

2022 FEE SCHEDULE Procedure Fees (FEE): from 01/01/2015

Practice Procedure Codes

CPT	Description	Patient-facing description	Fee
0011A	MODERNA COVID-19 VACCINE ADMIN - 1ST DOSE	ADM SARSCOV2 100MCG/0.5ML1ST	\$83.00
0012A	MODERNA COVID-19 VACCINE ADMIN - 2ND DOSE	ADM SARSCOV2 100MCG/0.5ML2ND	\$83.00
0013A	MODERNA COVID-19 VACCINE ADMIN. 3RD DOSE	ADM SARSCOV2 100MCG/0.5ML3RD	\$83.00
0064A	MODERNA COVID-19 VACCINE ADMIN. BOOSTER	ADM SARSCOV2 50MCG/0.25MLBST	\$83.00
10060	INCISION AND DRAINING OF ABSCESS	EG, CARBUNCLE, SUPPURATIVE HIDRADENITIS	\$127.70
10120	INCISION & REMOVAL FOREIGN BODY SUBQ TISS SIMPLE	SIMPLE REMOVAL OF FOREIGN BODY FROM TISSUE	\$160.87
10121	INCISION/REMOVAL OF FOREIGN	ACCESSED BENEATH THE SKIN, COMPLEX	\$278.90
11100	SKIN LESION BIOPSY-SINGLE		\$116.00
11101	SKIN LESION BIOPSY-EACH ADDTL		\$89.00
11200	SKIN TAG REMOVAL-1ST 15 LESIONS	MULTIPLE FIBRO CUTANEOUS TAGS, ANY AREA;	\$92.00
11201	SKIN TAG REMOVAL-ADDTL 10 LESIONS	MULTIPLE FIBRO CUTANEOUS TAGS; ANY AREA >10	\$19.00
11719	TRIMMING OF NONDYSTROPHIC NAIL	TRIMMING OF NONDYSTROPHIC NAIL, ANY NUMBER	\$42.00
11720	DEBRIDEMENT 1-5	DEBRIDEMENT OF NAIL(S) BY ANY METHOD(S); 1-5	\$34.00
11721	DEBRIDEMENT 6 OR MORE	DEBRIDEMENT OF NAIL(S) BY ANY METHOD(S); SIX >	\$46.00
11730	AVULSION, NAIL	SEPARATION OF SINGLE NAIL PLATE FROM NAIL BED	\$119.68
11750	PERMANENT NAIL REMOVAL	PARTIAL OR COMPLETE, (EG, INGROWN OR DEFORMED)	\$166.83
11982	REMOVAL NON-BIODEGRADABLE DRUG DELIVERY IMPLANT	NON-BIODEGRADABLE DRUG DELIVERY IMPLANT	\$120.05
12002	SIMPLE REPAIR (2.6 CM-7.5 CM)	ALP, NECK, UNDERARMS, GENITALS	\$121.35
17003	DESTRUCTION OF LESION-EA ADDTL, MULTIPLE VISITS	LASER SURGERY, ELECTROSURGERY, CRYOSURGERY, CHEMOS	\$20.00
17110	WART REMOVAL	LASER SURGERY, ELECTROSURGERY, CRYOSURGERY, CHEMOS	\$116.06
20526	CARPAL TUNNEL INJECTION	INJECTION, THERAPEUTIC	\$126.54
20550	TEND SHEATH, LIGAMENT INJECTION	LIGAMENT, OR MUSCLE MEMBRANE	\$57.67

20551	TENDON ORIG, INSERT INJECTION	SINGLE TENDON ORIGIN/INSERTION	\$59.12
20552	TRIGGER PT INJECTION 1-2 MUSCLE	ONE OR TWO MUSCLE(S)	\$55.85
20553	TRIGGER PT INJECTION 3+ MUSCLE	THREE OR MORE MUSCLE(S)	\$63.83
20610	CORTISONE INJECTION	ARTHROCENTESIS, ASPIRATION AND/OR INJECTION	\$65.64
