



An estimate will be provided for non-emergency health care services upon request. The prices listed are the amount billed by KCHC before any insurance payments or discounts are applied. An individual's amount due for services may vary. As a Federally Qualified Health Center, we offer a Sliding Fee Discount. Eligibility is based on household size and income per federal poverty guidelines.

10 Most Common Codes Per Category 2020

Evaluation and Management		
CPT CODE	Charge	Description
99203	\$419.07	Office Outpatient New Patient 30 Mins
99212	\$172.32	Office Outpatient Established Patient 10 Mins
99213	\$291.57	Office Outpatient Established Patient 15 Mins
99214	\$426.99	Office Outpatient Established Patient 25 Mins
99232	\$299.97	Subsequent Hospital Visit 25 Mins
99238	\$297.84	Hospital Discharge Day Management
99391	\$393.78	Periodic Preventive Visit <1 Yr Old
99392	\$420.93	Periodic Preventive Visit 1-4 Yrs Old
99396	\$506.91	Periodic Preventive Visit 40-64 Yrs Old
99442	\$ 50.00	Telephone Eval and Management Service

Radiology		
CPT CODE	Charge	Description
76801	\$455.58	OB Ultra Sound

Surgery		
CPT CODE	Charge	Description
11981	\$ 394.56	Insert Implantable Singular Contraceptive
17000	\$ 246.18	Destroy Benign Lesion
17110	\$ 408.69	Destruct Lesion
20610	\$ 240.99	Drain/Inject Joint
36415	\$ 9.00	Blood Draw
54150	\$ 598.80	Circumcision
58300	\$ 352.02	Insert Intrauterine Device
58301	\$ 395.37	Remove Intrauterine Device
59400	\$ 8,375.07	Routine OB Post Delivery Care
69210	\$ 185.40	Remove Impacted Ear Wax

Pathology and Laboratory		
CPT CODE	Charge	Description
80053	\$ 31.68	Complete Metabolic Panel
80305	\$ 37.80	Multidrug Screen Urine
81002	\$ 10.44	Urinalysis, In-house
81025	\$ 25.83	Urine Pregnancy Test
83036	\$ 29.13	HGB A1C Fingerstick
85610	\$ 12.87	INR & Prothrombin Time Fingerstick
86580	\$ 30.99	TB Skin Test
87635	\$ -	Covid-19 Rapid Test
87804	\$ 49.65	Rapid Flu A&B
87880	\$ 49.59	Rapid Strep-Infectious agent

*We contract with Quest to perform the COVID-19 lab test and other lab tests. Quest can be contacted directly for pricing information at 1-866-697-8378.

Medicine		
CPT CODE	Charge	Description
90471	\$ 15.00	Immunization Administration Injection
90472	\$ 15.00	Immunization Admin Each Additional Injection
90474	\$ 15.00	Immunization Admin Intranasal/Oral
90792	\$ 668.82	Psychiatric Diagnostic Eval w/Med Services
90832	\$ 297.54	Psychotherapy Patient & Family 30 mins
90834	\$ 395.91	Psychotherapy Patient & Family 45 mins
93005	\$ 28.56	ECG Routine
95117	\$ 35.82	Allergen Immunotherapy
96372	\$ 54.96	Therapeutic Injection
97802	\$ 149.25	Medical Nutrition Therapy 15 mins

Anesthesia is not provided at KCHC.

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."