

Description	Cash Price	Cpt
MONOTEST	\$ 7.20	86308
BETA STREP (GRB) ANTIGEN	\$ 16.65	87802
INFECTIOUS AG DIRECT OBS FLU	\$ 20.00	87804
RSV ASSAY W/OPTIC	\$ 20.50	87807
STREP-DIRECT ANTIGEN GRP A	\$ 21.00	87880
ELECTROCARDIOGRAM INTERPRET	\$ 15.00	93010
BRIEF EMOTIONAL/BEHAV ASSMT	\$ 6.70	96127
NEW PT LVL 2 EXP FOCUS	\$ 95.50	99202
NEW PT LVL 3 DETAILED	\$ 138.50	99203
NEW PT LVL 4 COMP MOD	\$ 211.50	99204
NEW PT LVL 5 COMP HIGH	\$ 267.00	99205
ESTABLISH PT LVL 1	\$ 27.00	99211
ESTABLISH PT LVL 2 FOCUS STFD	\$ 55.50	99212
ESTABLISH PT LVL 3 EXP FOCUS	\$ 92.50	99213
ESTABLISH PT LVL 4 DETAILED	\$ 136.50	99214
ESTABLISH PT LVL 5 COMP HIGH	\$ 184.50	99215
OBSERVATION CARE DISCHARGE	\$ 94.50	99217
INITIAL OBS CARE DETAILED/COMP	\$ 131.00	99218
INITIAL OBSERVATION CARE MOD	\$ 177.00	99219
INITIAL OBSERVATION CARE HIGH	\$ 242.00	99220
INITIAL ADMIT LOW	\$ 134.00	99221
INITIAL ADMIT MODERATE	\$ 179.00	99222
INITIAL ADMIT HIGH	\$ 264.00	99223
SUBSEQUENT OBS STRTFWD	\$ 36.00	99224
SUBSEQUENT OBS MOD	\$ 95.00	99225
SUBSEQUENT OBS HIGH	\$ 94.00	99226
SUBSQ HOSPITAL CARE LOW	\$ 51.50	99231
SUBSQ HOSPITAL CARE MODERATE	\$ 95.00	99232
SUBSQ HOSPITAL CARE HIGH	\$ 135.50	99233
OBSERV/HOSP SAME DATE	\$ 174.25	99234
OBS/INPT HOSP CARE MODERATE	\$ 220.00	99235
OBSERV/HOSP SAME DATE	\$ 272.70	99236
HOSPITAL DISCHARGE 30 MINUTES	\$ 94.50	99238
HOSP DISCH DAY MNGMT > 30 MIN	\$ 139.00	99239
OFFICE CONSULT SELF LIMITED	\$ 63.45	99241
OFFICE CONSULT LOW	\$ 106.05	99242
OFFICE CONSULT MODERATE	\$ 151.85	99243
OFFICE CONSULT MOD/HIGH	\$ 231.40	99244
OFFICE CONSULT HIGH	\$ 291.35	99245
IP CONSULT SELF LIMITING MINOR	\$ 45.00	99251
IP CONSULT LOW	\$ 67.50	99252
IP CONSULT MODERATE	\$ 102.50	99253
IP CONSULT MODERATE HIGH	\$ 145.00	99254
IP CONSULT HIGH	\$ 177.50	99255
EMERGENCY DEPT VISIT LEVEL 1	\$ 14.00	99281
EMERGENCY DEPT VISIT LEVEL 2	\$ 35.00	99282
EMERGENCY DEPT VISIT LEVEL 3	\$ 82.50	99283

