	77750	26	256.66	243.83	280.40
	77750	TC	122.34	116.22	133.65
	77761		401.84	381.75	439.01
	77761	TC	204.62	194.39	223.55
	77761	26	197.22	187.36	215.46
	77762		531.08	504.53	580.21
	77762	26	295.44	280.67	322.77
	77762	TC	235.64	223.86	257.44
	77763		754.84	717.10	824.67
	77763	26	443.75	421.56	484.79
	77763	TC	311.09	295.54	339.87
	77767	26	53.53	50.85	58.48
	77767		233.79	222.10	255.42
	77767	TC	180.26	171.25	196.94
	77768	26	72.17	68.56	78.84

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	77768		343.59	326.41	375.37
	77768	TC	271.43	257.86	296.54
	77770		327.06	310.71	357.32
	77770	TC	227.53	216.15	248.57
	77770	26	99.53	94.55	108.73
	77771		573.33	544.66	626.36
	77771	TC	378.37	359.45	413.37
	77771	26	194.96	185.21	212.99
	77772		857.64	814.76	936.97
	77772	TC	582.92	553.77	636.84
	77772	26	274.73	260.99	300.14
	77778		884.89	840.65	966.75
	77778	26	449.76	427.27	491.36
	77778	TC	435.12	413.36	475.36
	77789	TC	67.26	63.90	73.49
	77789	26	58.46	55.54	63.87
	77789		125.72	119.43	137.34
	77790		17.31	16.44	18.91
	78012	26	8.60	8.17	9.40
	78012		74.40	70.68	81.28
	78012	TC	65.80	62.51	71.89
	78013	26	16.52	15.69	18.04
	78013		153.73	146.04	167.95
	78013	TC	137.21	130.35	149.90
	78014	26	22.49	21.37	24.58
	78014		195.32	185.55	213.38
	78014	TC	172.83	164.19	188.82
	78015	26	30.69	29.16	33.53
	78015		189.73	180.24	207.28
	78015	TC	159.04	151.09	173.75
	78016	26	31.83	30.24	34.78

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	78016		233.62	221.94	255.23
	78016	TC	201.79	191.70	220.46
	78018	26	37.68	35.80	41.17
	78018		255.94	243.14	279.61
	78018	TC	218.26	207.35	238.45
	78020		74.65	70.92	81.56
	78020	TC	48.87	46.43	53.39
	78020	26	25.77	24.48	28.15
	78070	26	35.97	34.17	39.30
	78070		242.21	230.10	264.62
	78070	TC	206.24	195.93	225.32
	78071	26	53.50	50.83	58.45
	78071		288.31	273.89	314.97
	78071	TC	234.81	223.07	256.53
	78072	26	70.04	66.54	76.52
	78072		356.95	339.10	389.97
	78072	TC	286.91	272.56	313.44
	78075		358.41	340.49	391.56
	78075	26	33.65	31.97	36.77
	78075	TC	324.75	308.51	354.79
	78102	26	24.47	23.25	26.74
	78102		146.43	139.11	159.98
	78102	TC	121.96	115.86	133.24
	78103	26	28.87	27.43	31.54
	78103		158.79	150.85	173.48
	78103	TC	129.93	123.43	141.94
	78104	26	35.36	33.59	38.63
	78104		205.74	195.45	224.77
	78104	TC	170.38	161.86	186.14
	78110	26	7.68	7.30	8.40
	78110		66.20	62.89	72.32

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	78110	TC	58.52	55.59	63.93
	78111		89.85	85.36	98.16
	78111	TC	79.67	75.69	87.04
	78111	26	10.19	9.68	11.13
	78120	26	8.99	8.54	9.82
	78120		67.51	64.13	73.75
	78120	TC	58.52	55.59	63.93
	78121		90.76	86.22	99.15
	78121	TC	76.29	72.48	83.35
	78121	26	14.46	13.74	15.80
	78122	TC	74.15	70.44	81.01
	78122	26	20.43	19.41	22.32
	78122		94.58	89.85	103.33
	78130	26	23.55	22.37	25.73
	78130		118.69	112.76	129.67
	78130	TC	95.13	90.37	103.93
	78140	TC	79.36	75.39	86.70
	78140	26	23.55	22.37	25.73
	78140		102.91	97.76	112.42
	78185	26	15.62	14.84	17.07
	78185		143.09	135.94	156.33
	78185	TC	127.48	121.11	139.28
	78191	26	23.55	22.37	25.73
	78191		118.69	112.76	129.67
	78191	TC	95.13	90.37	103.93
	78195	26	52.89	50.25	57.79
	78195		290.15	275.64	316.99
	78195	TC	237.26	225.40	259.21
	78201	26	19.48	18.51	21.29
	78201		159.22	151.26	173.95
	78201	TC	139.73	132.74	152.65

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	78202	26	22.82	21.68	24.93
	78202		178.19	169.28	194.67
	78202	TC	155.36	147.59	169.73
	78215	26	22.46	21.34	24.54
	78215		165.56	157.28	180.87
	78215	TC	143.11	135.95	156.34
	78216	26	26.06	24.76	28.47
	78216		123.20	117.04	134.60
	78216	TC	97.13	92.27	106.11
	78226	26	33.35	31.68	36.43
	78226		264.18	250.97	288.62
	78226	TC	230.83	219.29	252.18
	78227	26	40.63	38.60	44.39
	78227		354.66	336.93	387.47
	78227	TC	314.03	298.33	343.08
	78230	26	20.81	19.77	22.74
	78230		146.75	139.41	160.32
	78230	TC	125.94	119.64	137.59
	78231	TC	77.83	73.94	85.03
	78231	26	20.26	19.25	22.14
	78231		98.08	93.18	107.16
	78232	TC	78.13	74.22	85.35
	78232	26	18.27	17.36	19.96
	78232		96.41	91.59	105.33
	78258	26	33.35	31.68	36.43
	78258		191.16	181.60	208.84
	78258	TC	157.82	149.93	172.42
	78261	26	26.55	25.22	29.00
	78261		170.88	162.34	186.69
	78261	TC	144.33	137.11	157.68
	78262	26	31.03	29.48	33.90

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	78262		202.02	191.92	220.71
	78262	TC	170.99	162.44	186.81
	78264	26	35.33	33.56	38.59
	78264		268.92	255.47	293.79
	78264	TC	233.59	221.91	255.20
	78265	26	44.23	42.02	48.32
	78265		322.64	306.51	352.49
	78265	TC	278.40	264.48	304.15
	78266	26	46.88	44.54	51.22
	78266		366.11	347.80	399.97
	78266	TC	319.24	303.28	348.77
	78278	26	44.57	42.34	48.69
	78278		283.98	269.78	310.25
	78278	TC	239.41	227.44	261.56
	78282	26	14.94	14.19	16.32
	78290	26	30.72	29.18	33.56
	78290		269.52	256.04	294.45
	78290	TC	238.80	226.86	260.89
	78291	26	40.26	38.25	43.99
	78291		216.77	205.93	236.82
	78291	TC	176.51	167.68	192.83
	78300	26	27.71	26.32	30.27
	78300		185.15	175.89	202.27
	78300	TC	157.44	149.57	172.01
	78305	26	37.67	35.79	41.16
	78305		225.82	214.53	246.71
	78305	TC	188.16	178.75	205.56
	78306	26	38.29	36.38	41.84
	78306		240.85	228.81	263.13
	78306	TC	202.56	192.43	221.29
	78315	26	45.55	43.27	49.76

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	78315		281.89	267.80	307.97
	78315	TC	236.35	224.53	258.21
	78414	26	20.74	19.70	22.66
	78428	26	34.62	32.89	37.82
	78428		159.64	151.66	174.41
	78428	TC	125.02	118.77	136.59
	78429	26	76.94	73.09	84.05
	78430	26	73.23	69.57	80.01
	78431	26	85.21	80.95	93.09
	78432	26	93.75	89.06	102.42
	78433	26	98.87	93.93	108.02
	78434	26	28.28	26.87	30.90
	78445	26	22.46	21.34	24.54
	78445		155.14	147.38	169.49
	78445	TC	132.69	126.06	144.97
	78451	26	62.23	59.12	67.99
	78451		290.30	275.79	317.16
	78451	TC	228.07	216.67	249.17
	78452	26	73.39	69.72	80.18
	78452		398.15	378.24	434.98
	78452	TC	324.75	308.51	354.79
	78453	26	44.90	42.66	49.06
	78453		244.78	232.54	267.42
	78453	TC	199.88	189.89	218.37
	78454	26	60.42	57.40	66.01
	78454		355.44	337.67	388.32
	78454	TC	295.03	280.28	322.32
	78456	26	45.07	42.82	49.24
	78456		264.25	251.04	288.70
	78456	TC	219.18	208.22	239.45
	78457	26	34.89	33.15	38.12

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	78457		156.24	148.43	170.69
	78457	TC	121.35	115.28	132.57
	78458	26	41.24	39.18	45.06
	78458		173.93	165.23	190.01
	78458	TC	132.69	126.06	144.97
	78459	26	69.99	66.49	76.46
	78466	26	30.98	29.43	33.84
	78466		148.34	140.92	162.06
	78466	TC	117.36	111.49	128.21
	78468	26	36.21	34.40	39.56
	78468		170.73	162.19	186.52
	78468	TC	134.52	127.79	146.96
	78469	26	41.84	39.75	45.71
	78469		190.16	180.65	207.75
	78469	TC	148.32	140.90	162.04
	78472	26	44.16	41.95	48.24
	78472		193.70	184.02	211.62
	78472	TC	149.54	142.06	163.37
	78473	26	66.82	63.48	73.00
	78473		249.84	237.35	272.95
	78473	TC	183.02	173.87	199.95
	78481	26	43.71	41.52	47.75
	78481		152.11	144.50	166.18
	78481	TC	108.40	102.98	118.43
	78483	26	66.14	62.83	72.25
	78483		206.11	195.80	225.17
	78483	TC	139.97	132.97	152.92
	78491	26	69.85	66.36	76.31
	78492	26	81.27	77.21	88.79
	78494	26	53.70	51.02	58.67
	78494		197.73	187.84	216.02

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	78494	TC	144.03	136.83	157.35
	78496		40.57	38.54	44.32
	78496	26	22.72	21.58	24.82
	78496	TC	17.85	16.96	19.50
	78579	26	22.15	21.04	24.20
	78579		154.46	146.74	168.75
	78579	TC	132.31	125.69	144.54
	78580	26	33.35	31.68	36.43
	78580		194.84	185.10	212.87
	78580	TC	161.49	153.42	176.43
	78582	26	47.91	45.51	52.34
	78582		270.46	256.94	295.48
	78582	TC	222.55	211.42	243.13
	78597	26	32.69	31.06	35.72
	78597		167.75	159.36	183.26
	78597	TC	135.06	128.31	147.56
	78598	26	37.35	35.48	40.80
	78598		246.11	233.80	268.87
	78598	TC	208.76	198.32	228.07
	78600	26	19.79	18.80	21.62
	78600		154.62	146.89	168.92
	78600	TC	134.83	128.09	147.30
	78601	26	23.13	21.97	25.27
	78601		178.80	169.86	195.34
	78601	TC	155.67	147.89	170.07
	78605	26	24.41	23.19	26.67
	78605		166.60	158.27	182.01
	78605	TC	142.19	135.08	155.34
	78606	26	28.38	26.96	31.00
	78606		266.57	253.24	291.23
	78606	TC	238.18	226.27	260.21

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	78608	26	66.07	62.77	72.19
	78610		145.02	137.77	158.44
	78610	TC	131.46	124.89	143.62
	78610	26	13.56	12.88	14.81
	78630	26	30.41	28.89	33.22
	78630		272.96	259.31	298.21
	78630	TC	242.55	230.42	264.98
	78635	26	27.68	26.30	30.25
	78635		272.61	258.98	297.83
	78635	TC	244.93	232.68	267.58
	78645		263.94	250.74	288.35
	78645	26	25.45	24.18	27.81
	78645	TC	238.49	226.57	260.56
	78650	26	23.55	22.37	25.73
	78650		227.18	215.82	248.19
	78650	TC	203.63	193.45	222.47
	78660	26	20.59	19.56	22.49
	78660		123.55	117.37	134.98
	78660	TC	102.96	97.81	112.48
	78700	26	19.82	18.83	21.65
	78700		142.39	135.27	155.56
	78700	TC	122.57	116.44	133.91
	78701	26	22.77	21.63	24.87
	78701		188.24	178.83	205.65
	78701	TC	165.48	157.21	180.79
	78707	26	42.95	40.80	46.92
	78707		195.56	185.78	213.65
	78707	TC	152.61	144.98	166.73
	78708	26	53.53	50.85	58.48
	78708		162.38	154.26	177.40
	78708	TC	108.85	103.41	118.92

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	78709	26	62.43	59.31	68.21
	78709		304.37	289.15	332.52
	78709	TC	241.93	229.83	264.30
	78725	TC	75.99	72.19	83.02
	78725	26	16.86	16.02	18.42
	78725		92.84	88.20	101.43
	78730	26	7.49	7.12	8.19
	78730		67.63	64.25	73.89
	78730	TC	60.14	57.13	65.70
	78740	26	26.60	25.27	29.06
	78740		204.65	194.42	223.58
	78740	TC	178.04	169.14	194.51
	78761	26	32.34	30.72	35.33
	78761		176.98	168.13	193.35
	78761	TC	144.64	137.41	158.02
	78800	26	30.51	28.98	33.33
	78800		215.23	204.47	235.14
	78800	TC	184.71	175.47	201.79
	78801	26	32.70	31.07	35.73
	78801		223.01	211.86	243.64
	78801	TC	190.30	180.79	207.91
	78802	26	35.36	33.59	38.63
	78802		250.79	238.25	273.99
	78802	TC	215.43	204.66	235.36
	78803	26	48.51	46.08	52.99
	78803		311.82	296.23	340.66
	78803	TC	263.31	250.14	287.66
	78804		518.68	492.75	566.66
	78804	TC	474.08	450.38	517.94
	78804	26	44.60	42.37	48.73
	78808		38.44	36.52	42.00

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	78811	26	68.02	64.62	74.31
	78812	26	85.52	81.24	93.43
	78813	26	87.56	83.18	95.66
	78814	26	97.49	92.62	106.51
	78815	26	108.34	102.92	118.36
	78816	26	110.05	104.55	120.23
	78830	26	64.43	61.21	70.39
	78830		391.26	371.70	427.46
	78830	TC	326.83	310.49	357.06
	78831	26	79.92	75.92	87.31
	78831		577.90	549.01	631.36
	78831	TC	497.98	473.08	544.04
	78832		733.07	696.42	800.88
	78832	TC	640.26	608.25	699.49
	78832	26	92.82	88.18	101.41
	78835		84.00	79.80	91.77
	78835	TC	62.90	59.76	68.72
	78835	26	21.10	20.05	23.06
	79005	26	80.43	76.41	87.87
	79005	TC	46.73	44.39	51.05
	79005		127.16	120.80	138.92
	79101	26	88.53	84.10	96.72
	79101	TC	48.87	46.43	53.39
	79101		137.40	130.53	150.11
	79200	26	76.98	73.13	84.10
	79200	TC	48.87	46.43	53.39
	79200		125.86	119.57	137.51
	79300	26	61.70	58.62	67.41
	79403	26	86.60	82.27	94.61
	79403	TC	64.04	60.84	69.97
	79403		150.64	143.11	164.58

