

## Good Faith Estimate Fee Disclosure

СРТ	Visit Type	Charge Am	ount \$	
99213 99214 99215	Acute/Sick Visits Level 3 office visit Level 4 office visit Level 5 office visit	\$ \$ \$	144.00 204.00 271.00	
99203 99204 99205	NP Level 3 office visit NP Level 4 office visit NP Level 5 office visit	\$ \$ \$	202.00 304.00 381.00	*NP = New Patient
99391 99392 99393 99394 99395 99396 99397	Preventive Care Established Patient Ages less than 1yr Ages 1yr - 4yr Ages 5yr - 11yr Ages 12yr - 17yr Ages 18yr - 39yr Ages 40yr - 64yr Ages 65yrs +	\$ \$ \$ \$ \$	251.00 267.00 200.00 215.00 221.00 233.00 248.00	
99381 99382 99383 99384 99385 99386 99387	Preventive Care New Patient Ages less than 1yr Ages 1yr - 4yr Ages 5yr - 11yr Ages 12yr - 17yr Ages 18yr - 39yr Ages 40yr - 64yr Ages 65yrs +	\$ \$ \$ \$ \$	278.00 290.00 224.00 249.00 243.00 279.00 302.00	
G0438 G0439 99497	Medicare Preventive Visit Codes AWV, Initial AWV, Subsequent Advance Care Plan	\$ \$ \$	265.00 180.00 120.00	*AWV = Annual Wellness Visit
93000 17111 90460 90461 90471 90472	EKG Test Wart Destruction Peds Initial Immunization (admin) Peds Additional Immunizations (admin) Adult Initial Immunization (admin) Adult Additional Immunizations (admin)	\$ \$ \$ \$ \$	35.00 175.00 53.00 28.00 55.00 34.00	

Immunization charges will vary and include 2 fees, one for drug administration and one for the actual immunization. Fees vary depending on how many injections are given and how many components are in the immunization(s).

Current immunization costs are included on the consent form that is signed prior to administration.

## 8/26/2022