



Evaluation and Management (99201-99499)

99211 **\$95.00** Office or other outpatient visit for the evaluation and management of an established patient, that may not require the presence of a physician or other qualified health care professional. Usually, the presenting problem(s) are minimal. Typically, 5 minutes are spent performing or supervising these services.

99212 **\$139.00** Office or other outpatient visit for the evaluation and management of an established patient which requires at least 2 of these 3 key components: a problem focused history; a problem focused examination; straightforward medical decision making. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self limited or minor. Typically, 10 minutes are spent face-to-face with the patient and/or family.

99213 **\$190.00** Office or other outpatient visit for the evaluation and management of an established patient which requires at least 2 of these 3 key

components: an expanded problem focused history; an expanded problem focused examination; medical decision making of low complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of low to moderate severity. Typically, 15 minutes are spent face-to-face with the patient and/or family.

99214 **\$283.00** Office or other outpatient visit for the evaluation and management of an established patient which requires at least 2 of these 3 key components: a detailed history; a detailed examination; medical decision making of moderate complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Typically, 25 minutes are spent face-to-face with the patient and/or family.



- 99238** **\$270.00** Hospital discharge day management; 30 minutes or less
- 99391** **\$245.00** Periodic comprehensive preventive medicine reevaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, established patient; infant (age younger than 1 year)
- 99392** **\$250.00** Periodic comprehensive preventive medicine reevaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, established patient; early childhood (age 1 through 4 years)
- 99393** **\$245.00** Periodic comprehensive preventive medicine reevaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction



interventions, and the ordering of laboratory/diagnostic procedures, established patient; late childhood (age 5 through 11 years)

99394 **\$270.00** Periodic comprehensive preventive medicine reevaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, established patient; adolescent (age 12 through 17 years)

99460 **\$360.00** Initial hospital or birthing center care, per day, for evaluation and management if normal newborn infant



Surgery (10004-69990)

- 12001** \$505.00 Simple repair of superficial wounds of scalp, neck, axillae, external genitalia, trunk and/or extremities (including hands and feet); 2.5 cm or less
- 16020** \$310.00 Dressings and/or debridement of partial-thickness burns, initial or subsequent; small (less than 5% total body surface area)
- 17110** \$315.00 Destruction (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), of benign lesions other than skin tags or cutaneous vascular proliferative lesions; up to 14 lesions
- 17250** \$90.00 Chemical cauterization of granulation tissue (ie, proud flesh)
- 36415** \$35.00 Collection of venous blood by venipuncture
- 36416** \$25.00 Collection of capillary blood specimen (eg, finger, heel, ear stick)



- 51701** **\$290.00** Insertion of non-indwelling bladder catheter (eg, straight catheterization for residual urine)
- 54150** **\$750.00** Circumcision, using clamp or other device with regional dorsal penile or ring block
- 69209** **\$90.00** Removal impacted cerumen using irrigation/lavage, unilateral
- 69210** **\$125.00** Removal impacted cerumen requiring instrumentation, unilateral



Pathology and Laboratory (80047-89398, 0001U-0222U)

81002 **\$30.00** Urinalysis, by dip stick or tablet reagent for bilirubin, glucose, hemoglobin, ketones, leukocytes, nitrite, pH, protein, specific gravity, urobilinogen, any number of these constituents; non-automated, without microscopy

82465 **\$21.00** Cholesterol, serum or whole blood, total

83655 **\$60.00** Lead

83718 **\$43.00** Lipoprotein, direct measurement; high density cholesterol (HDL cholesterol)

85018 **\$42.00** hemoglobin (HgB)

86580 **\$46.00** Tuberculosis, intradermal



87426 **\$75.00** Infectious agent antigen detection by ummonoassay technique, (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [ELISA], immunochemiluminometric assay [IMCA]) qualitative or semiquantitative, multi-step method; severe acute respiratory syndrome coronavirus (eg, SARS-CoV, SARS-CoV-2 [COVID-19])

87804 **\$50.00** Influenza

87807 **\$100.00** Respiratory syncytial virus

87880 **\$75.00** Streptococcus, group A



Medicine (90281-99199, 99500-99607)

90471 **\$50.00** Immunization administration (includes percutaneous, intradermal, subcutaneous, or intramuscular injections); 1 vaccine (single or combination vaccine/toxoid)

90472 **\$31.00** Immunization administration (includes percutaneous, intradermal, subcutaneous, or intramuscular injections); each additional vaccine (single or combination vaccine/toxoid) (List separately in addition to code for primary procedure)

90473 **\$48.00** Immunization administration by intranasal or oral route; 1 vaccine (single or combination vaccine/toxoid)

90474 **\$31.00** Immunization administration by intranasal or oral route; each additional vaccine (single or combination vaccine/toxoid) (List separately in addition to code for primary procedure)



96110 **\$37.00** Developmental screening (eg, developmental milestone survey, speech and language delay screen), with scoring and documentation, per standardized instrument

96127 **\$18.00** Brief emotional/behavioral assessment (eg, depression inventory, attention-deficit/hyperactivity disorder [ADHD] scale), with scoring and documentation, per standardized instrument.

99051 **\$25.00** Service(s) provided in the office during regularly scheduled evening, weekend, or holiday office hours, in addition to basic service

99072 **\$40.00** Additional supplies, materials, and clinical staff time over and above those usually included in an office visit or other non-facility service(s), when performed during a Public Health Emergency defined by law, due to respiratory-transmitted disease



99177 **\$58.00** Instrument-based ocular screening (eg, photoscreening, automated-refraction), bilateral; with on-site analysis

99188 **\$25.00** Application of topical fluoride varnish by a physician or other qualified health care professional