

Glennallen Chiropractic Center, APC

Dr. Vickie Willis

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<http://www.glennallenchiropractic.com>

2023 Fee Schedule

Evaluation & Management (99202 – 99499)

Description (clear language)	Service Code (CPT®, HCPCS, DRG)	Price (undiscounted)
Office outpatient visit for the evaluation and management of a new patient; face to face contact with patient and/or family for a low to moderate severity level problem including an expanded history and examination. 20 minutes	99202	\$279.00
Office outpatient visit for the evaluation and management of a new patient; face to face contact with the patient and/or family for a moderate severity level problem including a detailed history and examination. 30 minutes	99203	\$348.00
Office outpatient visit for the evaluation and management of a new patient; face to face contact with the patient and/or family for a moderate to high severity level problem including a comprehensive history and examination. 45 minutes	99204	\$435.00
Office or other outpatient visit for the evaluation and management of an established patient; face to face contact with the patient and/or family for a minor severity problem including a focused history and examination. 5-10 minutes	99212	\$173.00
Office or other outpatient visit for the evaluation and management of an established patient; face to face contact with the patient and/or family for a low to moderate severity problem including an expanded history and examination. 15 minutes	99213	\$225.00
Office or other outpatient visit for the evaluation and management of an established patient; face to face contact with patient and/or family for a moderate to high severity problem including a detailed history and examination. 25 minutes	99214	\$310.00

Medical Services and Procedures (90281 – 99607)

Description (clear language)	Service Code (CPT®, HCPCS, DRG)	Price (undiscounted)
Chiropractic manipulative treatment (CMT); spine, 1-2 regions	98940	\$75.00
Chiropractic manipulative treatment (CMT); spine, 3-4 regions	98941	\$83.00
Chiropractic manipulative treatment (CMT); extraspinal/extremity	98943	\$60.00
Application of a modality to 1 or more areas; electrical stimulation (unattended, 1 or more areas)	97014	\$60.00
Application of a modality to 1 or more areas; electrical stimulation (unattended, 1 or more areas); for indications other than wound care, as part of a therapy plan	G0283	\$60.00
Therapeutic exercises to develop strength and endurance, range of motion and flexibility in 1 or more areas; each unit is 15 minutes	97110	\$100.00
Massage, including effleurage, petrissage and/or tapotement (stroking, compression, percussion) in 1 or more areas; each unit is 15 minutes	97124	\$50.00
Manual therapy techniques (e.g., Mobilization/manipulation, manual lymphatic drainage, manual traction) in 1 or more regions; each unit is 15 minutes	97140	\$75.00
Medical nutrition therapy; Initial assessment and intervention with an individual patient, face to face; each unit is 15 minutes	97802	\$121.00
Orthotic(s) management and training (including assessment and fitting when not otherwise reported), upper extremity(s), lower extremity(s), and/or trunk; each unit is 15 minutes	97760	\$100.00

Radiology Services (70010 – 79999)

Description (clear language)	Service Code (CPT®, HCPCS, DRG)	Price (undiscounted)
X-ray consultation-radiographic study is read by the doctor for a second opinion with a written report	76140	\$173.00

Notices:

Our office has a contract to provide health care services as an in-network preferred provider for the following insurers:



The undiscounted prices are the amounts billed for a service rendered without complication or exceptional circumstances; listed prices may be higher or lower than the amount an individual will pay for the health care service(s) described.

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.

For more information from the State of Alaska:

<https://health.alaska.gov/dph/VitalStats/Pages/transparency/A.aspx>

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