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	79440	26	76.98	73.13	84.10
	79440	TC	36.62	34.79	40.01
	79440		113.60	107.92	124.11
	79445	26	105.45	100.18	115.21
	80503		25.61	24.33	27.98
#	80503		18.26	17.35	19.95
	80504		49.91	47.41	54.52
#	80504		38.57	36.64	42.14
#	80505		73.07	69.42	79.83
	80505		92.07	87.47	100.59
	80506		41.01	38.96	44.80
	83020	26	17.37	16.50	18.98
	84165	26	17.37	16.50	18.98
	84166	26	17.37	16.50	18.98
	84181	26	17.37	16.50	18.98
	84182	26	17.37	16.50	18.98
	85060		18.90	17.96	20.65
	85097		65.26	62.00	71.30
#	85097		38.91	36.96	42.50
	85390	26	35.07	33.32	38.32
	85396		15.60	14.82	17.04
	85576	26	17.37	16.50	18.98
	86077		50.25	47.74	54.90
#	86077		39.52	37.54	43.17
	86078		50.25	47.74	54.90
#	86078		39.52	37.54	43.17
	86079		49.94	47.44	54.56
#	86079		39.21	37.25	42.84
	86153	26	32.44	30.82	35.44
	86255	26	17.37	16.50	18.98
	86256	26	17.37	16.50	18.98

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	86320	26	17.37	16.50	18.98
	86325	26	17.37	16.50	18.98
	86334	26	17.37	16.50	18.98
	86335	26	17.37	16.50	18.98
	86486		6.20	5.89	6.77
	86510		7.73	7.34	8.44
	86580		10.19	9.68	11.13
	87164	26	17.67	16.79	19.31
	87207	26	17.37	16.50	18.98
	88104		79.05	75.10	86.37
	88104	TC	52.86	50.22	57.75
	88104	26	26.20	24.89	28.62
	88106		63.18	60.02	69.02
	88106	TC	45.81	43.52	50.05
	88106	26	17.37	16.50	18.98
	88108		64.53	61.30	70.50
	88108	TC	43.59	41.41	47.62
	88108	26	20.94	19.89	22.87
	88112		61.82	58.73	67.54
	88112	TC	36.24	34.43	39.59
	88112	26	25.58	24.30	27.95
	88120	26	53.52	50.84	58.47
	88120		501.18	476.12	547.54
	88120	TC	447.67	425.29	489.08
	88121	26	44.69	42.46	48.83
	88121		364.48	346.26	398.20
	88121	TC	319.79	303.80	349.37
	88125		26.31	24.99	28.74
	88125	TC	13.86	13.17	15.15
	88125	26	12.45	11.83	13.60
	88141		22.87	21.73	24.99

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	88160		76.43	72.61	83.50
	88160	TC	52.86	50.22	57.75
	88160	26	23.57	22.39	25.75
	88161		77.65	73.77	84.84
	88161	TC	54.08	51.38	59.09
	88161	26	23.57	22.39	25.75
	88162	TC	83.58	79.40	91.31
	88162	26	35.95	34.15	39.27
	88162		119.52	113.54	130.57
	88172		51.75	49.16	56.53
	88172	26	32.37	30.75	35.36
	88172	TC	19.38	18.41	21.17
	88173	26	64.19	60.98	70.13
	88173		157.26	149.40	171.81
	88173	TC	93.08	88.43	101.69
	88177	TC	7.97	7.57	8.71
	88177		27.93	26.53	30.51
	88177	26	19.96	18.96	21.80
	88182	26	34.44	32.72	37.63
	88182		139.31	132.34	152.19
	88182	TC	104.87	99.63	114.57
	88184		74.62	70.89	81.52
	88185		21.15	20.09	23.10
	88187		34.50	32.78	37.70
	88188		57.48	54.61	62.80
	88189		77.99	74.09	85.20
	88291		31.98	30.38	34.94
	88300	26	4.29	4.08	4.69
	88300		15.40	14.63	16.82
	88300	TC	11.11	10.55	12.13
	88302	26	6.58	6.25	7.19

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	88302		30.25	28.74	33.05
	88302	TC	23.67	22.49	25.86
	88304		38.45	36.53	42.01
	88304	TC	28.27	26.86	30.89
	88304	26	10.19	9.68	11.13
	88305		66.64	63.31	72.81
	88305	26	34.38	32.66	37.56
	88305	TC	32.25	30.64	35.24
	88307	26	74.93	71.18	81.86
	88307		260.02	247.02	284.07
	88307	TC	185.09	175.84	202.22
	88309		388.11	368.70	424.01
	88309	TC	256.27	243.46	279.98
	88309	26	131.84	125.25	144.04
	88311	TC	7.73	7.34	8.44
	88311		18.90	17.96	20.65
	88311	26	11.16	10.60	12.19
	88312	TC	77.68	73.80	84.87
	88312	26	24.61	23.38	26.89
	88312		102.29	97.18	111.76
	88313		74.98	71.23	81.91
	88313	TC	63.82	60.63	69.72
	88313	26	11.16	10.60	12.19
	88314		76.59	72.76	83.67
	88314	TC	58.07	55.17	63.45
	88314	26	18.52	17.59	20.23
	88319	26	24.88	23.64	27.19
	88319		122.79	116.65	134.15
	88319	TC	97.91	93.01	106.96
	88321		91.27	86.71	99.72
#	88321		67.06	63.71	73.27

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	88323	26	81.58	77.50	89.13
	88323	TC	27.35	25.98	29.88
	88323		108.93	103.48	119.00
	88325		149.59	142.11	163.43
#	88325		112.20	106.59	122.58
	88329		50.00	47.50	54.63
#	88329		27.93	26.53	30.51
	88331	26	56.55	53.72	61.78
	88331	TC	36.24	34.43	39.59
	88331		92.79	88.15	101.37
	88332		50.87	48.33	55.58
	88332	26	28.43	27.01	31.06
	88332	TC	22.44	21.32	24.52
	88333		84.54	80.31	92.36
	88333	26	56.27	53.46	61.48
	88333	TC	28.27	26.86	30.89
	88334		51.49	48.92	56.26
	88334	26	34.33	32.61	37.50
	88334	TC	17.16	16.30	18.75
	88341		88.10	83.70	96.26
	88341	TC	61.91	58.81	67.63
	88341	26	26.20	24.89	28.62
	88342	TC	71.17	67.61	77.75
	88342	26	32.09	30.49	35.06
	88342		103.27	98.11	112.83
	88344	26	35.36	33.59	38.63
	88344		161.39	153.32	176.32
	88344	TC	126.03	119.73	137.69
	88346	26	32.82	31.18	35.86
	88346		127.97	121.57	139.81
	88346	TC	95.15	90.39	103.95

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	88348	26	70.71	67.17	77.25
	88348		443.72	421.53	484.76
	88348	TC	373.02	354.37	407.53
	88350	TC	73.01	69.36	79.76
	88350	26	26.90	25.56	29.39
	88350		99.91	94.91	109.15
	88355	26	77.35	73.48	84.50
	88355	TC	56.84	54.00	62.10
	88355		134.19	127.48	146.60
	88356		213.82	203.13	233.60
	88356	26	111.33	105.76	121.62
	88356	TC	102.49	97.37	111.98
	88358	TC	77.30	73.44	84.46
	88358	26	45.15	42.89	49.32
	88358		122.46	116.34	133.79
	88360	TC	74.55	70.82	81.44
	88360	26	38.35	36.43	41.89
	88360		112.90	107.26	123.35
	88361	TC	68.11	64.70	74.41
	88361	26	39.87	37.88	43.56
	88361		107.98	102.58	117.97
	88362		207.20	196.84	226.37
	88362	TC	104.11	98.90	113.74
	88362	26	103.09	97.94	112.63
	88363		22.04	20.94	24.08
#	88363		15.29	14.53	16.71
	88364	TC	87.11	82.75	95.16
	88364	26	31.17	29.61	34.05
	88364		118.28	112.37	129.23
	88365	26	39.67	37.69	43.34
	88365		157.80	149.91	172.40

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	88365	TC	118.14	112.23	129.06
	88366	26	56.70	53.87	61.95
	88366		247.16	234.80	270.02
	88366	TC	190.46	180.94	208.08
	88367	TC	67.80	64.41	74.07
	88367	26	30.65	29.12	33.49
	88367		98.45	93.53	107.56
	88368	26	39.36	37.39	43.00
	88368		136.66	129.83	149.30
	88368	TC	97.30	92.44	106.31
	88369	TC	88.95	84.50	97.18
	88369	26	31.48	29.91	34.40
	88369		120.43	114.41	131.57
	88371	26	17.67	16.79	19.31
	88372	26	17.37	16.50	18.98
	88373		59.97	56.97	65.52
	88373	TC	36.54	34.71	39.92
	88373	26	23.42	22.25	25.59
	88374	26	38.89	36.95	42.49
	88374		247.06	234.71	269.92
	88374	TC	208.17	197.76	227.42
	88375		44.34	42.12	48.44
	88377	26	59.85	56.86	65.39
	88377		356.73	338.89	389.72
	88377	TC	296.88	282.04	324.35
	88380	TC	63.66	60.48	69.55
	88380	26	47.75	45.36	52.16
	88380		111.41	105.84	121.72
	88381	26	21.82	20.73	23.84
	88381		174.12	165.41	190.22
	88381	TC	152.30	144.69	166.39

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	88387	TC	6.81	6.47	7.44
	88387		31.93	30.33	34.88
	88387	26	25.12	23.86	27.44
#	89049		58.94	55.99	64.39
	89049		330.47	313.95	361.04
	89060	26	17.37	16.50	18.98
	89220		19.38	18.41	21.17
	89230		2.83	2.69	3.09
	90460		22.27	21.16	24.33
	90461		8.57	8.14	9.36
	90471		20.80	19.76	22.72
	90472		15.22	14.46	16.63
	90473		16.51	15.68	18.03
	90474		11.85	11.26	12.95
	90785		14.45	13.73	15.79
#	90785		11.69	11.11	12.78
	90791		170.42	161.90	186.19
#	90791		137.32	130.45	150.02
	90792		198.80	188.86	217.19
#	90792		159.57	151.59	174.33
	90832		84.50	80.28	92.32
#	90832		69.48	66.01	75.91
	90833		80.28	76.27	87.71
#	90833		65.88	62.59	71.98
	90834		112.13	106.52	122.50
#	90834		91.90	87.31	100.41
#	90836		83.23	79.07	90.93
	90836		101.62	96.54	111.02
	90837		164.42	156.20	179.63
#	90837		135.30	128.54	147.82
	90838		134.57	127.84	147.02

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	90838		110.36	104.84	120.57
	90839		157.78	149.89	172.37
#	90839		129.58	123.10	141.57
	90840		75.93	72.13	82.95
#	90840		62.45	59.33	68.23
#	90845		88.21	83.80	96.37
	90845		107.52	102.14	117.46
	90846		105.37	100.10	115.12
#	90846		99.24	94.28	108.42
	90847		109.02	103.57	119.11
#	90847		102.89	97.75	112.41
	90849		39.18	37.22	42.80
#	90849		29.68	28.20	32.43
	90853		29.92	28.42	32.68
#	90853		24.40	23.18	26.66
	90865		165.84	157.55	181.18
#	90865		114.36	108.64	124.94
	90870		174.98	166.23	191.16
#	90870		98.36	93.44	107.46
#	90880		79.48	75.51	86.84
	90880		101.85	96.76	111.27
	90901		38.97	37.02	42.57
#	90901		16.29	15.48	17.80
	90912		78.38	74.46	85.63
#	90912		37.32	35.45	40.77
	90913		31.71	30.12	34.64
#	90913		20.99	19.94	22.93
	90935		61.18	58.12	66.84
	90937		88.17	83.76	96.32
	90945		75.89	72.10	82.92
	90947		105.87	100.58	115.67

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	90951		1,166.58	1,108.25	1,274.49
	90954		1,019.56	968.58	1,113.87
	90955		528.81	502.37	577.73
	90956		358.87	340.93	392.07
	90957		783.49	744.32	855.97
	90958		509.20	483.74	556.30
	90959		331.97	315.37	362.68
	90960		364.91	346.66	398.66
	90961		303.75	288.56	331.84
	90962		209.39	198.92	228.76
	90963		615.38	584.61	672.30
	90964		524.48	498.26	573.00
	90965		506.47	481.15	553.32
	90966		303.44	288.27	331.51
	90967		18.02	17.12	19.69
	90968		17.38	16.51	18.99
	90969		17.05	16.20	18.63
	90970		9.79	9.30	10.70
	90997		75.90	72.11	82.93
	91010	26	66.37	63.05	72.51
	91010		229.87	218.38	251.14
	91010	TC	163.49	155.32	178.62
	91013		26.65	25.32	29.12
	91013	TC	17.16	16.30	18.75
	91013	26	9.49	9.02	10.37
	91020	26	74.33	70.61	81.20
	91020		287.85	273.46	314.48
	91020	TC	213.52	202.84	233.27
	91022	26	74.33	70.61	81.20
	91022		182.66	173.53	199.56
	91022	TC	108.33	102.91	118.35

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	91030	26	46.95	44.60	51.29
	91030		152.21	144.60	166.29
	91030	TC	105.26	100.00	115.00
	91034	26	49.49	47.02	54.07
	91034		189.08	179.63	206.57
	91034	TC	139.59	132.61	152.50
	91035	26	83.62	79.44	91.36
	91035		466.55	443.22	509.70
	91035	TC	382.93	363.78	418.35
	91037	26	50.33	47.81	54.98
	91037		175.21	166.45	191.42
	91037	TC	124.88	118.64	136.44
	91038	26	58.51	55.58	63.92
	91038		412.93	392.28	451.12
	91038	TC	354.43	336.71	387.22
	91040		532.63	506.00	581.90
	91040	26	50.48	47.96	55.15
	91040	TC	482.15	458.04	526.75
	91065		59.88	56.89	65.42
	91065	TC	50.33	47.81	54.98
	91065	26	9.54	9.06	10.42
	91110		743.16	706.00	811.90
	91110	TC	628.03	596.63	686.12
	91110	26	115.13	109.37	125.78
	91111		880.97	836.92	962.46
	91111	TC	834.29	792.58	911.47
	91111	26	46.69	44.36	51.01
	91112	26	108.32	102.90	118.34
	91112		1,628.25	1,546.84	1,778.87
	91112	TC	1,519.94	1,443.94	1,660.53
	91113		911.68	866.10	996.02

