

Frequently Billed Services

CPT Code	Description	Billed Charge	Average Commercial Insurance Allowed	Medicare	Medical Assistance	
99211	Level 1 Established Patient Office Visit	\$59.80	NA	\$23.02	\$16.87	Evaluation & Management
99212	Level 2 Established Patient Office Visit	\$117.76	\$85.35	\$56.15	\$41.04	
99213	Level 3 Established Patient Office Visit	\$194.12	\$139.91	\$90.78	\$66.22	
99214	Level 4 Established Patient Office Visit	\$281.52	\$202.67	\$128.81	\$94.17	
99215	Level 5 Established Patient Office Visit	\$378.12	\$276.44	\$179.46	\$131.43	
99202	Level 2 New Patient Office Visit	\$196.88	\$136.50	\$68.82	\$52.62	
99203	Level 3 New Patient Office Visit	\$278.76	\$203.03	\$105.50	\$80.57	
99204	Level 4 New Patient Office Visit	\$425.96	\$297.92	\$157.38	\$120.61	
99205	Level 5 New Patient Office Visit	\$538.20	\$372.05	\$207.62	\$159.38	
99381	New Preventive Visit, Age < 1 year	\$283.36	\$203.03	\$110.14	\$80.32	
99382	New Preventive Visit, Age 1-4 years	\$295.68	\$201.21	\$115.05	\$83.59	
99383	New Preventive Visit, Age 5-11 years	\$307.12	\$221.04	\$119.36	\$86.87	Pre
99384	New Preventive Visit, Age 12-17 years	\$344.96	\$241.75	\$133.97	\$97.95)Ver
99385	New Preventive Visit, Age 18-39 years	\$335.28	\$224.32	\$130.35	\$94.92	ntiv
99391	Established Preventive Visit, Age < 1 year	\$254.32	\$181.67	\$99.00	\$72.26	Preventive Services
99392	Established Preventive Visit, Age 1-4 years	\$271.92	\$192.19	\$105.55	\$77.05	
99393	Established Preventive Visit, Age 5-11 years	\$271.04	\$191.55	\$105.19	\$76.79	
99394	Established Preventive Visit, Age 12-17 years	\$296.56	\$210.02	\$115.12	\$83.59	
99395	Established Preventive Visit, Age 18-39 years	\$302.72	\$215.70	\$117.57	\$85.61	
90471	Immunization Administration; 1 vaccine	\$73.12	\$34.24	\$17.01	\$12.84	
90686	Influenza virus vaccine	\$33.80	\$22.02	\$20.53	\$20.52	
92551	Screening test of hearing	\$27.37	\$20.93	\$11.79	\$8.55	0
99173	Screening test of visual acuity, bilateral	\$37.40	\$8.34	\$2.95	\$2.01	Other
90472	Immunization Administration; each additional vaccine	\$36.57	\$21.29	\$12.78	\$9.82	er
96127	Emotional/Behavioral Assesment	\$44.74	\$8.52	\$4.72	\$3.98	
90648	HIB vaccine	\$27.86	\$15.87	NA	\$11.57	

As of December 15, 2021

MN Statute 62J.812 Primary Care Price Transparency

- (a) Each provider shall maintain a list of the services over \$25 that correspond with the provider's 25 most frequently billed charges.
- (b) For each service listed the provider shall disclose the provider's charge, the average reimbursement rate received for the service from the provider's health plan payers in the commercial insurance market, and, if applicable, the Medicare allowable payment rate and the medical assistance fee-for-service payment rate.
- (c) The information above can be found at wayzatachildrensclinic.com under Billing and Payments / Price Transparency, or you may ask for a copy at our front desk.