EMERGENCY DEPT VISIT LEVEL 4	\$	71.75	99284
E.R. PHYSICIAN - LEVEL V	\$	236.45	99285
CRITICAL CARE FIRST HOUR	\$	357.45	99291
CRITICAL CARE ADD'L 1/2 HOUR	\$	142.95	99292
INITIAL NRSNG FAC CARE - LOW	\$	118.00	99304
INITIAL NRSNG FAC CARE - MOD	\$	168.00	99305
INIT NRSNG FAC CARE - HIGH ECHO	\$	215.00	99306
SUBS NRSNG FAC STABLE RECOVERNG	\$	57.50	99307
SUBS NRSNG FAC MINOR COMPLIC	\$	89.00	99308
SUBS NRSNG FAC COMPLIC NEW PROB	\$	118.00	99309
SUBS NRSNG FAC UNSTBL NEW PROB	\$	105.00	99310
NRSNG FAC DISCHARGE <30 MINUTES	\$	94.00	99315
NRSNG FAC DISCHARGE >30 MIN	\$	134.95	99316
ANNUAL NRSNG FAC ASSESS	\$	75.00	99318
HOME VISIT EST PT LIMIT 15MIN	\$	69.75	99347
HOME VISIT EST PT LOW-MOD25MIN	\$	108.00	99348
HOME VISIT EST PT MOD-HI 40MIN	\$	164.75	99349
HOME VST EST UNSTABLE/NEW60MIN	\$	231.25	99350
INIT COMPREHENS PREVENTATIVE	\$	110.00	99381
NEW PT COMP PREV AGES 1 - 4	\$	87.50	99382
NEW PT COMP PREV AGES 5 - 11	\$	135.00	99383
NEW PT COMP PREV AGES 12 - 17	\$	110.00	99384
NEW PT COMP PREV AGES 18 - 39	\$	110.00	99385
NEW PT COMP PREV AGES 40 - 64	\$	120.00	99386
NEW PT COMP PREV AGES 65+	\$	135.00	99387
PREVENT MED/ESTAB PT INFANT	\$	95.00	99391
PREVENT MED/ESTAB PT AGE 1-4	\$	107.50	99392
PREV MED EST PT AGE 5-11	\$	107.50	99393
PREV MED EST PT AGE 12-17	\$	65.00	99394
PREVENT MED/ESTAB PT AGE 18-39	\$	90.00	99395
PREVENT MED/ESTAB PT AGE 40-64	\$	100.00	99396
PREVENT MED/ESTAB PT AGE 64+	\$	110.00	99397
PREVENTIVE COUNSEL INDIV 15MIN	\$	-	99401
PREVENTIVE COUNSEL INDIV 30MIN	\$	-	99402
PREVENTIVE COUNSEL INDIV 45MIN	\$	-	99403
PREVENTIVE COUNSEL INDIV 60MIN	\$	138.00	99404
SMOKE/TOBACCO COUNSEL 3-10MIN	\$	19.50	99406
SMOKE/TOBAC CESATION INTEN>10M	\$	36.50	99407
PREVENT MED COUNSEL GRP 30 MIN	\$	-	99411
PREVENT MED COUNSEL GRP 60 MIN	\$	-	99412
PROLONGED SERVICES	\$	38.05	99417
OL DIG E/M SVC 5-10 MIN	\$	17.00	99421
OL DIG E/M SVC 11-20 MIN	\$	35.50	99422
OL DIG E/M SVC 21+ MIN	\$	56.50	99423
UNLISTED PREVENTVE MED SERVICE	\$	-	99429
PHONE MD E/M EST 5-10 MIN	\$	17.00	99441
PHONE MD E/M EST 11-20 MIN	\$	34.50	99442
PHONE MD E/M EST 21-30 MIN	\$	51.00	99443

WORK COMP EVALUATION	\$	175.00	99455
DISABILITY EXAMINATION	\$	-	99456
INIT NB EM PER DAY HOSP	\$	127.50	99460
SBSQ NB EM PER DAY HOSP	\$	54.50	99462
SELF-MEAS BP PT EDUCAJ/TRAIN	\$	13.50	99473
SELF-MEAS BP 2 READG BID 30DAY	\$	11.50	99474
ASSMT & CARE PLN PT COG IMP	\$	234.75	99483
TRANS CARE MGMT 14 DAY DISCH	\$	157.75	99495
TRANS CARE MGMT 7 DAY DISCH	\$	208.75	99496
ADVNC D CARE PLAN 30 MIN	\$	101.75	99497
ADVNC D CARE PLAN ADDL 30 MIN	\$	96.00	99498