

Denali OB-GYN Clinic
3976 University Lake Drive, Suite 300
Anchorage, Alaska 99508

Undiscounted Prices for Top Ten Services in 2022

Per Alaska State law (AS 18.23.400), commonly referred to as the Health Care Price Transparency Law, health care providers and facilities are required to annually compile and report a list of our top 10 most frequently billed services for the previous year, within each of the six sections of the Current Procedural Terminology, Category I (CPT) book. The six sections are:

1. Evaluation and Management
2. Anesthesia
3. Surgery
4. Radiology
5. Pathology and Laboratory
6. Medicine

By law, we are required to tell you “the undiscounted prices described in this list may be higher or lower than the amount an individual may pay.” This amount does not include any discounts that may be available to you. What this means is that if we are **in-network** with your insurance, we have a contracted rate (called an allowable) that may be lower than the prices listed here. In addition, you will need to understand

the deductibles, co-pays, and co-insurance for your health insurance plan. The actual amount a patient pays out of pocket may be substantially lower than the prices listed below.

If we are **not in network** with your insurance, then our charges will be no higher than the prices listed here but may also be lower as many insurance plans provide some level of discount for out-of-network coverage. Again, you will need to understand the deductibles, co-pays, and co-insurance for your out-of-network coverage.

If you are a self-pay patient, we provide discounts from the prices listed below. Self-pay patients who pay in full at time of service are provided with a 30% discount off the prices listed below. If a patient pays on a payment plan of 4 equal monthly payments after the date of service, the discount is 20% off the prices listed below, and any payment plans greater than 4 months but less than 12 months, the discount is 10%.

We are in-network with the following insurance companies:

- Premera Blue Cross and Blue Shield and associated BCBS plans.
- Aetna and associated plans in the Aetna Network.
- Medicaid
- Medicare

In-Network Insurance Carriers (Continued):

- Tricare
- United Health Care (UHC)
- First Choice Health Network (FCHN)
- Cigna

For any insurance not listed above, we are considered out of network.

Good Faith Estimate

You will be provided with what is called a Good Faith Estimate of anticipated charges for our nonemergency care upon request. Please do not hesitate to ask for a good faith estimate. This estimate will only include **our** estimated fees; we cannot provide estimates for other providers or facilities. However, we can provide you with their contact information so you can get an estimate from them. The good faith estimate is specific to your treatment needs as a patient and your insurance status. It is not a repeat of the list below. Therefore, it will require paperwork on your part because we will need numerous pieces of information from you to provide the estimate. The good faith estimate is generally provided in writing and we will ask you to sign off that you received it. This estimate is not necessarily what you will pay once all the charges are calculated. It is only our best

estimate at the time. In some cases, we may provide a reasonable range of final charges and any discounts applied. We will explain the details of the estimate when you are provided it.

Top 10 Evaluation and Management Codes for 2022:

<u>*CPT</u>	<u>Description</u>	<u>Cost</u>
99203	New Patient Office Visit, Moderate Medical Complexity or Time.	\$365.00
99204	New Patient Office Visit High Medical Complexity or Time.	\$551.00
99212	Established Patient Office Visit Low Medical Complexity or Time.	\$180.00
99213	Established Patient Office Visit, Moderate Medical Complexity or Time.	\$297.00
99214	Established Patient Office Visit, High Medical Complexity or Time.	\$425.00
99215	Established Patient Office Visit, Highest Medical Complexity or Time.	\$596.00
99232	Follow Up Hospital Care, Per Day.	\$243.00
99385	New Patient Annual Exam, 18-39 years.	\$429.00
99395	Established Patient Annual Exam, 18-39 years.	\$388.00
99396	Established Patient Annual Exam, 40-67 years.	\$414.00

Top 10 Anesthesia Codes for 2022:

We do not bill any anesthesia codes.

Top 10 Surgery Codes for 2022:

<u>CPT</u>	<u>Description</u>	<u>Cost</u>
57454	Colposcopy (microscopic examination) of cervix including biopsy.	\$1,306.00
58100	Biopsy of endometrium (lining of uterus).	\$780.00
58300	Insertion of Intrauterine Device (IUD).	\$785.00
58301	Removal of Intrauterine Device (IUD).	\$827.00
58662	Laparoscopic (minimally invasive) removal of ovarian lesions (cysts or tumors).	\$5,676.00
59025	Fetal Non-Stress Test (Fetal Heart Rate Test).	\$258.00
59400	Obstetrical Care (Vaginal Delivery), including care before and after delivery.	\$13,027.00
59410	Vaginal Delivery, including post-partum or after delivery care.	\$5,864.00
59514	Cesarean Delivery only.	\$5,022.00
59515	Cesarean Delivery, including post-partum or after delivery care.	\$7,167.00

Top 10 Radiology Codes for 2022:

<u>CPT</u>	<u>Description</u>	<u>Cost</u>
76801	Ultrasound for pregnant patient, 1 st trimester.	\$643.00
76805	Ultrasound for pregnant patient, after 1 st trimester, single fetus.	\$732.00
76813	Fetal Nuchal Translucency Ultrasound, 1 st trimester (Measurements at the back of fetal neck).	\$655.00
76815	Ultrasound for pregnant patient, limited.	\$443.00
76816	Follow up ultrasound for pregnant patient.	\$597.00
76817	Ultrasound, transvaginal, pregnant patient.	\$506.00
76818	Fetal biophysical profile with non-stress test (Ultrasound for numerous fetal measurements).	\$622.00
76819	Fetal biophysical profile without non-stress test (Ultrasound for numerous fetal measurements).	\$459.00
76830	Ultrasound, transvaginal.	\$639.00
76857	Ultrasound, pelvic, limited (follicle check).	\$258.00

Top 10 Pathology and Laboratory Codes for 2022:

<u>CPT</u>	<u>Description</u>	<u>Cost</u>
81002	Analysis of urine using a dipstick without a microscope.	\$35.00
81025	Urine pregnancy test.	\$86.00
87210	Wet mount (Looking under a microscope).	\$58.00

Top 10 Medicine Codes for 2022:

<u>CPT</u>	<u>Description</u>	<u>Cost</u>
90471	Immunization, 1 vaccine.	\$53.00
90472	Immunization, each additional vaccine.	\$41.00
90651	Human Papillomavirus (HPV) vaccine, 2 or 3 dose.	\$597.00
90674	Influenza virus vaccine.	\$60.00
90715	Tdap vaccine, 7 years or older.	\$72.00
96372	Therapeutic, prophylactic (protective), or diagnostic injection.	\$45.00

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The State of Alaska Department of Health and Social Services (DHSS) is responsible for overseeing this law, their website is: <https://health.alaska.gov/dph/VitalStats/Pages/transparency/A.aspx>

You may also find a copy of this Price Transparency on our website at: www.denaliobgyn.com