

1.1 **Department of Labor and Industry**

1.2 **Adopted Exempt Permanent Rules Relating to Workers' Compensation: 2025**
1.3 **Adjustments to Relative Value Fee Schedule Conversion Factors and Amendments to**
1.4 **Rules Implementing the Workers' Compensation Relative Value Fee Schedule Tables**
1.5 **in Minnesota Rules, Chapter 5221**

1.6 **5221.4020 DETERMINING FEE SCHEDULE PAYMENT LIMITS.**

1.7 *[For text of subparts 1 and 1a, see Minnesota Rules]*

1.8 Subp. 1b. **Conversion factors and maximum fee formulas.**

1.9 *[For text of item A, see Minnesota Rules]*

1.10 B. The conversion factors for services, articles, and supplies included in parts
1.11 5221.4030 to 5221.4061 are as provided in Minnesota Statutes, section 176.136, subdivision
1.12 1a, as follows:

1.13 *[For text of subitems (1) to (13), see Minnesota Rules]*

1.14 (14) for dates of service from October 1, 2023, to September 30, 2024, the
1.15 conversion factors are:

1.16 *[For text of units (a) to (c), see Minnesota Rules]*

1.17 (d) for chiropractic services identified by procedure codes described in
1.18 part 5221.4060, subpart 2d: \$52.27; and

1.19 (15) for dates of service from October 1, 2024, to September 30, 2025, the
1.20 conversion factors are:

1.21 *[For text of units (a) to (c), see Minnesota Rules]*

1.22 (d) for chiropractic services identified by procedure codes described in
1.23 part 5221.4060, subpart 2d: \$52.54.; and

2.1 (16) for dates of service from October 1, 2025, to September 30, 2026, the
2.2 conversion factors are:

2.3 (a) for medical/surgical services identified by procedure codes described
2.4 in part 5221.4030, subpart 3: \$67.29;

2.5 (b) for pathology and laboratory services identified by procedure codes
2.6 described in part 5221.4040, subpart 3: \$59.91;

2.7 (c) for physical medicine and rehabilitation services identified by
2.8 procedure codes described in part 5221.4050, subpart 2d: \$60.56; and

2.9 (d) for chiropractic services identified by procedure codes described in
2.10 part 5221.4060, subpart 2d: \$52.15.

2.11 Subp. 1c. **Sample calculation.** The following is a sample calculation for determining
2.12 the maximum fee, excluding any applicable adjustments in parts 5221.4030 to 5221.4061,
2.13 for a new patient office examination between 15 and 29 minutes (procedure code 99202)
2.14 in a clinic based on the 2022 2025 National Physician Fee Schedule Relative Value July
2.15 Release:

$$\begin{aligned} & .93 \underline{0.93} [\text{Work RVU } (.93)(0.93) * \text{Work Geographic PCI (1)}] \\ & + \underline{1.1346} \underline{1.189} [\text{Nonfacility PE RVU } (1.12)(1.16) * \text{PE GPCI } (1.013)(1.025)] \\ & + \underline{.0318} \underline{0.021} [\text{MP RVU } (.09)(0.07) * \text{MP GPCI } (.353)(0.3)] \\ & = \underline{2.0964} \underline{2.14} [\text{Total RVU}] \\ & * \$60.00 [\text{Conversion factor for example only}] \\ & = \$125.784 \underline{\$128.40} [\text{Maximum fee}] \\ & = \$125.78 \underline{\$128.40} [\text{Maximum fee, rounded}] \end{aligned}$$

2.23 *[For text of subparts 2 to 4, see Minnesota Rules]*

2.24 **5221.4030 MEDICAL/SURGICAL PROCEDURE CODES.**

2.25 *[For text of subparts 1 to 2b, see Minnesota Rules]*

3.1 **Subp. 3. List of medical/surgical procedure codes.** The medical/surgical conversion
3.2 factor in part 5221.4020, subpart 1b, item B, for the applicable date of service applies to
3.3 the health care providers listed in part 5221.0700, subpart 3, item C, subitem (2), when they
3.4 provide services, articles, or supplies identified by a procedure code in the Medicare
3.5 Physician Fee Schedule tables described in part 5221.4005, except for:

3.6 A. Pathology and laboratory procedure codes described in part 5221.4040, subpart
3.7 3;

3.8 B. Physical medicine and rehabilitation procedure codes described in part
3.9 5221.4050, subpart 2d, item A; and

3.10 C. Chiropractic procedure codes ~~98940, 98941, 98942, and 98943~~ described in
3.11 part 5221.4060, subpart 2d, item D.

