



## Independence Park Medical Services

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**2020**

### **State of Alaska Required Posting of 10 Most Commonly Performed Services**

Per state law (Senate Bill 10S-passed by the 30<sup>th</sup> Alaska Legislature during its second session), starting 1/1/2019, we are required to post annually a list of our 10 most frequently billed service codes from the six sections of Category I of the Current Procedural Terminology ("CPT codes") book, as adopted by the American Medical Association. CPT® Copyright 2020. American Medical Association. All rights reserved. CPT is a registered trademark of the American Medical Association. The CPT codes are provided "as is" without warranty of any kind. The AMA specifically disclaims all liability for use or accuracy of any CPT codes.

The six sections are:

|                           |                                 |
|---------------------------|---------------------------------|
| Evaluation and Management | <b>99201-99499</b>              |
| Anesthesia                | <b>00100-01999, 99100-99140</b> |
| Surgery                   | <b>10021-69990</b>              |
| Radiology                 | <b>70010-79999</b>              |
| Pathology and Laboratory  | <b>80047-89398, 00010 00170</b> |
| Medicine                  | <b>90281-99199, 99500-99607</b> |

The state department responsible for overseeing this law is the State of Alaska Department of Health and Social Services (DHSS), their website is:

<http://dhss.alaska.gov/Pages/default.aspx>.

**By law, we are required to tell you that the "undiscounted price" that we are required to report may, in the state's words, "be higher or lower" than the amount an individual will actually pay for the health care services described on these lists.** To translate this required statement, it means that if we are an IN-network provider with your insurance, the price could be significantly lower than the price listed here. If we are NOT in network with your insurance, our price will be no higher than the prices listed here.

**The following are insurances for which we are an IN-network:**

- **Aetna**
- **Cigna**
- **Premera/Blue Cross Blue Shield**
- **United Healthcare/UHC**
- **Moda**
- **Medicaid**
- **Medicare**

For most other insurances, we are considered OUT of-network.

**As required by the law, you may request to be provided with an estimate of the anticipated charges for your nonemergency care. Please do not hesitate to ask for this information.** This estimate will only include our estimated fees; we cannot provide estimates for the cost of other facilities or providers (example: the cost of your hospital stays for surgery or the cost of an anesthesiologist's services); these providers will need to be contacted directly in order to obtain an estimate of their costs. We will provide you with contact information so that you can obtain estimates from these individuals.

**It is important to understand that, regardless of our prices quoted here, YOUR insurance company determines the final price of any billed CPT codes. We charge one price; they process and discount it to what THEY will allow/pay. There is also a difference whether you go to an IN-network provider (*typically a lower discounted price*) or an OUT of-network provider (*typically a higher price*).**

**IPMS 10 Most Commonly Performed Evaluation & Management Codes for 2020:**

|       |          |  |
|-------|----------|--|
| 99203 | \$320.00 | New Patient (has not been seen in group within 3 years) office visit (30 min), level 3 |
| 99204 | \$475.00 | New Patient (has not been seen in group within 3 years) office visit (45 min), level 4 |
| 99212 | \$150.00 | Established Pt (has been seen in group within 3 years) office visit (10 min), level 2  |
| 99213 | \$225.00 | Established Pt (has been seen in group within 3 years) office visit (15 min), level 3  |
| 99214 | \$325.00 | Established Pt (has been seen in group within 3 years) office visit (25 min), level 4  |
| 99215 | \$450.00 | Established Pt (has been seen in group within 3 years) office visit (40 min), level 5  |
| 99385 | \$425.00 | Preventative Wellness Medicine Evaluation New Patient Age 18-39                        |
| 99386 | \$475.00 | Preventative Wellness Medicine Evaluation New Patient Age 40-64                        |
| 99395 | \$375.00 | Preventative Wellness Medicine Evaluation Established Pt Age 18-39                     |
| 99396 | \$400.00 | Preventative Wellness Medicine Evaluation Established Pt Age 40-64                     |

**IPMS 10 Most Commonly Performed Anesthesiology Codes for 2020:**

We do not bill any Anesthesiology codes.