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	91113	TC	787.47	748.10	860.32
	91113	26	124.21	118.00	135.70
	91117		120.15	114.14	131.26
	91124		715.69	679.91	781.90
	91124	TC	555.31	527.54	606.67
	91124	26	160.38	152.36	175.21
	91125		327.85	311.46	358.18
	91125	TC	188.32	178.90	205.74
	91125	26	139.53	132.55	152.43
	91132		447.32	424.95	488.69
	91132	TC	420.24	399.23	459.11
	91132	26	27.07	25.72	29.58
	91133		468.54	445.11	511.88
	91133	TC	434.96	413.21	475.19
	91133	26	33.58	31.90	36.69
	91200		31.68	30.10	34.62
	91200	TC	20.91	19.86	22.84
	91200	26	10.77	10.23	11.76
	92002		80.56	76.53	88.01
#	92002		37.35	35.48	40.80
#	92004		77.01	73.16	84.13
	92004		142.90	135.76	156.12
	92012		85.96	81.66	93.91
#	92012		40.91	38.86	44.69
#	92014		61.44	58.37	67.13
	92014		121.20	115.14	132.41
	92018		111.82	106.23	122.16
	92019		58.11	55.20	63.48
	92020		25.64	24.36	28.01
#	92020		16.14	15.33	17.63
	92025		35.16	33.40	38.41

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	92025	26	18.84	17.90	20.59
	92025	TC	16.32	15.50	17.83
	92060		60.94	57.89	66.57
	92060	26	35.13	33.37	38.38
	92060	TC	25.82	24.53	28.21
	92065		37.33	35.46	40.78
#	92065		27.22	25.86	29.74
	92066		23.98	22.78	26.20
	92071		34.66	32.93	37.87
#	92071		25.77	24.48	28.15
#	92072		75.86	72.07	82.88
	92072		116.01	110.21	126.74
	92081		31.95	30.35	34.90
	92081	TC	16.62	15.79	18.16
	92081	26	15.32	14.55	16.73
	92082		44.80	42.56	48.94
	92082	TC	24.90	23.66	27.21
	92082	26	19.91	18.91	21.75
	92083		60.11	57.10	65.67
	92083	TC	34.40	32.68	37.58
	92083	26	25.71	24.42	28.08
	92100		79.41	75.44	86.76
#	92100		25.77	24.48	28.15
	92132		28.24	26.83	30.85
	92132	26	14.99	14.24	16.38
	92132	TC	13.25	12.59	14.48
	92133		29.22	27.76	31.92
	92133	26	15.97	15.17	17.45
	92133	TC	13.25	12.59	14.48
	92134		31.08	29.53	33.96
	92134	26	17.22	16.36	18.81

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	92134	TC	13.86	13.17	15.15
	92136		45.82	43.53	50.06
	92136	26	29.20	27.74	31.90
	92136	TC	16.62	15.79	18.16
	92137		56.81	53.97	62.07
	92137	26	33.76	32.07	36.88
	92137	TC	23.06	21.91	25.20
	92145	TC	7.43	7.06	8.12
	92145	26	5.57	5.29	6.08
	92145		13.00	12.35	14.20
	92201		24.27	23.06	26.52
#	92201		18.14	17.23	19.81
	92202		15.21	14.45	16.62
#	92202		11.53	10.95	12.59
	92227		17.23	16.37	18.83
	92228		28.94	27.49	31.61
	92228	26	15.99	15.19	17.47
	92228	TC	12.94	12.29	14.13
	92229		42.98	40.83	46.95
#	92230		26.53	25.20	28.98
	92230		123.99	117.79	135.46
	92235	26	40.51	38.48	44.25
	92235		151.22	143.66	165.21
	92235	TC	110.71	105.17	120.95
	92240	26	45.69	43.41	49.92
	92240		228.11	216.70	249.21
	92240	TC	182.42	173.30	199.30
	92242	26	52.28	49.67	57.12
	92242		311.62	296.04	340.45
	92242	TC	259.35	246.38	283.34
	92250		35.30	33.54	38.57

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	92250	26	19.91	18.91	21.75
	92250	TC	15.40	14.63	16.82
#	92260		8.93	8.48	9.75
	92260		17.82	16.93	19.47
	92265		83.36	79.19	91.07
	92265	26	43.75	41.56	47.79
	92265	TC	39.61	37.63	43.27
	92270	TC	77.07	73.22	84.20
	92270	26	40.99	38.94	44.78
	92270		118.06	112.16	128.98
	92273	TC	81.67	77.59	89.23
	92273	26	33.60	31.92	36.71
	92273		115.26	109.50	125.93
	92274		86.45	82.13	94.45
	92274	TC	54.62	51.89	59.67
	92274	26	31.83	30.24	34.78
	92283	26	8.54	8.11	9.33
	92283		51.21	48.65	55.95
	92283	TC	42.67	40.54	46.62
	92284		31.30	29.74	34.20
	92284	TC	17.85	16.96	19.50
	92284	26	13.46	12.79	14.71
	92285	26	2.98	2.83	3.25
	92285		22.05	20.95	24.09
	92285	TC	19.07	18.12	20.84
	92286		37.45	35.58	40.92
	92286	26	20.52	19.49	22.41
	92286	TC	16.93	16.08	18.49
	92287	26	21.75	20.66	23.76
	92287		125.40	119.13	137.00
	92287	TC	103.66	98.48	113.25

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	92311		41.75	39.66	45.61
	92311		93.85	89.16	102.53
#	92312		48.72	46.28	53.22
	92312		107.56	102.18	117.51
	92313		90.35	85.83	98.70
#	92313		35.49	33.72	38.78
	92315		73.99	70.29	80.83
#	92315		17.60	16.72	19.23
#	92316		26.21	24.90	28.64
	92316		91.80	87.21	100.29
	92317		77.98	74.08	85.19
#	92317		17.60	16.72	19.23
	92325		42.98	40.83	46.95
	92326		35.93	34.13	39.25
	92502		84.47	80.25	92.29
#	92504		7.65	7.27	8.36
	92504		26.95	25.60	29.44
	92507		73.74	70.05	80.56
	92508		23.10	21.95	25.24
#	92511		32.05	30.45	35.02
	92511		108.36	102.94	118.38
	92512		61.63	58.55	67.33
#	92512		23.32	22.15	25.47
	92516		70.40	66.88	76.91
#	92516		18.61	17.68	20.33
	92517		69.85	66.36	76.31
#	92517		33.38	31.71	36.47
	92518		71.52	67.94	78.13
#	92518		34.44	32.72	37.63
#	92519		50.52	47.99	55.19
	92519		111.51	105.93	121.82

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	92520		85.64	81.36	93.56
#	92520		32.00	30.40	34.96
	92521		128.90	122.46	140.83
	92522		108.57	103.14	118.61
	92523		219.07	208.12	239.34
	92524		106.35	101.03	116.18
	92526		81.22	77.16	88.73
	92537	TC	8.35	7.93	9.12
	92537		38.03	36.13	41.55
	92537	26	29.68	28.20	32.43
	92538	TC	5.90	5.61	6.45
	92538		20.91	19.86	22.84
	92538	26	15.02	14.27	16.41
	92540	26	72.68	69.05	79.41
	92540	TC	26.74	25.40	29.21
	92540		99.41	94.44	108.61
	92541	TC	4.06	3.86	4.44
	92541		23.96	22.76	26.17
	92541	26	19.91	18.91	21.75
	92542	TC	3.75	3.56	4.09
	92542		27.57	26.19	30.12
	92542	26	23.82	22.63	26.02
	92544	TC	3.44	3.27	3.76
	92544		17.15	16.29	18.73
	92544	26	13.70	13.02	14.97
	92545	TC	3.44	3.27	3.76
	92545		16.17	15.36	17.66
	92545	26	12.73	12.09	13.90
	92546	26	14.37	13.65	15.70
	92546		124.54	118.31	136.06
	92546	TC	110.17	104.66	120.36

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	92547		10.11	9.60	11.04
	92548		45.56	43.28	49.77
	92548	26	32.31	30.69	35.29
	92548	TC	13.25	12.59	14.48
	92549		59.94	56.94	65.48
	92549	26	42.09	39.99	45.99
	92549	TC	17.85	16.96	19.50
	92550		21.02	19.97	22.97
	92552		37.16	35.30	40.60
	92553		45.12	42.86	49.29
	92555		27.35	25.98	29.88
	92556		42.67	40.54	46.62
	92557		34.62	32.89	37.82
#	92557		25.42	24.15	27.77
	92562		45.12	42.86	49.29
	92563		32.86	31.22	35.90
	92565		20.61	19.58	22.52
#	92567		8.62	8.19	9.42
	92567		15.37	14.60	16.79
	92568		15.02	14.27	16.41
#	92568		12.57	11.94	13.73
	92570		30.49	28.97	33.32
#	92570		23.44	22.27	25.61
	92571		28.57	27.14	31.21
	92572		55.54	52.76	60.67
	92575		67.88	64.49	74.16
	92576		38.99	37.04	42.60
	92577		20.91	19.86	22.84
	92579		41.59	39.51	45.44
#	92579		29.33	27.86	32.04
	92582		79.76	75.77	87.14

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	92583		56.46	53.64	61.69
	92584		99.62	94.64	108.84
	92587	TC	3.44	3.27	3.76
	92587		21.39	20.32	23.37
	92587	26	17.95	17.05	19.61
	92588	TC	4.67	4.44	5.11
	92588		32.70	31.07	35.73
	92588	26	28.04	26.64	30.64
	92596		71.79	68.20	78.43
	92597		69.02	65.57	75.41
	92601		148.38	140.96	162.10
#	92601		96.89	92.05	105.86
#	92602		55.05	52.30	60.15
	92602		93.05	88.40	101.66
	92603		140.26	133.25	153.24
#	92603		94.60	89.87	103.35
	92604		84.02	79.82	91.79
#	92604		52.76	50.12	57.64
	92607		117.64	111.76	128.52
	92608		45.87	43.58	50.12
	92609		98.54	93.61	107.65
	92610		81.71	77.62	89.26
#	92610		56.89	54.05	62.16
	92611		88.16	83.75	96.31
#	92612		53.63	50.95	58.59
	92612		187.25	177.89	204.57
	92613		35.10	33.35	38.35
#	92613		29.89	28.40	32.66
#	92614		53.70	51.02	58.67
	92614		143.19	136.03	156.43
	92615		31.49	29.92	34.41

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	92615		26.59	25.26	29.05
#	92616		79.10	75.15	86.42
	92616		215.78	204.99	235.74
	92617		39.08	37.13	42.70
#	92617		33.56	31.88	36.66
	92620		85.67	81.39	93.60
#	92620		63.30	60.14	69.16
	92621		20.33	19.31	22.21
#	92621		14.81	14.07	16.18
	92622		74.82	71.08	81.74
#	92622		53.06	50.41	57.97
	92623		19.35	18.38	21.14
#	92623		13.84	13.15	15.12
	92625		63.88	60.69	69.79
#	92625		48.86	46.42	53.38
	92626		81.39	77.32	88.92
#	92626		59.02	56.07	64.48
	92627		19.35	18.38	21.14
#	92627		13.84	13.15	15.12
#	92640		74.17	70.46	81.03
	92640		102.67	97.54	112.17
	92651		76.71	72.87	83.80
	92652		103.76	98.57	113.36
	92653		76.89	73.05	84.01
	92920		392.82	373.18	429.16
	92924		476.19	452.38	520.24
	92928		470.84	447.30	514.40
	92930		504.97	479.72	551.68
	92933		561.61	533.53	613.56
	92937		531.51	504.93	580.67
	92941		598.16	568.25	653.49

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	92943		643.29	611.13	702.80
	92945		631.48	599.91	689.90
	92950		362.42	344.30	395.95
#	92950		170.88	162.34	186.69
	92953		1.02	0.97	1.12
	92960		148.68	141.25	162.44
#	92960		93.82	89.13	102.50
	92961		217.13	206.27	237.21
	92970		165.49	157.22	180.80
	92971		88.32	83.90	96.49
	92972		122.16	116.05	133.46
	92973		82.67	78.54	90.32
	92974		140.60	133.57	153.61
	92978	26	92.95	88.30	101.55
	92979	26	73.47	69.80	80.27
	92986		1,173.58	1,114.90	1,282.14
	92987		1,210.76	1,150.22	1,322.75
	92990		969.21	920.75	1,058.86
	92997		553.46	525.79	604.66
	92998		278.78	264.84	304.57
	93000		14.74	14.00	16.10
	93005		6.51	6.18	7.11
	93010		8.23	7.82	8.99
	93015		69.85	66.36	76.31
	93016		20.36	19.34	22.24
	93017		36.00	34.20	39.33
	93018		13.48	12.81	14.73
	93024	TC	56.30	53.49	61.51
	93024	26	52.96	50.31	57.86
	93024		109.26	103.80	119.37
	93025	TC	90.55	86.02	98.92

**WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026**

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
- LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	93025	26	36.60	34.77	39.99
	93025		127.16	120.80	138.92
	93040		14.37	13.65	15.70
	93041		7.43	7.06	8.12
	93042		6.95	6.60	7.59
	93050	26	8.23	7.82	8.99
	93050	TC	8.04	7.64	8.79
	93050		16.27	15.46	17.78
	93145		52.52	49.89	57.37
#	93145		27.70	26.32	30.27
	93146		79.07	75.12	86.39
#	93146		38.92	36.97	42.52
#	93150		36.34	34.52	39.70
	93150		104.68	99.45	114.37
	93151		89.44	84.97	97.72
#	93151		34.28	32.57	37.46
#	93152		75.75	71.96	82.75
	93152		139.81	132.82	152.74
	93153		54.77	52.03	59.83
#	93153		18.61	17.68	20.33
	93224		65.99	62.69	72.09
	93225		16.62	15.79	18.16
	93226		31.95	30.35	34.90
	93227		17.43	16.56	19.04
	93228		24.58	23.35	26.85
	93229		696.50	661.68	760.93
	93241		257.93	245.03	281.78
	93242		10.80	10.26	11.80
	93243		224.72	213.48	245.50
	93244		22.42	21.30	24.50
	93245		267.58	254.20	292.33