20612	INJECTION-ASP/IM GANGLION	ASPIRATION AND/OR INJECTION OF GANGLION CYST(S)	\$64.92
23650	CLOSED TREATMENT OF SHOULDER DISLOCATION, WITH MANIPULATION; WITHOUT ANESTHESIA	DISLOCATION, WITH MANIPULATION; WITHOUT ANESTHESIA	\$335.12
23930	INCISION AND DRAINAGE, UPPER ARM OR ELBOW AREA	ABSCESS DEEP OR HEMATOMA	\$382.26
29105	SPLINT APPLICATION-LONG ARM	APPLICATION OF LONG ARM SPLINT (SHOULDER TO HAND)	\$83.78
29125	SPLINT APPLICATION-SHORT ARM	NON-MOVEABLE, SHORT ARM SPLINT (FOREARM TO HAND)	\$65.64
29130	FINGER SPLINT STATIC	APPLICATION OF NON-MOVABLE, HINGED FINGER SPLINT	\$42.07
29131	FINGER SPLINT-DYNAMIC	APPLICATION OF MOVEABLE, HINGED FINGER SPLINT	\$52.95
29260	ELBOW OR WRIST STRAPPING	STRAPPING; ELBOW OR WRIST	\$30.83
29280	HAND OR FINGER STRAPPING	STRAPPING: HAND OR FINGER	\$30.10
29505	APPLICATION OF LEG SPLINT (ANKLE OR TOES)	(THIGH TO ANKLE OR TOES)	\$88.49
29515	SHORT LEG SPLINT	APPLICATION OF SHORT LEG SPLINT (CALF TO FOOT)	\$71.81
29540	ANKLE AND/OR FOOT STRAPPING	STRAPPING; ANKLE AND/OR FOOT	\$29.01
29550	TOES STRAPPING	STRAPPING; TOES	\$19.22
29590	SPLINT APPLICATION-FOOT		\$142.00
30901	NOSE-CONTROL HEM. ANT	CONTROL OF NOSEBLEED	\$164.73
30905	CONTROL NASAL HEMORRHAGE	POSTERIOR, WITH POSTERIOR NASAL PACKS AND/OR CAUTE	\$368.90
36415	VENIPUNCTURE		\$16.00
36416	COLLECTION OF CAPILLARY BLOOD SPECIMEN	(EG, FINGER, HEEL, EAR STICK)	\$4.00
36416,L	DNA COLLECTION - SMEAR CARD		\$15.00
58100	ENDOMETRIAL SAMPLING	BIOPSY OF UTERUS LINING	\$106.24
58300	IUD INSERTION	INSERTION OF INTRAUTERINE DEVICE (IUD)	\$106.63
58301	IUD REMOVAL	REMOVAL OF INTRAUTERINE DEVICE (IUD)	\$114.89
65205	REMOVAL OF FOREIGN BODY IN EXTERNAL EYE, CONJUNCTIVA	CONJUNCTIVA,SUPERFICIAL	\$34.27

69200	REMOVAL FOREIGN BODY FROM EXTERNAL AUDITORY CANAL WITHOUT GENERAL ANESTHESIA	PROFESSIONAL (NON-FACILITY RATE)	\$83.42
69210	REMOVAL OF IMPACT EAR WAX, ONE EAR	EAR WASH	\$53.77
710000	DOT/CDL 2021 FEE	UA/AUD/VISUAL INCLUDED	\$100.00
710001	2022 PHYSICAL EXAM FOR CDL CERT	INCLUDES AUD/VISUAL/UA	\$125.00
710002	FRA CERTIFICATION / RECERTIFICATION		\$45.00
710002,L	FRA CERTIFICATION/RECERTIFICATION		\$45.00
710029	DOT/CDL RECERTIFICATION FMCSA		\$75.00