3.12 **5221.4033 OUTPATIENT LIMITATION FOR MEDICAL/SURGICAL FACILITY
3.13 FEE.**

3.14 *[For text of subparts 1 to 2a, see Minnesota Rules]*

3.15 **Subp. 2b. Procedure codes subject to limitation.**

3.16 A. Surgery: Integumentary system:

3.17 CPT/HCPSCS	3.18 Procedure Code	3.18 CPT/HCPSCS Description
3.19 10040		Acne surgery
3.20 10060		Drainage of skin abscess
3.21 10061		Drainage of skin abscess
3.22 10080		Drainage of pilonidal cyst
3.23 10081		Drainage of pilonidal cyst
3.24 10120		Remove foreign body
3.25 10121		Remove foreign body
3.26 10140		Drainage of hematoma/fluid

4.1	10160	Puncture drainage of lesion
4.2	11000	Surgical cleansing of skin
4.3	11001	Additional cleansing of skin
4.4	11200	Removal of skin tags
4.5	11201	Removal of added skin tags
4.6	11300	Shave skin lesion
4.7	11301	Shave skin lesion
4.8	11302	Shave skin lesion
4.9	11303	Shave skin lesion
4.10	11305	Shave skin lesion
4.11	11306	Shave skin lesion
4.12	11307	Shave skin lesion
4.13	11308	Shave skin lesion
4.14	11310	Shave skin lesion
4.15	11311	Shave skin lesion
4.16	11312	Shave skin lesion
4.17	11313	Shave skin lesion
4.18	11400	Removal of skin lesion
4.19	11401	Removal of skin lesion
4.20	11402	Removal of skin lesion
4.21	11403	Removal of skin lesion
4.22	11420	Removal of skin lesion
4.23	11421	Removal of skin lesion
4.24	11422	Removal of skin lesion
4.25	11423	Removal of skin lesion
4.26	11440	Removal of skin lesion
4.27	11441	Removal of skin lesion
4.28	11442	Removal of skin lesion
4.29	11443	Removal of skin lesion

5.1	11600	Removal of skin lesion
5.2	11601	Removal of skin lesion
5.3	11602	Removal of skin lesion
5.4	11603	Removal of skin lesion
5.5	11620	Removal of skin lesion
5.6	11621	Removal of skin lesion
5.7	11622	Removal of skin lesion
5.8	11623	Removal of skin lesion
5.9	11640	Removal of skin lesion
5.10	11641	Removal of skin lesion
5.11	11642	Removal of skin lesion
5.12	11643	Removal of skin lesion
5.13	11730	Removal of nail plate
5.14	11732	Remove additional nail plate
5.15	11740	Drain blood from under nail
5.16	11750	Removal of nail bed
5.17	11752	Remove nail bed/finger tip
5.18	11760	Reconstruction of nail bed
5.19	11762	Reconstruction of nail bed
5.20	11765	Excision of nail fold, toe
5.21	11900	Injection into skin lesions
5.22	11901	Added skin lesion injections
5.23	12031	Layer closure of wound(s)
5.24	12032	Layer closure of wound(s)
5.25	12041	Layer closure of wound(s)
5.26	12042	Layer closure of wound(s)
5.27	12051	Layer closure of wound(s)
5.28	12052	Layer closure of wound(s)
5.29	15780	Abrasion treatment of skin