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	93246		10.80	10.26	11.80
	93247		232.38	220.76	253.87
	93248		24.40	23.18	26.66
	93260		71.98	68.38	78.64
	93260	26	40.03	38.03	43.73
	93260	TC	31.95	30.35	34.90
	93261		66.45	63.13	72.60
	93261	26	34.81	33.07	38.03
	93261	TC	31.64	30.06	34.57
	93264		50.77	48.23	55.46
#	93264		29.62	28.14	32.36
	93268		157.47	149.60	172.04
	93270		7.73	7.34	8.44
	93271		126.34	120.02	138.02
	93272		23.39	22.22	25.55
	93278		31.19	29.63	34.07
	93278	TC	19.07	18.12	20.84
	93278	26	12.11	11.50	13.23
	93279		63.35	60.18	69.21
	93279	TC	33.17	31.51	36.24
	93279	26	30.18	28.67	32.97
	93280		74.50	70.78	81.40
	93280	TC	38.38	36.46	41.93
	93280	26	36.12	34.31	39.46
	93281		78.72	74.78	86.00
	93281	26	40.03	38.03	43.73
	93281	TC	38.69	36.76	42.27
	93282		74.73	70.99	81.64
	93282	26	39.72	37.73	43.39
	93282	TC	35.01	33.26	38.25
	93283	26	53.52	50.84	58.47

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	93283	TC	38.69	36.76	42.27
	93283		92.20	87.59	100.73
	93284	26	58.10	55.20	63.48
	93284	TC	41.45	39.38	45.29
	93284		99.54	94.56	108.74
	93285		56.26	53.45	61.47
	93285	TC	31.64	30.06	34.57
	93285	26	24.62	23.39	26.90
	93286		41.75	39.66	45.61
	93286	TC	27.65	26.27	30.21
	93286	26	14.10	13.40	15.41
	93287		49.01	46.56	53.54
	93287	TC	27.65	26.27	30.21
	93287	26	21.35	20.28	23.32
	93288		52.25	49.64	57.09
	93288	TC	32.56	30.93	35.57
	93288	26	19.69	18.71	21.52
	93289		67.70	64.32	73.97
	93289	26	34.84	33.10	38.07
	93289	TC	32.86	31.22	35.90
	93290		49.49	47.02	54.07
	93290	TC	29.49	28.02	32.22
	93290	26	19.99	18.99	21.84
	93291		45.33	43.06	49.52
	93291	TC	28.27	26.86	30.89
	93291	26	17.06	16.21	18.64
	93292		48.57	46.14	53.06
	93292	TC	28.57	27.14	31.21
	93292	26	19.99	18.99	21.84
	93293		37.49	35.62	40.96
	93293	TC	24.28	23.07	26.53

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	93293	26	13.21	12.55	14.43
	93294		28.98	27.53	31.66
	93295		35.56	33.78	38.85
	93296		29.19	27.73	31.89
	93297		57.48	54.61	62.80
	93297	TC	33.48	31.81	36.58
	93297	26	24.01	22.81	26.23
	93298	TC	72.47	68.85	79.18
	93298	26	24.01	22.81	26.23
	93298		96.48	91.66	105.41
	93303	26	59.16	56.20	64.63
	93303		206.49	196.17	225.60
	93303	TC	147.32	139.95	160.94
	93304	26	34.15	32.44	37.31
	93304		143.40	136.23	156.66
	93304	TC	109.25	103.79	119.36
	93306	26	66.42	63.10	72.57
	93306		185.24	175.98	202.38
	93306	TC	118.82	112.88	129.81
	93307	TC	87.18	82.82	95.24
	93307	26	42.38	40.26	46.30
	93307		129.56	123.08	141.54
	93308	TC	70.33	66.81	76.83
	93308	26	24.34	23.12	26.59
	93308		94.67	89.94	103.43
	93312		227.01	215.66	248.01
	93312	TC	123.42	117.25	134.84
	93312	26	103.59	98.41	113.17
	93313		10.38	9.86	11.34
	93314	26	87.56	83.18	95.66
	93314		218.95	208.00	239.20

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	93314	TC	131.39	124.82	143.54
	93315	26	121.63	115.55	132.88
	93316		24.46	23.24	26.73
	93317	26	84.57	80.34	92.39
	93318	26	100.62	95.59	109.93
	93319		52.90	50.26	57.80
#	93319		20.72	19.68	22.63
	93320		48.42	46.00	52.90
	93320	TC	31.33	29.76	34.22
	93320	26	17.09	16.24	18.68
	93321	26	7.25	6.89	7.92
	93321		23.80	22.61	26.00
	93321	TC	16.55	15.72	18.08
	93325	26	3.27	3.11	3.58
	93325		21.96	20.86	23.99
	93325	TC	18.69	17.76	20.42
	93350	26	66.42	63.10	72.57
	93350		174.75	166.01	190.91
	93350	TC	108.33	102.91	118.35
	93351	26	79.90	75.91	87.30
	93351		219.94	208.94	240.28
	93351	TC	140.04	133.04	153.00
	93352		33.49	31.82	36.59
	93355		191.94	182.34	209.69
	93356		34.53	32.80	37.72
#	93356		10.01	9.51	10.94
	93451		791.28	751.72	864.48
	93451	TC	664.03	630.83	725.45
	93451	26	127.24	120.88	139.01
	93452		823.22	782.06	899.37
	93452	TC	592.16	562.55	646.93

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	93452	26	231.06	219.51	252.44
	93453	TC	740.80	703.76	809.32
	93453	26	307.74	292.35	336.20
	93453		1,048.54	996.11	1,145.53
	93454		825.01	783.76	901.32
	93454	TC	591.85	562.26	646.60
	93454	26	233.16	221.50	254.73
	93455	TC	649.47	617.00	709.55
	93455	26	272.00	258.40	297.16
	93455		921.47	875.40	1,006.71
	93456	TC	725.78	689.49	792.91
	93456	26	302.81	287.67	330.82
	93456		1,028.59	977.16	1,123.73
	93457	TC	782.55	743.42	854.93
	93457	26	341.01	323.96	372.55
	93457		1,123.56	1,067.38	1,227.49
	93458	TC	663.57	630.39	724.95
	93458	26	287.34	272.97	313.92
	93458		950.91	903.36	1,038.86
	93459	TC	699.19	664.23	763.86
	93459	26	326.11	309.80	356.27
	93459		1,025.30	974.04	1,120.15
	93460	TC	773.05	734.40	844.56
	93460	26	363.67	345.49	397.31
	93460		1,136.72	1,079.88	1,241.86
	93461	TC	851.27	808.71	930.02
	93461	26	401.83	381.74	439.00
	93461		1,253.10	1,190.45	1,369.02
	93462		203.81	193.62	222.66
#	93462		179.30	170.34	195.89
#	93463		82.71	78.57	90.36

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	93463		94.67	89.94	103.43
	93464	26	85.87	81.58	93.82
	93464		210.37	199.85	229.83
	93464	TC	124.50	118.28	136.02
	93503		81.78	77.69	89.34
	93505		610.31	579.79	666.76
	93505	TC	394.57	374.84	431.07
	93505	26	215.74	204.95	235.69
	93563		50.30	47.79	54.96
#	93563		44.78	42.54	48.92
	93564		53.62	50.94	58.58
#	93564		48.11	45.70	52.56
	93565		26.51	25.18	28.96
#	93565		23.75	22.56	25.94
	93566		25.30	24.04	27.65
#	93566		22.54	21.41	24.62
	93567		36.86	35.02	40.27
#	93567		32.87	31.23	35.91
	93568		45.80	43.51	50.04
#	93568		40.90	38.86	44.69
	93569		36.67	34.84	40.07
#	93569		32.38	30.76	35.37
	93571	26	92.95	88.30	101.55
	93572	26	73.47	69.80	80.27
	93573		60.37	57.35	65.95
#	93573		53.02	50.37	57.93
	93574		66.34	63.02	72.47
#	93574		58.68	55.75	64.11
	93575		89.15	84.69	97.39
#	93575		78.42	74.50	85.68
	93580		855.06	812.31	934.16

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	93581		1,161.97	1,103.87	1,269.45
	93582		580.23	551.22	633.90
	93583		650.48	617.96	710.65
	93584		48.67	46.24	53.18
	93585		46.01	43.71	50.27
	93586		59.19	56.23	64.66
	93587		86.48	82.16	94.48
	93588		87.15	82.79	95.21
	93590		911.84	866.25	996.19
	93591		750.89	713.35	820.35
	93592		326.73	310.39	356.95
	93593	26	183.15	173.99	200.09
	93594	26	281.94	267.84	308.02
	93595	26	248.81	236.37	271.83
	93596	26	310.54	295.01	339.26
	93597	26	402.46	382.34	439.69
	93598	26	65.20	61.94	71.23
	93600	26	112.91	107.26	123.35
	93602	26	111.54	105.96	121.85
	93603	26	111.92	106.32	122.27
	93609	26	267.19	253.83	291.90
	93610	26	156.76	148.92	171.26
	93612	26	156.62	148.79	171.11
	93613		251.07	238.52	274.30
	93615	26	35.11	33.35	38.35
	93616	26	57.46	54.59	62.78
	93618	26	210.90	200.36	230.41
	93619	26	374.52	355.79	409.16
	93620	26	601.61	571.53	657.26
	93621	26	79.23	75.27	86.56
	93622	26	164.87	156.63	180.12

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	93623	26	52.30	49.69	57.14
	93624	26	234.02	222.32	255.67
	93631	26	399.15	379.19	436.07
	93640	26	171.92	163.32	187.82
	93641	26	300.33	285.31	328.11
	93642	TC	76.84	73.00	83.95
	93642		322.78	306.64	352.64
	93642	26	245.94	233.64	268.69
	93644	TC	46.35	44.03	50.63
	93644		182.83	173.69	199.74
	93644	26	136.48	129.66	149.11
	93650		502.21	477.10	548.67
	93653		720.52	684.49	787.16
	93654		868.35	824.93	948.67
	93655		264.22	251.01	288.66
	93656		816.90	776.06	892.47
	93657		264.22	251.01	288.66
	93660	26	88.25	83.84	96.42
	93660	TC	72.24	68.63	78.92
	93660		160.49	152.47	175.34
	93662	26	67.58	64.20	73.83
	93668		14.17	13.46	15.48
	93701		24.90	23.66	27.21
	93702		121.81	115.72	133.08
	93724	TC	42.67	40.54	46.62
	93724		269.50	256.03	294.43
	93724	26	226.83	215.49	247.81
	93750		51.43	48.86	56.19
#	93750		33.96	32.26	37.10
	93784		45.12	42.86	49.29
	93786		21.83	20.74	23.85

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	93788		5.59	5.31	6.11
	93790		17.70	16.82	19.34
	93792		66.72	63.38	72.89
	93793		11.32	10.75	12.36
#	93797		7.65	7.27	8.36
	93797		16.84	16.00	18.40
	93798		24.87	23.63	27.17
#	93798		12.00	11.40	13.11
	93880	26	37.11	35.25	40.54
	93880		176.47	167.65	192.80
	93880	TC	139.36	132.39	152.25
	93882	26	23.32	22.15	25.47
	93882		115.71	109.92	126.41
	93882	TC	92.39	87.77	100.94
	93886	26	44.69	42.46	48.83
	93886		250.85	238.31	274.06
	93886	TC	206.17	195.86	225.24
	93888	26	35.46	33.69	38.74
C	93888		133.37	126.70	145.71
C	93888	TC	97.91	93.01	106.96
	93892	26	57.41	54.54	62.72
C	93892		155.01	147.26	169.35
C	93892	TC	97.60	92.72	106.63
	93893	26	58.33	55.41	63.72
C	93893		155.86	148.07	170.28
C	93893	TC	97.53	92.65	106.55
	93896	26	40.44	38.42	44.18
	93896		174.82	166.08	190.99
	93896	TC	134.38	127.66	146.81
	93897	26	36.76	34.92	40.16
	93897		220.55	209.52	240.95

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	93897	TC	183.79	174.60	200.79
	93898	26	43.31	41.14	47.31
	93898		243.89	231.70	266.46
	93898	TC	200.58	190.55	219.13
	93922		77.37	73.50	84.53
	93922	TC	65.73	62.44	71.81
	93922	26	11.64	11.06	12.72
	93923	26	21.33	20.26	23.30
	93923		124.53	118.30	136.05
	93923	TC	103.19	98.03	112.73
	93924	26	23.63	22.45	25.82
	93924		153.79	146.10	168.02
	93924	TC	130.16	123.65	142.20
	93925	26	36.50	34.68	39.88
	93925		220.98	209.93	241.42
	93925	TC	184.48	175.26	201.55
	93926	26	22.33	21.21	24.39
C	93926		120.00	114.00	131.10
C	93926	TC	97.68	92.80	106.72
	93930	26	36.80	34.96	40.20
	93930		185.35	176.08	202.49
	93930	TC	148.55	141.12	162.29
	93931	TC	90.25	85.74	98.60
	93931	26	22.63	21.50	24.73
	93931		112.88	107.24	123.33
	93970	26	31.84	30.25	34.79
	93970		171.50	162.93	187.37
	93970	TC	139.66	132.68	152.58
	93971	TC	88.10	83.70	96.26
	93971	26	20.20	19.19	22.07
	93971		108.30	102.89	118.32

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	93975	26	52.68	50.05	57.56
	93975		242.06	229.96	264.45
	93975	TC	189.38	179.91	206.90
	93976	26	36.66	34.83	40.05
C	93976		134.26	127.55	146.68
C	93976	TC	97.60	92.72	106.63
	93978	26	37.40	35.53	40.86
	93978		168.79	160.35	184.40
	93978	TC	131.39	124.82	143.54
	93979	TC	85.96	81.66	93.91
	93979	26	23.01	21.86	25.14
	93979		108.97	103.52	119.05
	93980	26	58.78	55.84	64.22
	93980	TC	56.16	53.35	61.35
	93980		114.94	109.19	125.57
	93981		68.97	65.52	75.35
	93981	TC	48.19	45.78	52.65
	93981	26	20.78	19.74	22.70
	93985	26	37.17	35.31	40.61
	93985		232.14	220.53	253.61
	93985	TC	194.97	185.22	213.00
	93986	26	23.09	21.94	25.23
C	93986		121.07	115.02	132.27
C	93986	TC	97.98	93.08	107.04
	93990	26	22.47	21.35	24.55
C	93990		120.45	114.43	131.59
C	93990	TC	97.98	93.08	107.04
	94002		85.88	81.59	93.83
	94003		59.12	56.16	64.58
	94004		43.58	41.40	47.61
	94010	26	8.23	7.82	8.99