80048	BASIC METOBOLIC PANEL		\$16.00
80053	COMPLETE METABOLIC PANEL	(CMP14+EGFR) BLOOD TEST ON BLOOD CHEMICALS	\$15.00
80055	OBSTETRIC BLOOD TEST PANEL W/ HEPATITIS B SURFACE ANTIGEN	CBC, HEP B, SURFACE ANTIGEN, RPR, FTA, IGG, PRENAT	\$60.00
80061	LIPID PANEL	LIPIDS (CHOLESTEROL AND TRIGLYCERIDES)	\$15.00
80074	ACUTE HEPATITIS PANEL	(HAAB), IGM AB,(HBCAB),(HBSAG),HEPATITIS C AB	\$60.00
80076	HEPATIC FUNCTION PANEL (LIVER FUNCTION BLOOD TEST PANEL)	TOTAL PROTEIN, ALBUMIN, BILIRUBIN, AND LIVER ENZYM	\$12.00
80305	DRUG SCREEN, ANY NUMBER OF DRUG CLASSES FROM DRUG CLASS LIST A; DIRECT OBSERVATION	TESTING FOR PRESENCE OF DRUG, READ BY DIRECT OBSER	\$30.00
80305DS	DRUG SCREEN-INSTANT RESULTS	MONITOR SCREEN 14-DRUG CLASS PROFILE	\$80.00
80307	DRUG SCREEN 9 WITH REFLEX CONFIRMATION	(AMP,BAR,BZO,COC,PCP,THC,OPI,OXY, MD)	\$70.00
81000	URINALYSIS, USING MICROSCOPE	GLUCOSE, HEMOGLOBIN, BILIRUBIN, NITRITE, KETONES	\$10.00
81001	URINALYSIS, ROUTINE W/RFX	MANUAL URINALYSIS TEST WITH EXAMINATION USING MICR	\$10.00
81002	URINALYSIS, MANUAL TEST	BY DIP STICK OR TABLET REAGENT	\$8.00
81002LHI	URINE DIP	STICK/TABLET RGNT NON AUTO W/O MICROSCOPE	\$15.00
81003	URINE TEST COMBINATION W/SATURATION CALCULATIONS, (2) 100.0 ML URINE SAMPLES TESTS BILIRUBIN, GLUCOSE, HEMOGLOBIN	EVALUATE STONE COMP, METABOLIC FCTRS, NEPHROPATHY	\$20.00
81025	URINE PREGNANCY TEST	VISUAL COLOR COMPARISON METHODS	\$15.00
82043	URINE, MICROALBUMIN WITH CREATININE	MICROALBUMIN, RANDOM URINE (WITH CREATININE)	\$10.00
82044	URINE ALBUMIN; URINE, MICROALBUMIN, SEMIQUANTITATIVE	(EG, REAGENT STRIP ASSAY)	\$10.00

82075	ALCOHOL (ETHANOL) BREATH	MEASUREMENT OF ALCOHOL LEVEL IN BREATH SPECIMEN	\$30.00
82105	ALPHA-FETOPROTEIN, (AFP) LEVEL SERUM (0.5 ML-1.0 ML SPECIMEN COLLECTION REQUIRED) SST (GOLD)	AFP, MATERNAL RISK INTERPRETATION	\$18.64
82270	OCCULT BLOOD, STOOL SCREENING BY PER-OXIDASE ACTIVITY (I.E. FROM THREE DIFFERENT BOWEL MOVEMENTS), ONE CARD PER COLLECTION TIME.	1,2, OR 3 CONSECUTIVE SPECIMENS	\$10.00
82272	BLOOD,OCCULT, BY PEROXIDASE ACTIVITY (EG, GUAIAIC), QUALITATIVE, FECES, 1-3 SIMU	GI BLEED: COLON CANCER, POLYPS, PEPTIC ULCERS, ETC	\$16.00