6.1	15781	Abrasion treatment of skin
6.2	15782	Abrasion treatment of skin
6.3	15783	Abrasion treatment of skin
6.4	15786	Abrasion treatment of lesion
6.5	15787	Abrasion, added skin lesions
6.6	15851	Removal of sutures
6.7	15852	Dressing change, not for burn
6.8	16000	Initial treatment of burn(s)
6.9	16020	Treatment of burn(s)
6.10	16025	Treatment of burn(s)
6.11	17000	Destroy benign/premal lesion
6.12	17106	Destruction of skin lesions
6.13	17107	Destruction of skin lesions
6.14	17110	Destruction of skin lesions
6.15	17250	Chemical cautery, tissue
6.16	17260	Destruction of skin lesions
6.17	17261	Destruction of skin lesions
6.18	17262	Destruction of skin lesions
6.19	17263	Destruction of skin lesions
6.20	17264	Destruction of skin lesions
6.21	17266	Destruction of skin lesions
6.22	17270	Destruction of skin lesions
6.23	17271	Destruction of skin lesions
6.24	17272	Destruction of skin lesions
6.25	17273	Destruction of skin lesions
6.26	17274	Destruction of skin lesions
6.27	17276	Destruction of skin lesions
6.28	17280	Destruction of skin lesions
6.29	17281	Destruction of skin lesions

7.1	17282	Destruction of skin lesions
7.2	17283	Destruction of skin lesions
7.3	17284	Destruction of skin lesions
7.4	17286	Destruction of skin lesions
7.5	17340	Cryotherapy of skin
7.6	17360	Skin peel therapy
7.7	19000	Drainage of breast lesion
7.8	19001	Drain added breast lesion

7.9 **B. Surgery: Musculoskeletal system:**

7.10	<u>CPT/HCPGS</u>	
7.11	<u>Procedure Code</u>	<u>CPT/HCPGS Description</u>
7.12	20500	Injection of sinus tract
7.13	20520	Removal of foreign body
7.14	20550	Inject tendon/ligament/cyst
7.15	20600	Drain/inject joint/bursa
7.16	20605	Drain/inject joint/bursa
7.17	20610	Drain/inject joint/bursa
7.18	20615	Treatment of bone cyst
7.19	20974	Electrical bone stimulation
7.20	21029	Contour of face bone lesion
7.21	21030	Removal of face bone lesion
7.22	21031	Remove exostosis, mandible
7.23	21032	Remove exostosis, maxilla
7.24	21079	Prepare face/oral prosthesis
7.25	21080	Prepare face/oral prosthesis
7.26	21081	Prepare face/oral prosthesis
7.27	21082	Prepare face/oral prosthesis
7.28	21083	Prepare face/oral prosthesis

8.1	21084	Prepare face/oral prosthesis
8.2	21085	Prepare face/oral prosthesis
8.3	21086	Prepare face/oral prosthesis
8.4	21087	Prepare face/oral prosthesis
8.5	21088	Prepare face/oral prosthesis
8.6	21089	Prepare face/oral prosthesis
8.7	21110	Interdental fixation
8.8	23031	Drain shoulder bursa
8.9	24200	Removal of arm foreign body
8.10	24650	Treat radius fracture
8.11	25500	Treat fracture of radius
8.12	25530	Treat fracture of ulna
8.13	25600	Treat fracture radius/ulna
8.14	25622	Treat wrist bone fracture
8.15	25630	Treat wrist bone fracture
8.16	25650	Repair wrist bone fracture
8.17	26010	Drainage of finger abscess
8.18	26600	Treat metacarpal fracture
8.19	26720	Treat finger fracture, each
8.20	26725	Treat finger fracture, each
8.21	26740	Treat finger fracture, each
8.22	28001	Drainage of bursa of foot
8.23	28010	Incision of toe tendon
8.24	28011	Incision of toe tendons
8.25	28022	Exploration of a foot joint
8.26	28024	Exploration of a toe joint
8.27	28052	Biopsy of foot joint lining
8.28	28108	Removal of toe lesions
8.29	28124	Partial removal of toe

9.1	28126	Partial removal of toe
9.2	28153	Partial removal of toe
9.3	28160	Partial removal of toe
9.4	28190	Removal of foot foreign body
9.5	28220	Release of foot tendon
9.6	28230	Incision of foot tendon(s)
9.7	28232	Incision of toe tendon
9.8	28234	Incision of foot tendon
9.9	28270	Release of foot contracture
9.10	28272	Release of toe joint, each
9.11	28430	Treatment of ankle fracture
9.12	28450	Treat midfoot fracture, each
9.13	28455	Treat midfoot fracture, each
9.14	28470	Treat metatarsal fracture
9.15	28475	Treat metatarsal fracture
9.16	28490	Treat big toe fracture
9.17	28495	Treat big toe fracture
9.18	28510	Treatment of toe fracture
9.19	28515	Treatment of toe fracture
9.20	28530	Treat sesamoid bone fracture
9.21	28540	Treat foot dislocation
9.22	28570	Treat foot dislocation
9.23	28600	Treat foot dislocation
9.24	28630	Treat toe dislocation
9.25	29015	Application of body cast
9.26	29035	Application of body cast
9.27	29049	Application of shoulder cast
9.28	29065	Application of long arm cast
9.29	29075	Application of forearm cast