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	94010		27.92	26.52	30.50
	94010	TC	19.69	18.71	21.52
	94011		71.54	67.96	78.15
	94012		116.92	111.07	127.73
	94013		16.71	15.87	18.25
	94014		56.57	53.74	61.80
	94015		32.25	30.64	35.24
	94016		24.31	23.09	26.55
	94060		40.60	38.57	44.36
	94060	TC	30.41	28.89	33.22
	94060	26	10.19	9.68	11.13
	94070		66.14	62.83	72.25
	94070	TC	37.84	35.95	41.34
	94070	26	28.30	26.89	30.92
	94200	26	2.67	2.54	2.92
	94200		15.31	14.54	16.72
	94200	TC	12.64	12.01	13.81
	94375		39.64	37.66	43.31
	94375	TC	25.51	24.23	27.86
	94375	26	14.13	13.42	15.43
	94450	TC	83.51	79.33	91.23
	94450	26	22.12	21.01	24.16
	94450		105.63	100.35	115.40
	94452		53.73	51.04	58.70
	94452	TC	39.30	37.34	42.94
	94452	26	14.43	13.71	15.77
	94453		71.00	67.45	77.57
	94453	TC	52.25	49.64	57.09
	94453	26	18.75	17.81	20.48
	94610		47.63	45.25	52.04
	94617		87.78	83.39	95.90

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	94617	TC	56.91	54.06	62.17
	94617	26	30.87	29.33	33.73
	94618		35.61	33.83	38.90
	94618	26	22.36	21.24	24.43
	94618	TC	13.25	12.59	14.48
	94619		62.91	59.76	68.72
	94619	TC	41.83	39.74	45.70
	94619	26	21.09	20.04	23.05
	94621	TC	90.01	85.51	98.34
	94621	26	66.68	63.35	72.85
	94621		156.69	148.86	171.19
	94625		81.40	77.33	88.93
#	94625		16.43	15.61	17.95
#	94626		24.52	23.29	26.78
	94626		102.36	97.24	111.83
	94640		8.04	7.64	8.79
	94644		57.46	54.59	62.78
	94645		15.40	14.63	16.82
	94660		66.04	62.74	72.15
#	94660		32.32	30.70	35.31
	94664		18.53	17.60	20.24
	94667		25.28	24.02	27.62
	94668		36.00	34.20	39.33
	94669		23.74	22.55	25.93
	94680		53.97	51.27	58.96
	94680	TC	41.83	39.74	45.70
	94680	26	12.14	11.53	13.26
	94681		46.77	44.43	51.09
	94681	TC	37.23	35.37	40.68
	94681	26	9.54	9.06	10.42
	94690		48.47	46.05	52.96

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	94690	TC	44.82	42.58	48.97
	94690	26	3.65	3.47	3.99
	94726		59.48	56.51	64.99
	94726	TC	47.65	45.27	52.06
	94726	26	11.84	11.25	12.94
	94727		46.54	44.21	50.84
	94727	TC	34.70	32.97	37.92
	94727	26	11.84	11.25	12.94
	94728		45.01	42.76	49.17
	94728	TC	32.86	31.22	35.90
	94728	26	12.14	11.53	13.26
	94729		58.93	55.98	64.38
	94729	TC	49.72	47.23	54.31
	94729	26	9.21	8.75	10.06
	94760		3.75	3.56	4.09
	94761		4.06	3.86	4.44
	94762		22.14	21.03	24.18
	94780		52.19	49.58	57.02
#	94780		20.31	19.29	22.18
#	94781		7.00	6.65	7.65
	94781		20.80	19.76	22.72
	95004		3.47	3.30	3.80
	95012		18.15	17.24	19.83
	95017		7.63	7.25	8.34
#	95017		3.04	2.89	3.32
#	95018		6.00	5.70	6.56
	95018		17.95	17.05	19.61
	95024		7.15	6.79	7.81
#	95024		1.02	0.97	1.12
	95027		4.39	4.17	4.80
	95028		11.41	10.84	12.47

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	95044		4.67	4.44	5.11
	95052		5.59	5.31	6.11
	95056		47.65	45.27	52.06
	95060		37.46	35.59	40.93
	95065		25.82	24.53	28.21
	95070		36.69	34.86	40.09
#	95076		62.13	59.02	67.87
	95076		117.90	112.01	128.81
	95079		82.24	78.13	89.85
#	95079		57.11	54.25	62.39
	95115		9.57	9.09	10.45
	95117		11.41	10.84	12.47
	95144		19.56	18.58	21.37
#	95144		2.70	2.57	2.96
	95145		31.51	29.93	34.42
#	95145		2.70	2.57	2.96
	95146		57.56	54.68	62.88
#	95146		2.70	2.57	2.96
	95147		55.41	52.64	60.54
#	95147		2.70	2.57	2.96
	95148		82.08	77.98	89.68
#	95148		2.70	2.57	2.96
#	95149		2.70	2.57	2.96
	95149		109.05	103.60	119.14
#	95165		2.70	2.57	2.96
	95165		16.18	15.37	17.68
#	95170		2.70	2.57	2.96
	95170		10.05	9.55	10.98
#	95180		86.06	81.76	94.02
	95180		132.64	126.01	144.91
	95249		64.34	61.12	70.29

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	95250		140.42	133.40	153.41
	95251		34.53	32.80	37.72
#	95717		88.68	84.25	96.89
	95717		107.68	102.30	117.65
	95718		135.15	128.39	147.65
#	95718		110.94	105.39	121.20
	95719		161.62	153.54	176.57
#	95719		133.12	126.46	145.43
	95720		207.77	197.38	226.99
#	95720		170.68	162.15	186.47
	95721		214.10	203.40	233.91
#	95721		175.79	167.00	192.05
	95722		258.29	245.38	282.19
#	95722		212.93	202.28	232.62
	95723		259.21	246.25	283.19
#	95723		213.85	203.16	233.63
	95724		327.33	310.96	357.60
#	95724		270.33	256.81	295.33
	95725		298.70	283.77	326.34
#	95725		245.37	233.10	268.07
	95726		417.85	396.96	456.50
#	95726		343.68	326.50	375.48
	95782	TC	817.48	776.61	893.10
	95782	26	118.80	112.86	129.79
	95782		936.27	889.46	1,022.88
	95783	TC	862.60	819.47	942.39
	95783	26	129.01	122.56	140.94
	95783		991.61	942.03	1,083.33
	95800	26	38.26	36.35	41.80
	95800		132.50	125.88	144.76
	95800	TC	94.23	89.52	102.95

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	95801	TC	57.76	54.87	63.10
	95801	26	40.41	38.39	44.15
	95801		98.17	93.26	107.25
	95803	TC	84.97	80.72	92.83
	95803	26	42.09	39.99	45.99
	95803		127.05	120.70	138.81
	95805	26	56.80	53.96	62.05
	95805		444.74	422.50	485.88
	95805	TC	387.94	368.54	423.82
	95806	TC	53.78	51.09	58.75
	95806	26	44.01	41.81	48.08
	95806		97.79	92.90	106.84
	95807	26	58.64	55.71	64.07
	95807		411.88	391.29	449.98
	95807	TC	353.24	335.58	385.92
	95808	26	80.25	76.24	87.68
	95808		476.54	452.71	520.62
	95808	TC	396.29	376.48	432.95
	95810		627.16	595.80	685.17
	95810	TC	509.52	484.04	556.65
	95810	26	117.64	111.76	128.52
	95811		658.86	625.92	719.81
	95811	TC	536.94	510.09	586.60
	95811	26	121.92	115.82	133.19
	95812	26	57.15	54.29	62.43
	95812		355.33	337.56	388.19
	95812	TC	298.18	283.27	325.76
	95813	26	86.18	81.87	94.15
	95813		445.72	423.43	486.94
	95813	TC	359.55	341.57	392.81
	95816	26	55.22	52.46	60.33

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	95816		383.20	364.04	418.65
	95816	TC	327.98	311.58	358.32
	95819	26	55.53	52.75	60.66
	95819		446.41	424.09	487.70
	95819	TC	390.88	371.34	427.04
	95822	26	55.53	52.75	60.66
	95822		413.85	393.16	452.13
	95822	TC	358.32	340.40	391.46
	95824	26	37.56	35.68	41.03
	95829	26	329.60	313.12	360.09
	95829		1,831.35	1,739.78	2,000.75
	95829	TC	1,501.75	1,426.66	1,640.66
#	95830		75.74	71.95	82.74
	95830		664.16	630.95	725.59
#	95836		88.01	83.61	96.15
	95836		105.17	99.91	114.90
#	95851		6.67	6.34	7.29
	95851		24.44	23.22	26.70
#	95852		4.99	4.74	5.45
	95852		20.01	19.01	21.86
	95857		63.72	60.53	69.61
#	95857		23.57	22.39	25.75
	95860	TC	62.59	59.46	68.38
	95860	26	50.23	47.72	54.88
	95860		112.82	107.18	123.26
	95861	26	79.36	75.39	86.70
	95861	TC	74.24	70.53	81.11
	95861		153.60	145.92	167.81
	95863		208.24	197.83	227.50
	95863	TC	111.63	106.05	121.96
	95863	26	96.61	91.78	105.55

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	95864		226.98	215.63	247.97
	95864	TC	124.50	118.28	136.02
	95864	26	102.48	97.36	111.96
	95865	26	81.29	77.23	88.81
	95865	TC	64.74	61.50	70.73
	95865		146.03	138.73	159.54
	95866	26	64.84	61.60	70.84
	95866	TC	64.13	60.92	70.06
	95866		128.97	122.52	140.90
	95867	TC	60.75	57.71	66.37
	95867	26	40.16	38.15	43.87
	95867		100.92	95.87	110.25
	95868	TC	61.98	58.88	67.71
	95868	26	60.42	57.40	66.01
	95868		122.40	116.28	133.72
	95869		88.61	84.18	96.81
	95869	TC	69.34	65.87	75.75
	95869	26	19.28	18.32	21.07
	95870		80.64	76.61	88.10
	95870	TC	61.37	58.30	67.05
	95870	26	19.28	18.32	21.07
	95872	TC	56.77	53.93	62.02
	95872		207.04	196.69	226.19
	95872	26	150.27	142.76	164.17
	95873		71.00	67.45	77.57
	95873	TC	51.49	48.92	56.26
	95873	26	19.51	18.53	21.31
	95874		74.98	71.23	81.91
	95874	TC	55.78	52.99	60.94
	95874	26	19.21	18.25	20.99
	95875	TC	63.21	60.05	69.06

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	95875	26	58.27	55.36	63.66
	95875		121.48	115.41	132.72
	95885		60.21	57.20	65.78
	95885	TC	42.29	40.18	46.21
	95885	26	17.92	17.02	19.57
	95886	TC	49.95	47.45	54.57
	95886	26	44.35	42.13	48.45
	95886		94.31	89.59	103.03
	95887		83.14	78.98	90.83
	95887	TC	46.89	44.55	51.23
	95887	26	36.25	34.44	39.61
	95905		30.94	29.39	33.80
	95905	TC	28.27	26.86	30.89
	95905	26	2.67	2.54	2.92
	95907		89.65	85.17	97.95
	95907	26	52.19	49.58	57.02
	95907	TC	37.46	35.59	40.93
	95908	26	65.53	62.25	71.59
	95908	TC	46.96	44.61	51.30
	95908		112.49	106.87	122.90
	95909	26	78.25	74.34	85.49
	95909	TC	56.77	53.93	62.02
	95909		135.02	128.27	147.51
	95910	TC	72.09	68.49	78.76
	95910		175.75	166.96	192.00
	95910	26	103.66	98.48	113.25
	95911	TC	80.37	76.35	87.80
	95911		209.82	199.33	229.23
	95911	26	129.45	122.98	141.43
	95912	TC	88.72	84.28	96.92
	95912		243.41	231.24	265.93

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	95912	26	154.69	146.96	169.00
	95913		286.50	272.18	313.01
	95913	26	183.39	174.22	200.35
	95913	TC	103.12	97.96	112.65
	95919	TC	6.20	5.89	6.77
	95919		15.99	15.19	17.47
	95919	26	9.79	9.30	10.70
	95921		85.61	81.33	93.53
	95921	26	43.24	41.08	47.24
	95921	TC	42.37	40.25	46.29
	95922		86.83	82.49	94.86
	95922	26	45.08	42.83	49.25
	95922	TC	41.75	39.66	45.61
	95923	TC	72.40	68.78	79.10
	95923	26	43.01	40.86	46.99
	95923		115.41	109.64	126.09
	95924	26	86.23	81.92	94.21
	95924	TC	61.44	58.37	67.13
	95924		147.67	140.29	161.33
	95925	26	26.90	25.56	29.39
	95925		141.12	134.06	154.17
	95925	TC	114.22	108.51	124.79
	95926	26	25.60	24.32	27.97
	95926		126.64	120.31	138.36
	95926	TC	101.05	96.00	110.40
	95927	26	26.52	25.19	28.97
	95927		157.98	150.08	172.59
	95927	TC	131.46	124.89	143.62
	95928	26	77.40	73.53	84.56
	95928		239.98	227.98	262.18
	95928	TC	162.57	154.44	177.61

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	95929	26	76.79	72.95	83.89
	95929		234.46	222.74	256.15
	95929	TC	157.67	149.79	172.26
	95930		63.35	60.18	69.21
	95930	TC	45.74	43.45	49.97
	95930	26	17.61	16.73	19.24
	95933		80.44	76.42	87.88
	95933	TC	49.41	46.94	53.98
	95933	26	31.03	29.48	33.90
	95937	TC	66.58	63.25	72.74
	95937	26	33.32	31.65	36.40
	95937		99.89	94.90	109.14
	95938	26	44.12	41.91	48.20
	95938		370.26	351.75	404.51
	95938	TC	326.14	309.83	356.30
	95939		548.10	520.70	598.81
	95939	TC	433.17	411.51	473.24
	95939	26	114.93	109.18	125.56
	95940		26.49	25.17	28.95
	95954		356.22	338.41	389.17
	95954	TC	251.20	238.64	274.44
	95954	26	105.02	99.77	114.74
	95955	26	51.88	49.29	56.68
	95955		184.66	175.43	201.74
	95955	TC	132.77	126.13	145.05
	95957		290.84	276.30	317.75
	95957	TC	191.53	181.95	209.24
	95957	26	99.31	94.34	108.49
	95958		715.60	679.82	781.79
	95958	TC	495.53	470.75	541.36
	95958	26	220.07	209.07	240.43

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	95961		346.33	329.01	378.36
	95961	TC	179.43	170.46	196.03
	95961	26	166.90	158.56	182.34
	95962		294.55	279.82	321.79
	95962	26	178.56	169.63	195.07
	95962	TC	115.99	110.19	126.72
	95965	26	409.67	389.19	447.57
	95966	26	206.66	196.33	225.78
	95967	26	180.87	171.83	197.60
	95970		19.32	18.35	21.10
#	95970		15.95	15.15	17.42
	95971		49.06	46.61	53.60
#	95971		34.35	32.63	37.52
	95972		57.70	54.82	63.04
#	95972		35.02	33.27	38.26
	95976		37.45	35.58	40.92
#	95976		31.62	30.04	34.55
	95977		49.94	47.44	54.56
#	95977		42.28	40.17	46.20
	95980		41.66	39.58	45.52
	95981		41.43	39.36	45.26
#	95981		16.61	15.78	18.15
	95982		61.93	58.83	67.65
#	95982		33.12	31.46	36.18
	95983		50.74	48.20	55.43
#	95983		41.85	39.76	45.72
	95984		44.22	42.01	48.31
#	95984		36.86	35.02	40.27
	95990		90.47	85.95	98.84
#	95991		33.65	31.97	36.77
	95991		109.04	103.59	119.13

