

#### 2021 Most Common Services Billed

The State of Alaska requires provider offices to post a list of their top 10 most frequently billed CPT codes in each of the six sections of American Medical Association Current Procedural Terminology book.

This state law, as passed in Senate Bill 105, states that we must post our top 10 CPT codes in each of the categories below, as well as our "undiscounted price" for those cpt codes. This is the price that is listed on our fee sheet, but not necessarily the price that will be paid for services. You are entitled to receive a good-faith estimate of anticipated, non-emergency, services prior to receiving those services. This estimate does not include facility fees or other charges incurred outside of the services provided by an APS provider.

# **Evaluation and Management**

CPT Code	What does the code really mean?	UNDISCOUNTED PRICE
99233	PR SBSQ HOSPITAL CARE/DAY 35 MINUTES	\$909.00
99215	PR OFFICE OUTPATIENT VISIT 40 MINUTES	\$1,301.00
99214	PR OFFICE OUTPATIENT VISIT 25 MINUTES	\$882.00
99213	PR OFFICE OUTPATIENT VISIT 15 MINUTES	\$596.00
99231	PR SBSQ HOSPITAL CARE/DAY 15 MINUTES	\$342.00
99232	PR SBSQ HOSPITAL CARE/DAY 25 MINUTES	\$634.00
99254	PR INITL INPATIENT CONSULT NEW/ESTAB PT 80 MIN	\$1,469.00
99239	PR HOSPITAL DISCHARGE DAY,>30 MIN	\$927.00
99212	PR OFFICE OUTPATIENT VISIT 10 MINUTES	\$321.00
99253	PR INITL INPATIENT CONSULT NEW/ESTAB PT 55 MIN	\$1,012.00

### Medicine

CPT Code	What does the code really mean?	UNDISCOUNTED PRICE
98960	PR SELF-MGMT EDUC & TRAIN, 1 PT, EA 30 MIN	\$210.00
97607	PR NEG PRESSURE WOUND THERAPY NON DME = 50 SQ CM</td <td>\$194.00</td>	\$194.00
97605	PR NEGATIVE PRESSURE WOUND THERAPY DME = 50 SQ CM</td <td>\$230.00</td>	\$230.00
97606	PR NEGATIVE PRESSURE WOUND THERAPY DME >50 SQ CM	\$250.00
90471	PR IMMUNIZ ADMIN,1 SINGLE/COMB VAC/TOXOID	\$145.00

# Radiology

CPT Code	What does the code really mean?	UNDISCOUNTED PRICE
77001	PR FLUOROGUIDE CNTRL VEN ACCESS, PLACE, REPLACE, REMOVE	\$802.00
76000	CHG FLUOROSCOPY UP TO 1 HOUR PHYSICIAN/QHP TIME	\$343.00

# Surgery/Procedure

CPT Code	What does the code really mean?	UNDISCOUNTED PRICE
36591	PR COLLECT BLOOD FROM IMPLANT VENOUS ACCESS DEVICE	\$318.00
96450	PR CHEMOTHER, CNS, W/LUMBAR PUNCTURE	\$689.00
54150	PR CIRCUMCISION, CLAMP, W/ ANESTH	\$855.00
44970	PR LAP, APPENDECTOMY	\$5,090.00
43653	PR LAP, GASTROSTOMY, W/O TUBE CONSTR	\$4,728.00
49580	REPAIR UMBILICAL HERN, <5Y/O, REDUC	\$2,860.00
36590	PR RMVL TUN CTR VAD W/SUBQ PORT/PMP CTR/PRPH INSJ	\$2,495.00
43762	PR PERQ REPLACEMENT GTUBE NOT REQ REVJ GSTRST TRC	\$328.00
36561	PR INSJ TUNNELED CTR VAD W/SUBQ PORT AGE 5 YR/>	\$4,420.00
49495	REPAIR ING HERNIA, FULL/PRETERM INF, REDUC	\$3,449.00

<sup>\*\*</sup>APS does not bill any charges in the Anesthesia or Pathology and Laboratory categories