10.1	29085	Apply hand/wrist cast
10.2	29105	Apply long arm splint
10.3	29125	Apply forearm splint
10.4	29126	Apply forearm splint
10.5	29130	Application of finger splint
10.6	29131	Application of finger splint
10.7	29200	Strapping of chest
10.8	29260	Strapping of elbow or wrist
10.9	29280	Strapping of hand or finger
10.10	29345	Application of long leg cast
10.11	29355	Application of long leg cast
10.12	29358	Apply long leg cast brace
10.13	29365	Application of long leg cast
10.14	29405	Apply short leg cast
10.15	29425	Apply short leg cast
10.16	29435	Apply short leg cast
10.17	29440	Addition of walker to cast
10.18	29450	Application of leg cast
10.19	29515	Application lower leg splint
10.20	29520	Strapping of hip
10.21	29530	Strapping of knee
10.22	29540	Strapping of ankle
10.23	29550	Strapping of toes
10.24	29580	Application of paste boot
10.25	29700	Removal/revision of cast
10.26	29705	Removal/revision of cast
10.27	29710	Removal/revision of cast
10.28	29720	Repair of body cast
10.29	29730	Windowing of cast

- 11.1 29740 Wedging of cast
 11.2 29750 Wedging of clubfoot cast
 11.3 29850 Knee arthroscopy/surgery

11.4 C. Surgery: Respiratory, cardiovascular, hemic and lymphatic systems:

11.5	<u>CPT/HCPCS</u>	
11.6	<u>Procedure Code</u>	<u>CPT/HCPCS Description</u>
11.7	30000	Drainage of nose lesion
11.8	30020	Drainage of nose lesion
11.9	30100	Intranasal biopsy
11.10	30110	Removal of nose polyp(s)
11.11	30200	Injection treatment of nose
11.12	30210	Nasal sinus therapy
11.13	30220	Insert nasal septal button
11.14	30300	Remove nasal foreign body
11.15	30901	Control of nosebleed
11.16	31000	Irrigation maxillary sinus
11.17	31002	Irrigation sphenoid sinus
11.18	31505	Diagnostic laryngoscopy
11.19	31575	Diagnostic laryngoscopy
11.20	31579	Diagnostic laryngoscopy
11.21	36000	Place needle in vein
11.22	36400	Drawing blood
11.23	36405	Drawing blood
11.24	36406	Drawing blood
11.25	36410	Drawing blood
11.26	36430	Blood transfusion service
11.27	36450	Exchange transfusion service
11.28	36470	Injection therapy of vein

- 12.1 36471 Injection therapy of veins
12.2 36510 Insertion of catheter, vein

12.3 **D. Surgery: Digestive system:**

12.4	<u>CPT/HCPGS</u>	
12.5	<u>Procedure Code</u>	<u>CPT/HCPGS Description</u>
12.6	40490	Biopsy of lip
12.7	40800	Drainage of mouth lesion
12.8	40804	Removal foreign body, mouth
12.9	40808	Biopsy of mouth lesion
12.10	40810	Excision of mouth lesion
12.11	40812	Excise/repair mouth lesion
12.12	41100	Biopsy of tongue
12.13	41108	Biopsy of floor of mouth
12.14	41825	Excision of gum lesion
12.15	41826	Excision of gum lesion
12.16	42100	Biopsy roof of mouth
12.17	42330	Removal of salivary stone
12.18	42400	Biopsy of salivary gland
12.19	42650	Dilation of salivary duct
12.20	42660	Dilation of salivary duct
12.21	42800	Biopsy of throat
12.22	45300	Proctosigmoidoscopy
12.23	45303	Proctosigmoidoscopy
12.24	45330	Sigmoidoscopy, diagnostic
12.25	45520	Treatment of rectal prolapse
12.26	46083	Incise external hemorrhoid
12.27	46221	Ligation of hemorrhoid(s)
12.28	46230	Removal of anal tabs