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	95992		39.67	37.69	43.34
#	95992		29.55	28.07	32.28
	96000		70.17	66.66	76.66
	96001		86.47	82.15	94.47
	96002		17.94	17.04	19.60
	96004		104.58	99.35	114.25
	96020	26	149.98	142.48	163.85
	96105		94.66	89.93	103.42
	96112		123.42	117.25	134.84
#	96112		106.56	101.23	116.41
	96113		55.09	52.34	60.19
#	96113		44.98	42.73	49.14
#	96116		72.06	68.46	78.73
	96116		92.29	87.68	100.83
	96121		74.33	70.61	81.20
#	96121		61.46	58.39	67.15
	96125		99.65	94.67	108.87
	96127		4.67	4.44	5.11
	96130		121.83	115.74	133.10
#	96130		99.46	94.49	108.66
	96131		85.17	80.91	93.05
#	96131		70.16	66.65	76.65
	96132		120.15	114.14	131.26
#	96132		98.39	93.47	107.49
#	96133		70.53	67.00	77.05
	96133		95.67	90.89	104.52
	96136		41.90	39.81	45.78
#	96136		21.37	20.30	23.35
	96137		35.36	33.59	38.63
#	96137		16.36	15.54	17.87
	96138		34.70	32.97	37.92

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	96139		32.49	30.87	35.50
	96146		2.22	2.11	2.43
#	96156		86.84	82.50	94.88
	96156		105.84	100.55	115.63
	96158		72.65	69.02	79.37
#	96158		59.78	56.79	65.31
	96159		24.96	23.71	27.27
#	96159		20.36	19.34	22.24
	96160		2.76	2.62	3.01
	96161		3.06	2.91	3.35
	96164		11.50	10.93	12.57
#	96164		9.35	8.88	10.21
	96165		4.92	4.67	5.37
#	96165		4.00	3.80	4.37
	96167		76.96	73.11	84.08
#	96167		63.16	60.00	69.00
	96168		27.96	26.56	30.54
#	96168		22.75	21.61	24.85
	96202		19.72	18.73	21.54
#	96202		17.26	16.40	18.86
	96203		5.33	5.06	5.82
#	96203		5.02	4.77	5.49
	96360		31.22	29.66	34.11
	96361		12.29	11.68	13.43
	96365		62.50	59.38	68.29
	96366		20.21	19.20	22.08
	96367		27.90	26.51	30.49
	96368		19.57	18.59	21.38
	96369		133.84	127.15	146.22
	96370		16.23	15.42	17.73
	96371		51.79	49.20	56.58

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	96372		14.67	13.94	16.03
	96373		18.65	17.72	20.38
	96374		35.30	33.54	38.57
	96375		14.77	14.03	16.13
	96377		18.04	17.14	19.71
	96380		28.55	27.12	31.19
	96381		22.94	21.79	25.06
	96401		66.79	63.45	72.97
	96402		36.25	34.44	39.61
	96405		79.27	75.31	86.61
#	96405		23.50	22.33	25.68
#	96406		37.10	35.25	40.54
	96406		123.83	117.64	135.29
	96409		97.06	92.21	106.04
	96411		53.21	50.55	58.13
	96413		123.61	117.43	135.04
	96415		26.75	25.41	29.22
	96416		123.40	117.23	134.81
	96417		61.82	58.73	67.54
	96420		97.47	92.60	106.49
	96422		129.72	123.23	141.71
	96423		70.12	66.61	76.60
	96425		160.97	152.92	175.86
	96440		711.48	675.91	777.30
#	96440		113.86	108.17	124.40
#	96446		19.42	18.45	21.22
	96446		145.99	138.69	159.49
#	96450		66.47	63.15	72.62
	96450		153.20	145.54	167.37
	96521		132.90	126.26	145.20
	96522		116.05	110.25	126.79

**WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026**

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	96523		24.09	22.89	26.32
#	96542		35.42	33.65	38.70
	96542		125.83	119.54	137.47
	96547		332.58	315.95	363.34
	96548		152.90	145.26	167.05
	96567		118.68	112.75	129.66
	96570		51.91	49.31	56.71
#	96570		46.09	43.79	50.36
	96571		26.49	25.17	28.95
#	96571		23.42	22.25	25.59
	96573		201.03	190.98	219.63
	96574		248.02	235.62	270.96
	96900		21.83	20.74	23.85
	96904		60.75	57.71	66.37
	96910		105.57	100.29	115.33
	96912		89.33	84.86	97.59
	96913		135.37	128.60	147.89
#	96920		40.35	38.33	44.08
	96920		129.23	122.77	141.19
#	96921		45.77	43.48	50.00
	96921		138.63	131.70	151.46
#	96922		72.59	68.96	79.30
	96922		165.14	156.88	180.41
	96931		153.66	145.98	167.88
	96932		112.55	106.92	122.96
	96933		41.11	39.05	44.91
	96934		108.42	103.00	118.45
	96935		69.88	66.39	76.35
	96936		38.54	36.61	42.10
	97007		1,555.56	1,477.78	1,699.45
	97008		9.27	8.81	10.13

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	97009		5.82	5.53	6.36
	97012		13.95	13.25	15.24
	97016		11.63	11.05	12.71
	97018		5.76	5.47	6.29
	97022		14.97	14.22	16.35
	97024		6.99	6.64	7.64
	97026		6.38	6.06	6.97
	97028		7.97	7.57	8.71
	97032		14.29	13.58	15.62
	97033		18.30	17.39	20.00
	97034		13.56	12.88	14.81
	97035		13.86	13.17	15.15
	97036		32.76	31.12	35.79
	97110		28.05	26.65	30.65
	97112		31.57	29.99	34.49
	97113		35.49	33.72	38.78
	97116		28.05	26.65	30.65
	97124		28.37	26.95	30.99
	97129		22.07	20.97	24.12
#	97129		19.61	18.63	21.42
	97130		20.71	19.67	22.62
#	97130		18.26	17.35	19.95
	97140		26.77	25.43	29.24
	97150		17.47	16.60	19.09
	97161		94.37	89.65	103.10
	97162		94.37	89.65	103.10
	97163		94.37	89.65	103.10
	97164		64.78	61.54	70.77
	97165		96.82	91.98	105.78
	97166		96.82	91.98	105.78
	97167		96.82	91.98	105.78

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	97168		65.70	62.42	71.78
	97530		33.54	31.86	36.64
	97533		57.25	54.39	62.55
	97535		31.11	29.55	33.98
	97537		30.90	29.36	33.76
	97542		29.98	28.48	32.75
	97550		51.42	48.85	56.18
#	97550		39.46	37.49	43.11
	97551		25.48	24.21	27.84
#	97551		20.88	19.84	22.82
	97552		20.97	19.92	22.91
#	97552		9.33	8.86	10.19
#	97597		31.05	29.50	33.93
	97597		95.72	90.93	104.57
	97598		45.69	43.41	49.92
#	97598		21.79	20.70	23.81
	97605		40.26	38.25	43.99
#	97605		20.96	19.91	22.90
	97606		48.07	45.67	52.52
#	97606		22.94	21.79	25.06
	97607		338.72	321.78	370.05
#	97607		18.77	17.83	20.50
	97608		365.98	347.68	399.83
#	97608		21.81	20.72	23.83
	97610		365.91	347.61	399.75
#	97610		15.31	14.54	16.72
	97750		32.34	30.72	35.33
	97755		36.51	34.68	39.88
	97760		43.83	41.64	47.89
	97761		38.62	36.69	42.19
	97763		47.44	45.07	51.83

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	97802		35.33	33.56	38.59
#	97802		25.83	24.54	28.22
	97803		30.50	28.98	33.33
#	97803		21.61	20.53	23.61
	97804		16.43	15.61	17.95
#	97804		12.14	11.53	13.26
	97810		46.20	43.89	50.47
#	97810		27.20	25.84	29.72
	97811		27.61	26.23	30.16
#	97811		20.56	19.53	22.46
	97813		54.32	51.60	59.34
#	97813		33.17	31.51	36.24
	97814		27.95	26.55	30.53
#	97814		20.90	19.86	22.84
	98016		16.96	16.11	18.53
#	98016		12.97	12.32	14.17
	98925		31.26	29.70	34.16
#	98925		19.61	18.63	21.42
	98926		44.60	42.37	48.73
#	98926		29.58	28.10	32.32
	98927		58.96	56.01	64.41
#	98927		39.96	37.96	43.65
	98928		71.38	67.81	77.98
#	98928		49.92	47.42	54.53
	98929		83.42	79.25	91.14
#	98929		59.21	56.25	64.69
	98940		25.90	24.61	28.30
#	98940		18.24	17.33	19.93
	98941		37.33	35.46	40.78
#	98941		27.83	26.44	30.41
	98942		48.48	46.06	52.97

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	98942		37.76	35.87	41.25
	98966		13.37	12.70	14.61
#	98966		10.30	9.79	11.26
	98967		24.59	23.36	26.86
#	98967		19.99	18.99	21.84
	98968		34.21	32.50	37.38
#	98968		29.00	27.55	31.68
	98970		12.14	11.53	13.26
#	98970		10.30	9.79	11.26
	98971		22.58	21.45	24.67
#	98971		18.90	17.96	20.65
	98972		33.80	32.11	36.93
#	98972		28.90	27.46	31.58
	98975		20.07	19.07	21.93
	98976		47.88	45.49	52.31
	98977		47.27	44.91	51.65
	98979		25.19	23.93	27.52
#	98979		11.40	10.83	12.45
	98980		51.68	49.10	56.47
#	98980		25.63	24.35	28.00
	98981		40.00	38.00	43.70
#	98981		25.29	24.03	27.63
	98984		47.88	45.49	52.31
	98985		47.27	44.91	51.65
	99091		54.59	51.86	59.64
#	99091		47.24	44.88	51.61
	99151		58.68	55.75	64.11
#	99151		20.99	19.94	22.93
	99152		48.14	45.73	52.59
#	99152		11.06	10.51	12.09
	99153		11.48	10.91	12.55

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	99155		82.07	77.97	89.67
	99156		71.47	67.90	78.09
	99157		54.31	51.59	59.33
#	99170		71.54	67.96	78.15
	99170		158.27	150.36	172.91
	99175		42.06	39.96	45.95
	99183		108.42	103.00	118.45
	99184		183.86	174.67	200.87
	99195		90.47	85.95	98.84
	99202		72.18	68.57	78.86
#	99202		40.92	38.87	44.70
#	99203		71.42	67.85	78.03
	99203		113.71	108.02	124.22
	99204		172.07	163.47	187.99
#	99204		116.60	110.77	127.39
	99205		230.12	218.61	251.40
#	99205		159.94	151.94	174.73
#	99211		7.65	7.27	8.36
	99211		22.97	21.82	25.09
	99212		57.03	54.18	62.31
#	99212		30.98	29.43	33.84
#	99213		57.16	54.30	62.45
	99213		91.79	87.20	100.28
#	99214		84.16	79.95	91.94
	99214		131.05	124.50	143.18
	99215		186.23	176.92	203.46
#	99215		124.93	118.68	136.48
	99221		74.48	70.76	81.37
	99222		116.53	110.70	127.31
	99223		155.68	147.90	170.09
	99231		43.95	41.75	48.01

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	99232		70.18	66.67	76.67
	99233		106.38	101.06	116.22
	99234		88.05	83.65	96.20
	99235		142.44	135.32	155.62
	99236		189.24	179.78	206.75
	99238		73.90	70.21	80.74
	99239		105.20	99.94	114.93
	99281		11.06	10.51	12.09
	99282		40.60	38.57	44.36
	99283		69.87	66.38	76.34
	99284		119.03	113.08	130.04
	99285		172.38	163.76	188.32
	99291		299.96	284.96	327.70
#	99291		199.13	189.17	217.55
	99292		131.13	124.57	143.26
#	99292		100.18	95.17	109.45
	99304		79.51	75.53	86.86
#	99304		70.31	66.79	76.81
	99305		137.94	131.04	150.70
#	99305		118.63	112.70	129.61
	99306		189.03	179.58	206.52
#	99306		161.75	153.66	176.71
	99307		41.02	38.97	44.82
#	99307		36.43	34.61	39.80
	99308		76.70	72.87	83.80
#	99308		66.59	63.26	72.75
	99309		111.74	106.15	122.07
#	99309		97.03	92.18	106.01
	99310		159.56	151.58	174.32
#	99310		138.42	131.50	151.23
	99315		83.80	79.61	91.55

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	99315		72.15	68.54	78.82
	99316		135.41	128.64	147.94
#	99316		116.41	110.59	127.18
	99341		48.26	45.85	52.73
	99342		77.65	73.77	84.84
	99344		144.08	136.88	157.41
	99345		205.91	195.61	224.95
	99347		45.21	42.95	49.39
	99348		77.22	73.36	84.36
	99349		129.65	123.17	141.65
	99350		189.39	179.92	206.91
	99406		14.94	14.19	16.32
#	99406		10.65	10.12	11.64
	99407		28.41	26.99	31.04
#	99407		21.98	20.88	24.01
	99415		21.22	20.16	23.18
	99416		11.72	11.13	12.80
	99421		15.28	14.52	16.70
#	99421		10.99	10.44	12.01
	99422		29.95	28.45	32.72
#	99422		22.28	21.17	24.35
	99423		47.44	45.07	51.83
#	99423		34.88	33.14	38.11
	99424		85.33	81.06	93.22
#	99424		64.49	61.27	70.46
	99425		59.82	56.83	65.35
#	99425		43.88	41.69	47.94
	99426		65.64	62.36	71.71
#	99426		43.88	41.69	47.94
	99427		52.08	49.48	56.90
#	99427		31.24	29.68	34.13

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	99437		61.35	58.28	67.02
#	99437		43.58	41.40	47.61
	99439		48.68	46.25	53.19
#	99439		30.60	29.07	33.43
	99445		47.88	45.49	52.31
	99446		18.78	17.84	20.52
#	99446		16.02	15.22	17.50
	99447		37.49	35.62	40.96
#	99447		31.97	30.37	34.93
	99448		55.82	53.03	60.98
#	99448		47.54	45.16	51.93
	99449		74.83	71.09	81.75
#	99449		63.19	60.03	69.03
	99451		34.89	33.15	38.12
#	99451		29.99	28.49	32.76
	99452		36.43	34.61	39.80
#	99452		30.91	29.36	33.76
	99453		20.07	19.07	21.93
	99454		47.88	45.49	52.31
	99457		49.57	47.09	54.15
#	99457		26.28	24.97	28.72
	99458		40.07	38.07	43.78
#	99458		26.28	24.97	28.72
	99459		15.94	15.14	17.41
	99460		80.64	76.61	88.10
	99461		90.31	85.79	98.66
#	99461		52.92	50.27	57.81
	99462		35.30	33.54	38.57
	99463		94.20	89.49	102.91
	99464		62.88	59.74	68.70
	99465		123.26	117.10	134.67