82306	VITAMIN D, 25 HYDROXY (TOTAL D2/D3) (0.03 ML-1.0 ML SPECIMEN COLLECTION REQUIRED) SST (GOLD)	VITAMIN D; 25 HYDROXY	\$35.00
82378	CARCINOEMBRYONIC ANTIGEN (CEA) (0.3 ML-1.0 ML) SST (GOLD)	ELECTROCHEMILUMINESCENCE IMMUNOASSAY (ECLIA)	\$25.00
82952	BLOOD GLUCOSE (SUGAR) TOLERANCE TEST (0.3 ML-1.0 ML) SST (GOLD) OR SODIUM FLUORIDE (GRAY)	GTT FASTING, GTT 1HR, GTT 2HR, GTT 3HR	\$5.00
82962	FSBS	GLUCOSE, BLOOD BY GLUCOSE MONITORING DEVICE(S)	\$5.00
83036	HEMOGLOBIN A1C (1.0 ML-2.0 ML) EDTA (LAVENDER)	NONPOROUS ION EXCHANGE HIGH PERFORMANCE LIQUID CHR	\$12.00
84153	PSA-TOTAL (0.3 ML- 1.0 ML SPECIMEN REQUIRED) SST GOLD, ALT: LITHIUM HEPARIN (LT GREEN) EDTA (LAVENDER)	ELECTROCHEMILUMINESCENCE IMMUNOASSAY (ECLIA)	\$25.00
84154	PSA FREE (0.3 ML- 1.0 ML REQUIRED) SST GOLD, ALT: LITHIUM HEPARIN (LT GREEN) EDTA (LAVENDER)	ELECTROCHEMILUMINESCENCE IMMUNOASSAY (ECLIA)	\$25.00
84403	TESTOSTERONE (HORMONE) LEVEL, TOTAL, TSH		\$35.00
84445	THYROID STIMULATING IMMUNE TSI		\$58.00
84460	LIVER ENZYME (SGPT), LEVEL	ALT+AST-035188-U	\$6.00
84550	URIC ACID LEVEL; BLOOD		\$10.00
85014	HEMATOCRIT (HCT)		\$32.00
85018	HEMOGLOBIN (HGB)		\$32.00
85018,QW	HEMOGLOBIN		\$32.00
85025	CBC WITH DIFFERENTIAL/PLATELET	AUTOMATED WBC COUNT	\$11.00
85610	PT & INR		\$37.00
85651	ERYTHROCYTE, SEDIMENTATION RATE (ESR)		\$11.00
86141	MEASUREMENT C-REACTIVE PROTEIN	DETECTION OF INFECTION OR INFLAMMATION	\$15.00
86225	ANTI-DSDNA ANTIBODIES	MEASUREMENT OF DNA ANTIBODY, NATIVE OR DBLE STRND	\$17.00

86308	HETEROPHILE ANTIBODIES;SCREENING		\$11.00
86328	DETECTION OF SEVERE ACUTE RESPIRATORY SYNDROME	COVID-19 TESTING (INSURANCE BILLING)	\$50.00
86580	PPD		\$32.00
86803	HCV ANTIBODY RFX TO QUANT PCR	HEPATITIS C ANTIBODY	\$20.00
87045	CULTURE,BACTERIAL;STOOL,AEROBIC WITH ISOLATION AND PRELIMINARY EXAMINATION		\$21.00
87081	CULTURE,PRESUMPTIVE,PATHOGENIC ORGANISMS SCREEN		\$16.00
87210	WET PREP		\$21.00
87220	KOH		\$26.00
87400	INFLUENZA A OR B SCREENING		\$37.00
87624	DETECTION TEST BY NUCLEIC ACID FOR HUMAN PAPILOMAVIRUS (HPV), HIGH-RISK TYPES		\$40.00
87804	INFLUENZA SCREENING		\$37.00
87804,QW	INFLUENZA SCREENING		\$37.00
87807	RSV SCREENING		\$37.00
87880	STREP SCREEN		\$37.00
90460	IMMUNIZATION ADMINISTRATION THROUGH 18 YEARS OF AGE VIA ANY ROUTE OF ADMINISTRAT	VFC ADDITIONAL INJ.	\$40.00
