

PLEASE NOTE: Depending on your health insurance plan, charges may be less than those listed. We are an in-network preferred provider with Aetna and Premera Blue Cross Blue Shield.

1 UNIT = 15 minute increments, all listed as 1 unit pricing

CPT® Code 99202	Level II Exam, New	\$205.00
CPT® Code 99212	Level II Re-Eval, Est.	\$135.00
CPT® Code 99203	Level III Exam, New	\$295.00
CPT® Code 99213	Level III Re-Eval, Est.	\$210.00
CPT® Code 98940	1-2 Regions CMT, Spinal	\$70.00
CPT® Code 98941	3-4 Regions CMT, Spinal	\$85.00
CPT® Code 98943	1+ Regions CMT, Extraspinal	\$70-
CPT® Code 97014	Electrical Stimulation	\$50.00
CPT® Code 97035	Ultrasound	\$50.00
CPT® Code 97140	Manual Therapy Techniques	\$44-

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You can review costs at the Alaska Department of Health and Social Services Health Care Cost Transparency website at <http://dhss.alaska.gov/dph/VitalStats/Pages/transparency.apx>.

You will be provided
with an estimate of
the anticipated
charges of your care,
upon request.

Please do not
hesitate to ask for
information.



Anchorage Municipal Code 16.130.010
www.muni.org/coho