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Alaska's health care price transparency law (AS 18.23.400) requires health care providers and facilities to post the prices of their most common procedures. Visit the Alaska Department of Health & Social Services website for more detail at :

<http://dhss.alaska.gov/dph/VitalStats/Pages/transparency.aspx>

We are an in-network preferred provider with Aetna, Blue Cross Blue Shield, Alaska Medicaid, Cigna, Tricare, First Choice Health, MultiPlan, & United Healthcare. If you are covered by health insurance, you are strongly encouraged to consult with your health insurer to determine accurate information about your financial responsibility for a particular service.

The undiscounted prices reflected below may be higher or lower than the amount an individual actually pays for the health care services described in this list. You will be provided with an estimate of the anticipated charges for your non-emergency care upon request. Please do not hesitate to ask for information.

**CPT® codes are billing codes dictated and monopolized by the AMA
(see statement at the end of this document)**

Office Visit: Non-Wellness

CPT® Code	CPT® Description	Price
99202	New patient office visit; expanded-straightforward problem/20 min	\$213
99203	New patient office visit; detailed-low complexity/30 min	\$305
99204	New patient office visit; comprehensive-moderate complexity/45 min	\$465
99205	New patient office visit; comprehensive-high complexity/60 min	\$603
99211	Established patient office visit; minimal	\$95
99212	Established patient office visit; problem focused-straightforward/10 min	\$147
99213	Established patient office visit; expanded problem-low complexity/15 min	\$210
99214	Established patient office visit; detailed-moderate complexity/25 min	\$305
99215	Established patient office visit; comprehensive-high complexity/40 min	\$428

Office Visit: Well-Child

CPT® Code	CPT® Description	Price
99381	New patient preventive, infant (under age 1 year)	\$339
99382	New patient preventive, age 1 – 4 years	\$335
99383	New patient preventive, age 5 – 11 years	\$341
99384	New patient preventive, age 12 – 17 years	\$385
99391	Established patient preventive, infant (under age 1 year)	\$285
99392	Established patient preventive, age 1 – 4 years	\$301
99393	Established patient preventive, age 5 – 11 years	\$301
99394	Established patient preventive, age 12 – 17 years	\$328
99395	Established patient preventive, age 18+ years	\$361

Screening/Testing

CPT® Code	CPT® Description	Price
99177	Vision photo screen test	\$60
96110	Development screening questionnaire w/scoring	\$51
96127	Depression screening questionnaire w/scoring	\$32
92551	Hearing screen test, pure tone	\$61.25
92555	Hearing screen test, speech audiometry threshold	\$99
96116	Neurobehavioral ADHD testing (TOVA test) 1 st hour	\$464

Procedures

CPT® Code	CPT® Description	Price
54150	Circumcision in office	\$785
69209	Ear irrigation	\$70
69210	Ear wax removal by instrument	\$110
17110	Wart & benign lesion removal by liquid nitrogen freezing	\$313
94060	Asthma assessment by spirometry w/bronchodilator	\$371
51701	Bladder catheterization	\$291

Laboratory Tests

® Code	CPT® Description	Price
85018	Hemoglobin	\$49
84202	Zinc Protoporphyrin	\$54
82465	Cholesterol	\$21
80061	Lipid Panel	\$70
82947	Glucose	\$18
83655	Lead	\$95
87880	Strep	\$65
87804	Influenza A & B	\$80
87807	RSV	\$65
87426	SARS-CoV-2/COVID-19	\$136
81000	Urinalysis w/microscopy	\$37

Hospital Inpatient Services

CPT® Code	CPT® Description	Price
99460	Newborn hospital admission/initial care on 1 st day	\$415
99462	Newborn subsequent hospital visit per day	\$235
99463	Newborn hospital admission & discharge/same day	\$500
99238	Hospital discharge management; 30 min or less	\$351
99239	Hospital discharge management; more than 30 min	\$500

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