



Procedure Category	Procedure Code	Procedure Description	Price per unit
Evaluation and Management Services	99213	Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and low level of medical decision making. When using time for code selection, 20-29 minutes of total time is spent on the date of the encounter	\$ 203.00
Evaluation and Management Services	99203	Office or other outpatient visit for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination and low level of medical decision making. When using time for code selection, 30-44 minutes of total time is spent on the date of the encounter.	\$ 300.00
Evaluation and Management Services	99024	Postoperative follow-up visit, normally included in the surgical package, to indicate that an evaluation and management service was performed during a postoperative period for a reason(s) related to the original procedure	\$ -
Evaluation and Management Services	99212	Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and straightforward medical decision making. When using time for code selection, 10-19 minutes of total time is spent on the date of the encounter.	\$ 147.00



Procedure Category	Procedure Code	Procedure Description	Price per unit
Evaluation and Management Services	99204	Office or other outpatient visit for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination and moderate level of medical decision making. When using time for code selection, 45-59 minutes of total time is spent on the date of the encounter.	\$ 423.00
Evaluation and Management Services	99214	Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and moderate level of medical decision making. When using time for code selection, 30-39 minutes of total time is spent on the date of the encounter.	\$ 298.00
Evaluation and Management Services	99205	Office or other outpatient visit for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination and high level of medical decision making. When using time for code selection, 60-74 minutes of total time is spent on the date of the encounter.	\$ 637.00
Evaluation and Management Services	99215	Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and high level of medical decision making. When using time for code selection, 40-54 minutes of total time is spent on the date of the encounter.	\$ 408.00



Procedure Category	Procedure Code	Procedure Description	Price per unit
Evaluation and Management Services	99233	Subsequent hospital care, per day, for the evaluation and management of a patient, which requires at least 2 of these 3 key components: A detailed interval history; A detailed examination; Medical decision making of high complexity.	\$ 546.00
Radiology Procedures	73110	Radiologic examination, wrist; complete, minimum of 3 views	\$ 192.00
Radiology Procedures	73140	Radiologic examination, finger(s), minimum of 2 views	\$ 160.00
Radiology Procedures	73610	Radiologic examination, ankle; complete, minimum of 3 views	\$ 194.00
Radiology Procedures	73130	Radiologic examination, hand; minimum of 3 views	\$ 207.00
Radiology Procedures	73080	Radiologic examination, elbow; complete, minimum of 3 views	\$ 155.00
Radiology Procedures	73630	Radiologic examination, foot; complete, minimum of 3 views	\$ 191.00
Radiology Procedures	73565	Radiologic examination, knee; both knees, standing, anteroposterior	\$ 180.00
Radiology Procedures	77071	Manual application of stress performed by physician or other qualified health care professional for joint radiography, including contralateral joint if indicated	\$ 303.44
Radiology Procedures	73090	Radiologic examination; forearm, 2 views	\$ 159.00
Radiology Procedures	73000	Radiologic examination; clavicle, complete	\$ 158.00
Surgery	20610	Arthrocentesis, aspiration and/or injection, major joint or bursa (eg, shoulder, hip, knee, subacromial bursa); without ultrasound guidance	\$ 382.00



Procedure Category	Procedure Code	Procedure Description	Price per unit
Surgery	27447	Arthroplasty, knee, condyle and plateau; medial AND lateral compartments with or without patella resurfacing (total knee arthroplasty)	\$ 9,949.98
Surgery	29870	Arthroscopy, knee, diagnostic, with or without synovial biopsy (separate procedure)	\$ 3,621.60
Surgery	26055	Tendon sheath incision (eg, for trigger finger)	\$ 3,658.96
Surgery	27130	Arthroplasty, acetabular and proximal femoral prosthetic replacement (total hip arthroplasty), with or without autograft or allograft	\$ 12,691.98
Surgery	23120	Claviculectomy; partial	\$ 4,220.00
Surgery	20600	Arthrocentesis, aspiration and/or injection, small joint or bursa (eg, fingers, toes); without ultrasound guidance	\$ 312.00
Surgery	64721	Neuroplasty and/or transposition; median nerve at carpal tunnel	\$ 3,320.00
Surgery	20605	Arthrocentesis, aspiration and/or injection, intermediate joint or bursa (eg, temporomandibular, acromioclavicular, wrist, elbow or ankle, olecranon bursa); without ultrasound guidance	\$ 323.00
Surgery	23130	Acromioplasty or acromionectomy, partial, with or without coracoacromial ligament release	\$ 4,259.68
Medicine Services and Procedures	97605	Negative pressure wound therapy (eg, vacuum assisted drainage collection), utilizing durable medical equipment (DME), including topical application(s), wound assessment, and instruction(s) for ongoing care, per session; total wound(s) surface area less than or equal to 50 square centimeters	\$ 204.00