

## Appointment Visit – Non-Wellness

CPT® Code	CPT® Description	Price
99211	Office/Outpatient Visit, Established	\$90.00
99212	Office/Outpatient Visit, Established	\$150.00
99213	Office/Outpatient Visit, Established	\$215.00
99214	Office/Outpatient Visit, Established	\$308.00
99215	Office/Outpatient Visit, Established	\$425.00
99202	Office/Outpatient Visit, New Patient	\$220.00
99203	Office/Outpatient Visit, New Patient	\$300.00
99204	Office/Outpatient Visit, New Patient	\$440.00

## Hospital Visitation

CPT®	CPT® Description	Price
99460	Initial Care, Normal Newborn	\$437.00
99462	Newborn Hospital Subsequent Visit	\$165.00
99238	Hospital Discharge Day	\$325.00
99463	Newborn Admit & Discharge Same Day	\$578.00

Posted 12.18.20



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# Laboratory

CPT® Code	CPT® Description	Price
80061	Lipid Panel	\$50.00
81002	Urinalysis, Non-Auto W/O Scope	\$18.00
81003	Urinalysis, Auto W/O Scope	\$35.00
81025	Urine Pregnancy Test	\$35.00
83655	Assay Of Lead	\$30.00
85018	Hemoglobin	\$20.00
87804	Influenza Assay w/Optic	\$72.00
87808	Strep A Assay w/Optic	\$72.00
87807	RSV Assay w/Optic	\$72.00

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## Well-Child Checks

CPT® Code	CPT® Description	Price
99391	Preventative Visit, Established, Infant	\$275.00
99392	Preventative Visit, EST, 1-4 Years	\$275.00
99393	Preventative Visit, EST, 5-11 Years	\$275.00
99394	Preventative Visit, EST, 12-17 Years	\$275.00
99395	Preventative Visit, EST, 18-39 Years	\$275.00
99173	Visual Acuity Screen 11	\$11.00
99174	GoCheck Kids® - Vision Screening	\$35.00
96161	Caregiver-Focused Health Risk Assessment	\$30.00
99381	Preventative Visit, New, Infant	\$340.00

## Surveys

CPT® Code	CPT® Description	Price
96127	Brief Emotional/Behavioral Assessment	\$30.00
96110	Developmental Screen, w/ Scoring & Documenting	\$30.00

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## Procedures

CPT® Code	CPT® Description	Price
17110	Destruct Lesion, 1-14	\$330.00
17003	Destruct Lesion, 2-14	\$474.00
94640	Nebulizer Treatment	\$100.00
54150	Circumcision	\$750.00
99188	Application of Fluoride Varnish	\$35.00
69210	Remove Impacted Ear Wax, Req. Instrument	\$200.00
69209	Remove Cerumen By Irrigation/Lavage	\$120.00
11981	Insert Drug Implant Device	\$650.00
11982	Remove Drug Implant Device	\$750.00
41010	Tongue Tie	\$328.00

## Sutures

CPT® Code	CPT® Description	Price
S0630	Removal of Sutures	\$145.00

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## Medications

CPT® Code	CPT® Description	Price
96372	Therapeutic/Prophylactic/DX Injection SubQ/IM	\$60.00
J1050	Medroxyprogesterone Injection	\$75.00
J0696	Ceftriaxone Sodium Injection	\$15.00
J1100	Dexamethasone Sodium Phosphate	\$15.00
J7307	Nexplanon	\$100.00
J1055	Medroxyprogesterone Acetate Injection	\$75.00
J7613	Bicillin	\$30.00
J7644	Albuterol	\$0.00
C9003(90378)	Palivizumab, Per 50 MG	\$0.01

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## NOTICE OF POLICIES AND STANDARDS

You will be provided with an estimate of the anticipated charges for your nonemergency care upon receipt of a written request that can be faxed to 907-563-1170, emailed to [support@apgkids.com](mailto:support@apgkids.com), or mailed to our office at 3340 Providence Dr. #A500, Anchorage, AK 99508. Good Faith Estimate Requests must include the following; Patient's full name, medical condition for which the patient is needing medical treatment for, method preferred for receiving statement, parent/guardian's contact including e-mail address, mailing address and phone number. Please give up to 10 business days for estimates.

This posting is made public on Anchorage Pediatric Group, LLC's website at [www.apgkids.com](http://www.apgkids.com) in accordance with Alaska's Department of Health And Social Services Regulations re: Health Care Services Price Transparency (7 AAC 86) and SB 105.

<https://aws.state.ak.us/OnlinePublicNotices/Notices/Attachment.aspx?id=122306>

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