**IPMS 10 Most Commonly Performed Surgery Codes for 2020:**

|       |          |  |
|-------|----------|--|
| 11200 | \$450.00 | Removal of skin tags, any area; up to and including 15 lesions |
| 11981 | \$750.00 | Insertion, non-biodegradable drug delivery implant             |

|       |           |  |
|-------|-----------|--|
| 17110 | \$375.00  | Destruction of benign lesions; up to 14 lesions  |
| 36415 | \$50.00   | Routine collection of venous blood by venipuncture   |
| 57425 | \$6200.00 | Laparoscopy, surgical, colpopexy   |
| 58300 | \$710.00  | Insertion of intrauterine device (IUD)   |
| 58301 | \$560.00  | Removal of intrauterine device (IUD)   |
| 58558 | \$6900.00 | Hysteroscopy, surgical, biopsy   |
| 58571 | \$8500.00 | Laparoscopy, surgical, w/total hysterectomy, w/removal of tube(s) and/or ovary(s) for uterus 250 g or less |
| 69210 | \$165.00  | Removal of impacted ear wax requiring instrumentation, unilateral  |

#### **IPMS 10 Most Commonly Performed Radiology Codes for 2020:**

|       |          |   |
|-------|----------|---|
| 71046 | \$200.00 | X-ray examination, chest; 2 views   |
| 72050 | \$300.00 | X-ray examination, spine; 4 or 5 views  |
| 72100 | \$195.00 | X-ray examination, spine, lumbosacral; 2 or 3 views                           |
| 72110 | \$300.00 | X-ray examination, spine, lumbosacral; minimum of 4 views                     |
| 73030 | \$225.00 | X-ray examination, shoulder, complete; minimum of 2 views                     |
| 73564 | \$225.00 | X-ray examination, knee, complete; 4 or more views                            |
| 73630 | \$185.00 | X-ray examination, foot, complete; minimum of 3 views                         |
| 76805 | \$715.00 | Ultrasound, pregnant uterus real time with image documentation >or=14wks0days |
| 76819 | \$550.00 | Fetal echocardiograph doppler complete  |
| 76830 | \$650.00 | Fetal biophysical profile; without non-stress testing                         |

#### **IPMS 10 Most Commonly Performed Pathology/Laboratory Codes for 2020:**

|       |          |                            |
|-------|----------|----------------------------|
| 80050 | \$260.00 | General health panel (GHP) |
|-------|----------|----------------------------|

|       |          |  |
|-------|----------|--|
| 80053 | \$75.00  | Comprehensive metabolic panel (CMP)                          |
| 80061 | \$85.00  | Lipid panel  |
| 81001 | \$35.00  | Urinalysis, automated, with microscopy                       |
| 81003 | \$30.00  | Urinalysis, automated, without microscopy                    |
| 83036 | \$70.00  | Glycosylated (A1C) hemoglobin analysis                       |
| 84153 | \$135.00 | Prostate specific antigen (PSA), complexed; total            |
| 84443 | \$125.00 | Assay of thyroid stimulating hormone (TSH)                   |
| 85025 | \$60.00  | Complete CBC, automated and automated differential WBC count |
| 87210 | \$50.00  | Smear, wet mount for infectious agents (saline/ink)          |

**IPMS 10 Most Commonly Performed Medicine Codes for 2020:**

|       |          |  |
|-------|----------|--|
| 90471 | \$75.00  | Immunization administration; 1 vaccine (single or combo)                       |
| 90472 | \$30.00  | Immunization administration; + each additional vaccine (single or combo)       |
| 90662 | \$60.00  | Influenza virus vaccine (IIV), split virus, no preservative, increased antigen |
| 90688 | \$25.00  | Influenza virus vaccine, quad (IIV4), split, 0.5 mL, Intramuscular (IM)        |
| 90715 | \$70.00  | Tetanus, diphtheria toxoids and acellular pertussis vaccine (Tdap), >7 years   |
| 93000 | \$150.00 | Electrocardiogram, routine ECG, with interpretation and report                 |
| 94010 | \$210.00 | Spirometry, breathing capacity test, total and timed vital capacity            |
| 95251 | \$250.00 | Continuous glucose monitoring (CGM) analysis and interpretation report         |
| 95851 | \$125.00 | Range of motion measurements and report  |
| 96372 | \$120.00 | Therapeutic, prophylactic, or diagnostic injection, subcutaneous or IM         |

THIS DOCUMENT AND ALL OF THESE CODES CAN BE FOUND ON OUR WEBSITE AT:

<https://www.ipmsak.com>