90460,SL	IMMUNIZATION ADMINISTRATION 0- 18 YR OF AGE VIA ANY ROUTE OF ADMINISTRATION	VFC ADM. 18 UNDER ONLY	\$40.00
90461	ADDITIONAL IMMUN INJ. VFC		\$26.00
90461,SL	ADDITIONAL IMMUNIZATION ADMINISTRATION THROUGH 18 YR OF AGE VIA ANY ROUTE OF ADMINISTRATION	VFC VACCINE INJ. UNDER 18YRS OLD	\$26.00
90471	FLU IMMUNIZATION ADMINISTRATION	PERCUTANEOUS, INTRADERMAL, SUBCUTANEOUS	\$25.62
90471,FLU	FLU SHOT ADMINISTRATION		\$11.00
90471,SL	ADDITIONAL ADMINISTRATION	REPORT WITH OTHER VACCINATION	\$0.00
90472	INJECTION ADMIN FEE-EACH ADDTL		\$42.00
90472,SL	ADDITIONAL ADMINISTRATION		\$0.00
90473	IMMUNIZATION ADMINISTRATION (SINGLE/COMBINATION		\$47.00
90473,SL	ADDITIONAL ADMINISTRATION		\$0.00
90474,SL	ADDITIONAL ADMINISTRATION		\$0.00
90620	MENB (BEXERO)		\$180.00
90620,SL	BEXSERO		\$0.00

90632	HEPATITIS A VACCINE (HEPA),ADULT DOSAGE		\$95.00
90633	HEPATITIS A VACCINE (HEPA), PEDIATRIC/ADOLESCENT		\$32.00
90633,SL	HEPATITIS A VACCINE (HEPA), PEDIATRIC/ADOLESCENT		\$0.00
90647	VACCINE-HIB		\$26.00
90647,SL	HIB VACCINE		\$0.00
90649	VACCINE-HPV (GARDASIL)		\$189.00
90649,SL	HPV VFC VACCINE (GARDASIL)		\$0.00
90650	VACCINE-HPV		\$189.00
90651	HPV0 (GARDASIL)		\$189.00
90651,SL	HPV9 (GARDASIL) VFC		\$0.00
90653	INFLUENZA VACCINE, ADJUVANTED	FLUAD	\$0.01
90655	VACCINE-INFLUENZA <3 YO		\$16.00
90655,SL	INFLUENZA VIRUS VACCINE,TRIVALENT,SPLIT VIRUS,PRESERVATIVE FREE,WHEN ADMINIS	3YR AND YOUNGER	\$16.00
90656	AFLURIA QUAD		\$16.00
90656,SL	AFLURIA QUAD	VFC	\$0.00
90657	FLUVIRIN 2021-2022 45 MCG (15 MCG X 3)/0.5 ML 6-35 MO		\$16.00
90657,SL	FLUZONE QUAD PEDI 2015-16(PF) 30 MCG (75 MCGX4)/0.25 ML		\$0.00
90658	VACCINE-INFLUENZA 3+ YO		\$16.00
90658,SL	3+ YRS FLUZONE	VFC	\$0.00
90660	VACCINE-FLU MIST		\$16.00
90661	FLUCELVAX QUADRIVALENT		\$51.00
90661,SL	FLUCELVAX QUADRIVALENT		\$0.00
90662	FLUZONE HIGH DOSE	INFLUENZA VIRUS VACCINE, SPLIT VIRUS,PRESERVATIVE	\$72.00
90669	VACCINE-PREVNAR		\$63.00
90669,SL	PREVNAR VACCINE		\$0.00
90670	PCV13 VACCINE		\$26.00
90670,SL	PCV13 VFC		\$0.00
90672,SL	FLUMIST (MEDIMMUNE) 0.2ML NASAL SPRAY	VFC	\$16.00
90674	FLUCELVAX QUADRIVALENT, 4+ YRS OLD	INFLUENZA VIRUS VACCINE, QUADRIVALENT	\$51.00