13.1	46320	Removal of hemorrhoid clot
13.2	46500	Injection into hemorrhoids
13.3	46600	Diagnostic anoscopy
13.4	46604	Anoscopy and dilation
13.5	46606	Anoscopy and biopsy
13.6	46614	Anoscopy, control bleeding
13.7	46615	Anoscopy
13.8	46900	Destruction, anal lesion(s)
13.9	46910	Destruction, anal lesion(s)
13.10	46916	Cryosurgery, anal lesion(s)
13.11	46917	Laser surgery, anal lesion(s)
13.12	46940	Treatment of anal fissure
13.13	46942	Treatment of anal fissure
13.14	46945	Ligation of hemorrhoids
13.15	46946	Ligation of hemorrhoids

13.16 E. Surgery: Urinary, male genital, female genital, maternity care and delivery systems:

13.18	<u>CPT/HCPSCS</u>	
13.19	<u>Procedure Code</u>	<u>CPT/HCPSCS Description</u>
13.20	51700	Irrigation of bladder
13.21	51705	Change of bladder tube
13.22	51720	Treatment of bladder lesion
13.23	52265	Cystoscopy and treatment
13.24	53270	Removal of urethra gland
13.25	53600	Dilate urethra stricture
13.26	53601	Dilate urethra stricture
13.27	53620	Dilate urethra stricture
13.28	53621	Dilate urethra stricture

14.1	53660	Dilation of urethra
14.2	53661	Dilation of urethra
14.3	54050	Destruction, penis lesion(s)
14.4	54055	Destruction, penis lesion(s)
14.5	54056	Cryosurgery, penis lesion(s)
14.6	54200	Treatment of penis lesion
14.7	54230	Prepare penis study
14.8	54235	Penile injection
14.9	55000	Drainage of hydrocele
14.10	55250	Removal of sperm duct(s)
14.11	56420	Drainage of gland abscess
14.12	56501	Destruction, vulva lesion(s)
14.13	56606	Biopsy of vulva/perineum
14.14	57061	Destruction, vagina lesion(s)
14.15	57100	Biopsy of vagina
14.16	57150	Treat vagina infection
14.17	57160	Insertion of pessary
14.18	57170	Fitting of diaphragm/cap
14.19	57452	Examination of vagina
14.20	57454	Vagina examination and biopsy
14.21	57460	LEEP procedure
14.22	57500	Biopsy of cervix
14.23	57505	Endocervical curettage
14.24	57510	Cauterization of cervix
14.25	57511	Cryocautery of cervix
14.26	58100	Biopsy of uterus lining
14.27	58301	Remove intrauterine device
14.28	59200	Insert cervical dilator
14.29	59300	Episiotomy or vaginal repair

- 15.1 59425 Antepartum care only
 15.2 59426 Antepartum care only
 15.3 59430 Care after delivery

15.4 F. Surgery: Endocrine, nervous, eye and ocular adnexa, and auditory systems:

15.5	<u>CPT/HCPCS</u>	
15.6	<u>Procedure Code</u>	<u>CPT/HCPCS Description</u>
15.7	60100	Biopsy of thyroid
15.8	61001	Remove cranial cavity fluid
15.9	64400	Injection for nerve block
15.10	64405	Injection for nerve block
15.11	64408	Injection for nerve block
15.12	64418	Injection for nerve block
15.13	64435	Injection for nerve block
15.14	64445	Injection for nerve block
15.15	64450	Injection for nerve block
15.16	64505	Injection for nerve block
15.17	64553	Implant neuroelectrodes
15.18	64555	Implant neuroelectrodes
15.19	64612	Destroy nerve, face muscle
15.20	65205	Remove foreign body from eye
15.21	65210	Remove foreign body from eye
15.22	65220	Remove foreign body from eye
15.23	65222	Remove foreign body from eye
15.24	65286	Repair of eye wound
15.25	65430	Corneal smear
15.26	65435	Curette/treat cornea
15.27	65436	Curette/treat cornea
15.28	65600	Revision of cornea