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	99466		201.13	191.07	219.73
	99467		100.96	95.91	110.30
	99468		776.56	737.73	848.39
	99469		335.74	318.95	366.79
	99470		24.96	23.71	27.27
#	99470		13.31	12.64	14.54
	99471		672.61	638.98	734.83
	99472		350.25	332.74	382.65
	99473		14.17	13.46	15.48
#	99474		7.95	7.55	8.68
	99474		17.45	16.58	19.07
	99475		472.67	449.04	516.40
	99476		304.73	289.49	332.91
	99477		294.48	279.76	321.72
	99478		115.61	109.83	126.30
	99479		104.93	99.68	114.63
	99480		100.96	95.91	110.30
	99483		281.95	267.85	308.03
#	99483		168.86	160.42	184.48
	99484		55.86	53.07	61.03
#	99484		38.70	36.77	42.29
#	99487		78.86	74.92	86.16
	99487		138.62	131.69	151.44
	99489		75.14	71.38	82.09
#	99489		43.58	41.40	47.61
	99490		64.11	60.90	70.04
#	99490		43.58	41.40	47.61
	99491		86.86	82.52	94.90
#	99491		65.10	61.85	71.13
#	99492		81.90	77.81	89.48
	99492		153.61	145.93	167.82

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	99493		89.14	84.68	97.38
	99493		140.01	133.01	152.96
	99494		59.22	56.26	64.70
#	99494		35.93	34.13	39.25
	99495		211.46	200.89	231.02
#	99495		121.66	115.58	132.92
	99496		286.79	272.45	313.32
#	99496		165.43	157.16	180.73
	99497		84.72	80.48	92.55
#	99497		65.41	62.14	71.46
	99498		76.46	72.64	83.54
#	99498		62.97	59.82	68.79
	A2001		116.77	110.93	127.57
	A2002		116.77	110.93	127.57
	A2005		116.77	110.93	127.57
	A2006		116.77	110.93	127.57
	A2007		116.77	110.93	127.57
	A2008		116.77	110.93	127.57
	A2009		116.77	110.93	127.57
	A2010		116.77	110.93	127.57
	A2011		116.77	110.93	127.57
	A2012		116.77	110.93	127.57
	A2013		116.77	110.93	127.57
	A2015		116.77	110.93	127.57
	A2016		116.77	110.93	127.57
	A2018		116.77	110.93	127.57
	A2019		116.77	110.93	127.57
	A2021		116.77	110.93	127.57
	A2022		116.77	110.93	127.57
	A2024		116.77	110.93	127.57
	A2025		116.77	110.93	127.57

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	A2027		116.77	110.93	127.57
	A2029		116.77	110.93	127.57
	A2031		116.77	110.93	127.57
	A2032		116.77	110.93	127.57
	A2034		116.77	110.93	127.57
	A2036		116.77	110.93	127.57
	A2038		116.77	110.93	127.57
	A2039		116.77	110.93	127.57
	A4100		116.77	110.93	127.57
	G0011		28.57	27.14	31.21
#	G0011		21.52	20.44	23.51
	G0012		14.67	13.94	16.03
#	G0013		7.65	7.27	8.36
	G0013		22.97	21.82	25.09
	G0017		214.52	203.79	234.36
#	G0017		171.92	163.32	187.82
#	G0018		83.10	78.95	90.79
	G0018		103.33	98.16	112.88
	G0019		82.50	78.38	90.14
#	G0019		43.88	41.69	47.94
	G0022		52.06	49.46	56.88
#	G0022		30.60	29.07	33.43
	G0023		83.42	79.25	91.14
#	G0023		44.19	41.98	48.28
	G0024		52.36	49.74	57.20
#	G0024		30.91	29.36	33.76
	G0076		48.60	46.17	53.10
	G0077		73.29	69.63	80.07
	G0078		118.59	112.66	129.56
	G0079		161.20	153.14	176.11
	G0080		212.96	202.31	232.66

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	G0081		48.57	46.14	53.06
	G0082		79.23	75.27	86.56
	G0083		125.96	119.66	137.61
	G0084		178.65	169.72	195.18
	G0085		212.96	202.31	232.66
	G0086		72.11	68.50	78.78
	G0087		100.97	95.92	110.31
	G0101		38.26	36.35	41.80
#	G0101		24.47	23.25	26.74
#	G0102		7.65	7.27	8.36
	G0102		22.97	21.82	25.09
#	G0104		52.23	49.62	57.06
	G0104		200.25	190.24	218.78
#	G0105	53	81.49	77.42	89.03
	G0105		359.19	341.23	392.41
	G0105	53	179.56	170.58	196.17
#	G0105		163.35	155.18	178.46
	G0108		54.10	51.40	59.11
	G0109		15.51	14.73	16.94
	G0117		60.58	57.55	66.18
	G0118		37.65	35.77	41.14
#	G0121	53	81.86	77.77	89.44
	G0121		359.56	341.58	392.82
	G0121	53	179.94	170.94	196.58
#	G0121		163.73	155.54	178.87
	G0124		22.87	21.73	24.99
#	G0127		6.70	6.37	7.33
	G0127		22.33	21.21	24.39
	G0128		10.19	9.68	11.13
	G0130		37.23	35.37	40.68
	G0130	TC	26.43	25.11	28.88

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	G0130	26	10.80	10.26	11.80
#	G0136		7.95	7.55	8.68
	G0136		18.99	18.04	20.75
	G0138		181.18	172.12	197.94
	G0140		85.26	81.00	93.15
#	G0140		44.19	41.98	48.28
	G0141		22.87	21.73	24.99
	G0146		51.37	48.80	56.12
#	G0146		30.22	28.71	33.02
	G0166		94.68	89.95	103.44
#	G0168		14.26	13.55	15.58
	G0168		98.23	93.32	107.32
	G0179		42.26	40.15	46.17
	G0180		54.36	51.64	59.39
	G0181		106.75	101.41	116.62
	G0182		105.53	100.25	115.29
	G0237		11.72	11.13	12.80
	G0238		10.49	9.97	11.47
	G0239		13.25	12.59	14.48
	G0245		62.87	59.73	68.69
#	G0245		34.67	32.94	37.88
	G0246		36.98	35.13	40.40
#	G0246		17.37	16.50	18.98
	G0247		75.74	71.95	82.74
#	G0247		19.04	18.09	20.80
	G0248		97.21	92.35	106.20
	G0249		60.45	57.43	66.04
	G0250		8.87	8.43	9.69
	G0268		48.58	46.15	53.07
#	G0268		27.43	26.06	29.97
	G0270		30.50	28.98	33.33

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	G0270		21.61	20.53	23.61
	G0271		16.43	15.61	17.95
#	G0271		12.14	11.53	13.26
	G0276		354.78	337.04	387.60
	G0277		178.04	169.14	194.51
	G0278		11.86	11.27	12.96
	G0279		39.02	37.07	42.63
	G0279	26	27.38	26.01	29.91
	G0279	TC	11.65	11.07	12.73
	G0281		11.32	10.75	12.36
	G0283		12.24	11.63	13.37
	G0288		42.80	40.66	46.76
	G0289		73.12	69.46	79.88
	G0296		28.09	26.69	30.69
#	G0296		22.27	21.16	24.33
	G0316		34.02	32.32	37.17
#	G0316		27.58	26.20	30.13
	G0317		33.03	31.38	36.09
#	G0317		26.90	25.56	29.39
	G0318		33.40	31.73	36.49
#	G0318		27.27	25.91	29.80
	G0323		56.03	53.23	61.21
#	G0323		37.64	35.76	41.12
	G0329		10.05	9.55	10.98
#	G0341		286.84	272.50	313.38
	G0341		1,473.50	1,399.83	1,609.80
	G0342		715.63	679.85	781.83
	G0343		1,162.82	1,104.68	1,270.38
	G0372		9.15	8.69	9.99
#	G0372		7.62	7.24	8.33
	G0396		36.35	34.53	39.71

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	G0396		29.00	27.55	31.68
	G0397		66.21	62.90	72.34
#	G0397		54.87	52.13	59.95
	G0402		169.11	160.65	184.75
#	G0402		113.64	107.96	124.15
	G0403		14.74	14.00	16.10
	G0404		6.51	6.18	7.11
	G0405		8.23	7.82	8.99
	G0406		35.90	34.11	39.23
	G0407		63.47	60.30	69.35
	G0408		92.96	88.31	101.56
	G0409		22.14	21.03	24.18
	G0412		659.35	626.38	720.34
	G0413		965.78	917.49	1,055.11
	G0414		911.75	866.16	996.08
	G0415		1,228.73	1,167.29	1,342.38
	G0416		338.36	321.44	369.66
	G0416	TC	174.13	165.42	190.23
	G0416	26	164.23	156.02	179.42
	G0420		111.33	105.76	121.62
	G0421		26.81	25.47	29.29
	G0422		127.61	121.23	139.41
	G0423		127.61	121.23	139.41
	G0425		84.22	80.01	92.01
	G0426		116.86	111.02	127.67
	G0427		167.76	159.37	183.28
#	G0429		55.82	53.03	60.98
	G0429		95.66	90.88	104.51
	G0438		168.80	160.36	184.41
	G0439		132.82	126.18	145.11
#	G0442		7.95	7.55	8.68

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	G0442		17.76	16.87	19.40
	G0443		33.61	31.93	36.72
#	G0443		26.25	24.94	28.68
#	G0444		7.95	7.55	8.68
	G0444		17.76	16.87	19.40
	G0445		33.61	31.93	36.72
#	G0445		26.56	25.23	29.01
	G0446		33.30	31.64	36.39
#	G0446		26.25	24.94	28.68
	G0447		33.30	31.64	36.39
#	G0447		26.25	24.94	28.68
	G0451		11.41	10.84	12.47
	G0452		45.71	43.42	49.93
	G0452	26	42.88	40.74	46.85
	G0452	TC	2.83	2.69	3.09
	G0453		27.25	25.89	29.77
	G0454		8.87	8.43	9.69
#	G0454		7.65	7.27	8.36
#	G0455		61.23	58.17	66.90
	G0455		139.08	132.13	151.95
	G0459		39.68	37.70	43.36
#	G0465		83.21	79.05	90.91
	G0465		982.09	932.99	1,072.94
	G0473		12.39	11.77	13.54
#	G0473		9.94	9.44	10.86
	G0500		61.50	58.43	67.19
#	G0500		5.41	5.14	5.91
	G0506		63.96	60.76	69.87
#	G0506		38.22	36.31	41.76
	G0508		183.77	174.58	200.77
	G0509		175.70	166.92	191.96

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	G0513		63.38	60.21	69.24
#	G0513		50.51	47.98	55.18
	G0514		63.38	60.21	69.24
#	G0514		50.51	47.98	55.18
#	G0516		84.10	79.90	91.89
	G0516		166.85	158.51	182.29
	G0517		189.34	179.87	206.85
#	G0517		96.48	91.66	105.41
	G0518		301.21	286.15	329.07
#	G0518		157.17	149.31	171.71
#	G0537		7.95	7.55	8.68
	G0537		18.99	18.04	20.75
#	G0538		7.95	7.55	8.68
	G0538		16.23	15.42	17.73
	G0539		51.72	49.13	56.50
#	G0539		39.46	37.49	43.11
	G0540		25.48	24.21	27.84
#	G0540		20.88	19.84	22.82
	G0541		51.72	49.13	56.50
#	G0541		39.46	37.49	43.11
	G0542		25.48	24.21	27.84
#	G0542		20.88	19.84	22.82
	G0543		20.97	19.92	22.91
#	G0543		9.33	8.86	10.19
	G0544		64.66	61.43	70.64
#	G0544		42.90	40.76	46.87
	G0545		47.55	45.17	51.95
#	G0545		40.19	38.18	43.91
	G0546		18.78	17.84	20.52
#	G0546		16.02	15.22	17.50
	G0547		37.18	35.32	40.62

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	G0547		31.97	30.37	34.93
	G0548		55.82	53.03	60.98
#	G0548		47.54	45.16	51.93
	G0549		75.14	71.38	82.09
#	G0549		63.19	60.03	69.03
	G0550		34.59	32.86	37.79
#	G0550		29.99	28.49	32.76
	G0551		36.12	34.31	39.46
#	G0551		30.91	29.36	33.76
	G0553		51.68	49.10	56.47
#	G0553		25.93	24.63	28.32
	G0554		40.00	38.00	43.70
#	G0554		25.29	24.03	27.63
	G0556		15.89	15.10	17.37
#	G0556		10.99	10.44	12.01
	G0557		51.95	49.35	56.75
#	G0557		33.56	31.88	36.66
#	G0558		72.56	68.93	79.27
	G0558		113.32	107.65	123.80
#	G0559		8.04	7.64	8.79
	G0559		9.57	9.09	10.45
	G0560		42.18	40.07	46.08
#	G0560		39.42	37.45	43.07
#	G0568		81.66	77.58	89.22
	G0568		154.91	147.16	169.23
#	G0569		89.52	85.04	97.80
	G0569		141.00	133.95	154.04
	G0570		56.17	53.36	61.36
#	G0570		38.70	36.77	42.29
	G0571		65.49	62.22	71.55
#	G0571		59.67	56.69	65.19

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	G2001		48.60	46.17	53.10
	G2002		73.29	69.63	80.07
	G2003		118.59	112.66	129.56
	G2004		161.20	153.14	176.11
	G2005		212.96	202.31	232.66
	G2006		48.57	46.14	53.06
	G2007		79.23	75.27	86.56
	G2008		125.96	119.66	137.61
	G2009		178.65	169.72	195.18
#	G2010		7.95	7.55	8.68
	G2010		12.55	11.92	13.71
	G2011		17.12	16.26	18.70
#	G2011		14.67	13.94	16.03
	G2013		212.96	202.31	232.66
	G2014		72.11	68.50	78.78
	G2015		100.97	95.92	110.31
	G2082		876.61	832.78	957.70
#	G2082		31.05	29.50	33.93
#	G2083		31.05	29.50	33.93
	G2083		1,246.83	1,184.49	1,362.16
	G2086		479.73	455.74	524.10
#	G2086		361.74	343.65	395.20
	G2087		434.59	412.86	474.79
#	G2087		344.49	327.27	376.36
	G2088		58.54	55.61	63.95
#	G2088		34.02	32.32	37.17
	G2211		17.05	16.20	18.63
#	G2211		14.29	13.58	15.62
	G2212		33.40	31.73	36.49
#	G2212		27.27	25.91	29.80
	G2213		65.71	62.42	71.78