16.1	65772	Correction of astigmatism
16.2	65855	Laser surgery of eye
16.3	65860	Incise inner eye adhesions
16.4	66761	Revision of iris
16.5	66770	Removal of inner eye lesion
16.6	67145	Treatment of retina
16.7	67210	Treatment of retinal lesion
16.8	67228	Treatment of retinal lesion
16.9	67345	Destroy nerve of eye muscle
16.10	67505	Inject/treat eye socket
16.11	67515	Inject/treat eye socket
16.12	67700	Drainage of eyelid abscess
16.13	67710	Incision of eyelid
16.14	67800	Remove eyelid lesion
16.15	67801	Remove eyelid lesions
16.16	67805	Remove eyelid lesions
16.17	67810	Biopsy of eyelid
16.18	67820	Revise eyelashes
16.19	67825	Revise eyelashes
16.20	67840	Remove eyelid lesion
16.21	67850	Treat eyelid lesion
16.22	67915	Repair eyelid defect
16.23	67922	Repair eyelid defect
16.24	67930	Repair eyelid wound
16.25	67938	Remove eyelid foreign body
16.26	68020	Incise/drain eyelid lining
16.27	68040	Treatment of eyelid lesions
16.28	68100	Biopsy of eyelid lining
16.29	68110	Remove eyelid lining lesion

17.1	68135	Remove eyelid lining lesion
17.2	68200	Treat eyelid by injection
17.3	68400	Incise/drain tear gland
17.4	68420	Incise/drain tear sac
17.5	68440	Incise tear duct opening
17.6	68530	Clearance of tear duct
17.7	68705	Revise tear duct opening
17.8	68760	Close tear duct opening
17.9	68761	Close tear duct opening
17.10	68770	Close tear system fistula
17.11	68840	Explore/irrigate tear ducts
17.12	69000	Drain external ear lesion
17.13	69005	Drain external ear lesion
17.14	69020	Drain outer ear canal lesion
17.15	69100	Biopsy of external ear
17.16	69105	Biopsy of external ear canal
17.17	69200	Clear outer ear canal
17.18	69210	Remove impacted ear wax
17.19	69220	Clean out mastoid cavity
17.20	69222	Clean out mastoid cavity
17.21	69420	Incision of eardrum
17.22	69433	Create eardrum opening
17.23	69540	Remove ear lesion
17.24	69610	Repair of eardrum

17.25 G. Medicine, evaluation and management services:

17.26	<u>CPT/HCPCS</u>	
17.27	<u>Procedure Code</u>	<u>CPT/HCPCS Description</u>

17.28	92002	Eye exam, new patient
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18.1	92004	Eye exam, new patient
18.2	92012	Eye exam, established patient
18.3	92014	Eye exam and treatment
18.4	92019	Eye exam and treatment
18.5	92020	Special eye evaluation
18.6	92100	Serial tonometry exam(s)
18.7	92230	Eye exam with photos
18.8	92260	Ophthalmoscopy/dynamometry
18.9	92287	Internal eye photography
18.10	92311	Contact lens fitting
18.11	92312	Contact lens fitting
18.12	92313	Contact lens fitting
18.13	92315	Prescription of contact lens
18.14	92316	Prescription of contact lens
18.15	92317	Prescription of contact lens
18.16	92352	Special spectacles fitting
18.17	92353	Special spectacles fitting
18.18	92354	Special spectacles fitting
18.19	92371	Repair and adjust spectacles
18.20	92504	Ear microscopy examination
18.21	92507	Speech/hearing therapy
18.22	92508	Speech/hearing therapy
18.23	92511	Nasopharyngoscopy
18.24	92512	Nasal function studies
18.25	92516	Facial nerve function test
18.26	92520	Laryngeal function studies
18.27	92565	Stenger test, pure tone
18.28	92571	Filtered speech hearing test
18.29	92575	Sensorineural acuity test