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
#	G2213		54.68	51.95	59.74
	G2214		58.46	55.54	63.87
#	G2214		33.64	31.96	36.75
#	G2250		7.95	7.55	8.68
	G2250		12.55	11.92	13.71
	G2251		13.67	12.99	14.94
#	G2251		10.61	10.08	11.59
	G2252		27.80	26.41	30.37
#	G2252		22.28	21.17	24.35
	G3002		84.17	79.96	91.95
#	G3002		64.25	61.04	70.20
	G3003		30.94	29.39	33.80
#	G3003		22.66	21.53	24.76
	G9157		88.80	84.36	97.01
	G9187		47.63	45.25	52.04
	G9481		18.39	17.47	20.09
	G9482		33.87	32.18	37.01
	G9483		53.73	51.04	58.70
	G9484		90.66	86.13	99.05
	G9485		120.05	114.05	131.16
	G9486		18.39	17.47	20.09
	G9487		35.97	34.17	39.30
	G9488		55.66	52.88	60.81
	G9489		78.79	74.85	86.08
	G9490		47.63	45.25	52.04
	G9685		156.06	148.26	170.50
	G9868		26.85	25.51	29.34
	G9869		35.92	34.12	39.24
	G9870		44.98	42.73	49.14
	G9978		49.65	47.17	54.25
#	G9978		23.60	22.42	25.78

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	G9979		72.18	68.57	78.86
#	G9979		40.92	38.87	44.70
#	G9980		65.38	62.11	71.43
	G9980		107.67	102.29	117.63
	G9981		166.36	158.04	181.75
#	G9981		110.89	105.35	121.15
	G9982		219.04	208.09	239.30
#	G9982		148.86	141.42	162.63
	G9983		49.65	47.17	54.25
#	G9983		23.60	22.42	25.78
	G9984		80.72	76.68	88.18
#	G9984		46.08	43.78	50.35
#	G9985		70.06	66.56	76.54
	G9985		116.95	111.10	127.77
	G9986		163.07	154.92	178.16
#	G9986		101.77	96.68	111.18
	G9987		47.63	45.25	52.04
	P3001		22.87	21.73	24.99
	Q0035	26	7.92	7.52	8.65
	Q0035		18.11	17.20	19.78
	Q0035	TC	10.19	9.68	11.13
	Q0091		43.56	41.38	47.59
#	Q0091		15.67	14.89	17.12
	Q0092		23.67	22.49	25.86
	Q4101		116.77	110.93	127.57
	Q4102		116.77	110.93	127.57
	Q4103		116.77	110.93	127.57
	Q4104		116.77	110.93	127.57
	Q4105		116.77	110.93	127.57
	Q4107		116.77	110.93	127.57
	Q4108		116.77	110.93	127.57

**WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026**

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	Q4110		116.77	110.93	127.57
	Q4111		116.77	110.93	127.57
	Q4115		116.77	110.93	127.57
	Q4116		116.77	110.93	127.57
	Q4117		116.77	110.93	127.57
	Q4121		116.77	110.93	127.57
	Q4122		116.77	110.93	127.57
	Q4123		116.77	110.93	127.57
	Q4124		116.77	110.93	127.57
	Q4125		116.77	110.93	127.57
	Q4126		116.77	110.93	127.57
	Q4127		116.77	110.93	127.57
	Q4128		116.77	110.93	127.57
	Q4130		116.77	110.93	127.57
	Q4132		116.77	110.93	127.57
	Q4133		116.77	110.93	127.57
	Q4134		116.77	110.93	127.57
	Q4135		116.77	110.93	127.57
	Q4136		116.77	110.93	127.57
	Q4137		116.77	110.93	127.57
	Q4138		116.77	110.93	127.57
	Q4140		116.77	110.93	127.57
	Q4141		116.77	110.93	127.57
	Q4142		116.77	110.93	127.57
	Q4143		116.77	110.93	127.57
	Q4146		116.77	110.93	127.57
	Q4147		116.77	110.93	127.57
	Q4148		116.77	110.93	127.57
	Q4150		116.77	110.93	127.57
	Q4151		116.77	110.93	127.57
	Q4152		116.77	110.93	127.57

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	Q4153		116.77	110.93	127.57
	Q4154		116.77	110.93	127.57
	Q4156		116.77	110.93	127.57
	Q4157		116.77	110.93	127.57
	Q4158		116.77	110.93	127.57
	Q4159		116.77	110.93	127.57
	Q4160		116.77	110.93	127.57
	Q4161		116.77	110.93	127.57
	Q4163		116.77	110.93	127.57
	Q4164		116.77	110.93	127.57
	Q4165		116.77	110.93	127.57
	Q4166		116.77	110.93	127.57
	Q4167		116.77	110.93	127.57
	Q4169		116.77	110.93	127.57
	Q4170		116.77	110.93	127.57
	Q4173		116.77	110.93	127.57
	Q4175		116.77	110.93	127.57
	Q4176		116.77	110.93	127.57
	Q4178		116.77	110.93	127.57
	Q4179		116.77	110.93	127.57
	Q4180		116.77	110.93	127.57
	Q4181		116.77	110.93	127.57
	Q4182		116.77	110.93	127.57
	Q4183		116.77	110.93	127.57
	Q4184		116.77	110.93	127.57
	Q4186		116.77	110.93	127.57
	Q4187		116.77	110.93	127.57
	Q4188		116.77	110.93	127.57
	Q4190		116.77	110.93	127.57
	Q4191		116.77	110.93	127.57
	Q4193		116.77	110.93	127.57

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	Q4194		116.77	110.93	127.57
	Q4195		116.77	110.93	127.57
	Q4196		116.77	110.93	127.57
	Q4197		116.77	110.93	127.57
	Q4198		116.77	110.93	127.57
	Q4199		116.77	110.93	127.57
	Q4200		116.77	110.93	127.57
	Q4201		116.77	110.93	127.57
	Q4203		116.77	110.93	127.57
	Q4204		116.77	110.93	127.57
	Q4205		116.77	110.93	127.57
	Q4208		116.77	110.93	127.57
	Q4209		116.77	110.93	127.57
	Q4211		116.77	110.93	127.57
	Q4214		116.77	110.93	127.57
	Q4216		116.77	110.93	127.57
	Q4217		116.77	110.93	127.57
	Q4218		116.77	110.93	127.57
	Q4219		116.77	110.93	127.57
	Q4220		116.77	110.93	127.57
	Q4221		116.77	110.93	127.57
	Q4222		116.77	110.93	127.57
	Q4224		116.77	110.93	127.57
	Q4225		116.77	110.93	127.57
	Q4227		116.77	110.93	127.57
	Q4229		116.77	110.93	127.57
	Q4232		116.77	110.93	127.57
	Q4234		116.77	110.93	127.57
	Q4235		116.77	110.93	127.57
	Q4236		116.77	110.93	127.57
	Q4237		116.77	110.93	127.57

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	Q4238		116.77	110.93	127.57
	Q4239		116.77	110.93	127.57
	Q4247		116.77	110.93	127.57
	Q4248		116.77	110.93	127.57
	Q4249		116.77	110.93	127.57
	Q4250		116.77	110.93	127.57
	Q4251		116.77	110.93	127.57
	Q4252		116.77	110.93	127.57
	Q4253		116.77	110.93	127.57
	Q4254		116.77	110.93	127.57
	Q4255		116.77	110.93	127.57
	Q4256		116.77	110.93	127.57
	Q4257		116.77	110.93	127.57
	Q4258		116.77	110.93	127.57
	Q4259		116.77	110.93	127.57
	Q4260		116.77	110.93	127.57
	Q4261		116.77	110.93	127.57
	Q4262		116.77	110.93	127.57
	Q4263		116.77	110.93	127.57
	Q4264		116.77	110.93	127.57
	Q4265		116.77	110.93	127.57
	Q4266		116.77	110.93	127.57
	Q4267		116.77	110.93	127.57
	Q4268		116.77	110.93	127.57
	Q4269		116.77	110.93	127.57
	Q4270		116.77	110.93	127.57
	Q4271		116.77	110.93	127.57
	Q4272		116.77	110.93	127.57
	Q4273		116.77	110.93	127.57
	Q4274		116.77	110.93	127.57
	Q4275		116.77	110.93	127.57

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	Q4276		116.77	110.93	127.57
	Q4278		116.77	110.93	127.57
	Q4279		116.77	110.93	127.57
	Q4280		116.77	110.93	127.57
	Q4281		116.77	110.93	127.57
	Q4282		116.77	110.93	127.57
	Q4283		116.77	110.93	127.57
	Q4284		116.77	110.93	127.57
	Q4285		116.77	110.93	127.57
	Q4286		116.77	110.93	127.57
	Q4287		116.77	110.93	127.57
	Q4288		116.77	110.93	127.57
	Q4289		116.77	110.93	127.57
	Q4290		116.77	110.93	127.57
	Q4291		116.77	110.93	127.57
	Q4292		116.77	110.93	127.57
	Q4293		116.77	110.93	127.57
	Q4294		116.77	110.93	127.57
	Q4295		116.77	110.93	127.57
	Q4296		116.77	110.93	127.57
	Q4297		116.77	110.93	127.57
	Q4298		116.77	110.93	127.57
	Q4299		116.77	110.93	127.57
	Q4300		116.77	110.93	127.57
	Q4301		116.77	110.93	127.57
	Q4302		116.77	110.93	127.57
	Q4303		116.77	110.93	127.57
	Q4304		116.77	110.93	127.57
	Q4305		116.77	110.93	127.57
	Q4306		116.77	110.93	127.57
	Q4307		116.77	110.93	127.57

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	Q4308		116.77	110.93	127.57
	Q4309		116.77	110.93	127.57
	Q4311		116.77	110.93	127.57
	Q4312		116.77	110.93	127.57
	Q4313		116.77	110.93	127.57
	Q4314		116.77	110.93	127.57
	Q4315		116.77	110.93	127.57
	Q4316		116.77	110.93	127.57
	Q4317		116.77	110.93	127.57
	Q4318		116.77	110.93	127.57
	Q4319		116.77	110.93	127.57
	Q4320		116.77	110.93	127.57
	Q4321		116.77	110.93	127.57
	Q4322		116.77	110.93	127.57
	Q4323		116.77	110.93	127.57
	Q4324		116.77	110.93	127.57
	Q4325		116.77	110.93	127.57
	Q4326		116.77	110.93	127.57
	Q4327		116.77	110.93	127.57
	Q4328		116.77	110.93	127.57
	Q4329		116.77	110.93	127.57
	Q4330		116.77	110.93	127.57
	Q4331		116.77	110.93	127.57
	Q4332		116.77	110.93	127.57
	Q4333		116.77	110.93	127.57
	Q4334		116.77	110.93	127.57
	Q4335		116.77	110.93	127.57
	Q4336		116.77	110.93	127.57
	Q4337		116.77	110.93	127.57
	Q4338		116.77	110.93	127.57
	Q4339		116.77	110.93	127.57

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	Q4340		116.77	110.93	127.57
	Q4341		116.77	110.93	127.57
	Q4342		116.77	110.93	127.57
	Q4343		116.77	110.93	127.57
	Q4344		116.77	110.93	127.57
	Q4345		116.77	110.93	127.57
	Q4346		116.77	110.93	127.57
	Q4347		116.77	110.93	127.57
	Q4348		116.77	110.93	127.57
	Q4349		116.77	110.93	127.57
	Q4350		116.77	110.93	127.57
	Q4351		116.77	110.93	127.57
	Q4352		116.77	110.93	127.57
	Q4353		116.77	110.93	127.57
	Q4354		116.77	110.93	127.57
	Q4355		116.77	110.93	127.57
	Q4356		116.77	110.93	127.57
	Q4357		116.77	110.93	127.57
	Q4358		116.77	110.93	127.57
	Q4359		116.77	110.93	127.57
	Q4360		116.77	110.93	127.57
	Q4361		116.77	110.93	127.57
	Q4362		116.77	110.93	127.57
	Q4363		116.77	110.93	127.57
	Q4364		116.77	110.93	127.57
	Q4365		116.77	110.93	127.57
	Q4366		116.77	110.93	127.57
	Q4367		116.77	110.93	127.57
	Q4368		116.77	110.93	127.57
	Q4369		116.77	110.93	127.57
	Q4370		116.77	110.93	127.57

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	Q4371		116.77	110.93	127.57
	Q4372		116.77	110.93	127.57
	Q4373		116.77	110.93	127.57
	Q4375		116.77	110.93	127.57
	Q4376		116.77	110.93	127.57
	Q4377		116.77	110.93	127.57
	Q4378		116.77	110.93	127.57
	Q4379		116.77	110.93	127.57
	Q4380		116.77	110.93	127.57
	Q4382		116.77	110.93	127.57
	Q4383		116.77	110.93	127.57
	Q4384		116.77	110.93	127.57
	Q4385		116.77	110.93	127.57
	Q4386		116.77	110.93	127.57
	Q4387		116.77	110.93	127.57
	Q4388		116.77	110.93	127.57
	Q4389		116.77	110.93	127.57
	Q4390		116.77	110.93	127.57
	Q4391		116.77	110.93	127.57
	Q4392		116.77	110.93	127.57
	Q4393		116.77	110.93	127.57
	Q4394		116.77	110.93	127.57
	Q4395		116.77	110.93	127.57
	Q4396		116.77	110.93	127.57
	Q4397		116.77	110.93	127.57
	Q4398		116.77	110.93	127.57
	Q4399		116.77	110.93	127.57
	Q4400		116.77	110.93	127.57
	Q4401		116.77	110.93	127.57
	Q4402		116.77	110.93	127.57
	Q4403		116.77	110.93	127.57

WPS
2026 Quality Payment Program Fee Schedule for Michigan Locality 99
Effective January 1, 2026

All Current Procedural Terminology (CPT) codes and descriptors are copyrighted 2025 by the American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use. Current Dental Terminology copyright © 2002, 2005 American Dental Association. All rights reserved.

Participating Quality Payment Program for Michigan Locality 99 = \$20.51

- THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING
 C - THE PAYMENT FOR THE TECHNICAL COMPONENT IS CAPPED AT THE OPPTS AMOUNT.
 - LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.

NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE
	Q4404		116.77	110.93	127.57
	Q4405		116.77	110.93	127.57
	Q4406		116.77	110.93	127.57
	Q4407		116.77	110.93	127.57
	Q4408		116.77	110.93	127.57
	Q4409		116.77	110.93	127.57
	Q4410		116.77	110.93	127.57
	Q4411		116.77	110.93	127.57
	Q4412		116.77	110.93	127.57
	Q4413		116.77	110.93	127.57
	Q4414		116.77	110.93	127.57
	Q4415		116.77	110.93	127.57
	Q4416		116.77	110.93	127.57
	Q4417		116.77	110.93	127.57
	Q4420		116.77	110.93	127.57