19.1	92576	Synthetic sentence test
19.2	92577	Stenger test, speech
19.3	92582	Conditioning play audiometry
19.4	93797	Cardiac rehab
19.5	93798	Cardiac rehab/monitor
19.6	95056	Photosensitivity tests
19.7	95065	Nose allergy test
19.8	95144	Antigen therapy services
19.9	95145	Antigen therapy services
19.10	95146	Antigen therapy services
19.11	95147	Antigen therapy services
19.12	95148	Antigen therapy services
19.13	95149	Antigen therapy services
19.14	95165	Antigen therapy services
19.15	95170	Antigen therapy services
19.16	95180	Rapid desensitization
19.17	95851	Range of motion measurements
19.18	95852	Range of motion measurements
19.19	95857	Tensilon test
19.20	96405	Intralesional chemotherapy administration
19.21	96406	Intralesional chemotherapy administration
19.22	96450	Chemotherapy, into central nervous system
19.23	96542	Chemotherapy injection
19.24	98940	Chiropractor manip of spine
19.25	98941	Chiropractor manip of spine
19.26	98942	Chiropractor manip of spine
19.27	98943	Chiropractor manip extra spinal
19.28	99202	Office/outpatient visit, new
19.29	99203	Office/outpatient visit, new

20.1	99204	Office/outpatient visit, new
20.2	99205	Office/outpatient visit, new
20.3	99211	Office/outpatient visit, established
20.4	99212	Office/outpatient visit, established
20.5	99213	Office/outpatient visit, established
20.6	99214	Office/outpatient visit, established
20.7	99215	Office/outpatient visit, established
20.8	99241	Office consultation
20.9	99242	Office consultation
20.10	99243	Office consultation
20.11	99244	Office consultation
20.12	99245	Office consultation
20.13	99354	Prolonged service, office
20.14	99355	Prolonged service, office

20.15 5221.4050 PHYSICAL MEDICINE AND REHABILITATION PROCEDURE CODES.

20.16 *[For text of subparts 1 to 2c, see Minnesota Rules]*

20.17 Subp. 2d. **List of physical medicine and rehabilitation procedure codes.** The
20.18 physical medicine and rehabilitation conversion factor in part 5221.4020, subpart 1b, item
20.19 B, applies to the health care providers listed in part 5221.0700, subpart 3, item C, subitem
20.20 (4), when they provide, within their scope of practice, the services, articles, or supplies
20.21 identified by any of the following procedure codes in the Medicare Physician Fee Schedule
20.22 tables described in part 5221.4005:

20.23 A. physical medicine and rehabilitation procedure codes from 97010 through to
20.24 97799, 97810 through to 97814, 98960 through to 98981, and V5336 to V5364 in the
20.25 Medicare Physician Fee Schedule tables described in part 5221.4005.; and

20.26 B. procedure codes 95992, 99199, and G0283.

21.1 *[For text of subpart 3, see Minnesota Rules]*

21.2 **5221.4060 CHIROPRACTIC PROCEDURE CODES.**

21.3 *[For text of subparts 1 to 2c, see Minnesota Rules]*

21.4 Subp. 2d. **List of chiropractic procedure codes.** The chiropractic conversion factor
21.5 in part 5221.4020, subpart 1b, item B, applies to the health care providers listed in part
21.6 5221.0700, subpart 3, item C, subitem (5), when they provide, within their scope of practice,
21.7 services, articles, or supplies identified by any of the following procedure codes in the
21.8 Medicare Physician Fee Schedule tables described in part 5221.4005:

21.9 *[For text of items A to E, see Minnesota Rules]*

21.10 F. procedure code 99199 (special service) and G0283; and

21.11 G. acupuncture codes 97810 to 97814.

21.12 *[For text of subparts 3 and 4, see Minnesota Rules]*

21.13 **EFFECTIVE DATE.** The amendments to Minnesota Rules, parts 5221.4020, 5221.4030,
21.14 5221.4033, 5221.4050, and 5221.4060, are effective for services provided on or after October
21.15 1, 2025.

Office of the Revisor of Statutes

Administrative Rules



TITLE: Adopted Exempt Permanent Rules Relating to Workers' Compensation: 2025 Adjustments to Relative Value Fee Schedule Conversion Factors and Amendments to Rules Implementing the Workers' Compensation Relative Value Fee Schedule Tables in Minnesota Rules, Chapter 5221

AGENCY: Department of Labor and Industry

REVISOR ID: R-4951

MINNESOTA RULES: Chapter 5221

The attached rules are approved as to form

A handwritten signature in black ink, appearing to read "Sheree Speer".

Sheree Speer
Chief Deputy Revisor