90674,SL	FLUCELVAX QUADRIVALENT, 4+ YRS OLD		\$0.00

90680	ROTATEQ		\$57.97
90680,SL	ROTATEQ		\$0.00
90686	INFLUENZA VACCINE		\$19.03
90686,SL	INFLUENZA VACCINE	VFC	\$0.00
90696,SL	DTAP/IPV (KINRIX) 4-6 YRS VFC		\$0.00
90698	PENTACEL VACCINE		\$26.00
90698,SL	DTAP/HIV/IPV PENTACEL VFC 6WKS - 5 YRS OLD		\$0.00
90700	VACCINE (DAPTACEL)		\$0.00
90700,SL	DPAT VACCINE (INFANRIX) 6WK+ VFC		\$0.00
90702,SL	DP (PEDIATRIC) 6WK+ VFC		\$0.00
90707	VACCINE-MMR		\$47.00
90707,SL	MMR VACCINE		\$0.00
90710,SL	PROQUAD MMR/V VFC 11 YRS+		\$0.00
90713	VACCINE-IPV		\$32.00
90713,SL	IPV VACCINE		\$0.00
90714	VACCINE -TETANUS DIPHTHERIA 7+ YRS OLD	TETANUS DIPHTHERIA TOXOIDS ADSORBED (TD) 7+ YR OLD	\$21.00
90715	VACCINE-TDAP		\$26.00
90715,SL	TDAP VACCINE		\$0.00
90716	VACCINE-VARICELLA		\$72.00
90716,SL	VARICELLA VACCINE		\$0.00
90717	TETANUS DIPHTHERIA VACCINE		\$105.00
90718	VACCINE-TETANUS DIPHTHERIA		\$21.00
90718,SL	TD VACCINE		\$0.00
90723	DTAP/HEPB/IPV PEDIARIX	PEDIARIX	\$70.49
90723,SL	VFC DTAP/HEPB/IPV PEDIARIX		\$0.00
90732	VACCINE-PNEUMONOCOCCAL PPSV23		\$125.92
90734	MININGITIS VACCINE		\$158.00
90734,SL	MENACTRA MCV4P		\$0.00
90736	ZOSTER VACCINE SHINGLES		\$168.00
90744	VACCINE HEP B-CHILD (ENERGIX)		\$32.00
90744,SL	HEP B VACCINE		\$0.00
90746	VACCINE-HEPATITIS B		\$84.00
90748	VACCINE-COMVAX		\$58.00
90748,SL	HEPB/HIB 6 WKS + VFC COMVAX		\$0.00

90749	UNLISTED VACCINE/TOXOID	FLUCELVAX QUADRIVALENT 4+ YEARS OLD	\$51.00
90750	SHINGRIX		\$168.00
91301	MODERNA COVID-19 VACCINE		\$0.00
91306	MODERNA COVID-19 VACCINE		\$0.00
92499LHI	ISHIHARA COOR VISION		\$10.00
92551	AUDIOMETRY SCREEN		\$32.00
92551,L	AUDIOGRAM		\$30.00
92551,L1	AUDIOGRAM		\$30.00
92552	AUDIOGRAM (PURE TONE AIR TESTING)		\$30.00
93000	EKG		\$68.00
94010	SPIROMETRY		\$89.00
94060	SPIROMETRY W/BRONCHODILATOR		\$142.00
94150	PEAK FLOW VITAL CAPACITY		\$37.00
94620	PULMONARY STRESS TESTING; SIMPLE EXERCISE TEST		\$60.00
94640	INHALATION TREATMENT		\$42.00
94644	CONTINUOUS INHALATION TREATMENT W/ AEROSOL MEDICATION FOR ACUTE AIRWAY OBSTRUC		\$47.00
94760	PULSE OXIMETRY		\$16.00
96110	DEVELOPMENTAL TEST		\$184.00
96360	INTRAVENOUS INFUSION	IV INFUSION,DYDRATION, INITIAL 31 MINS TO 1 HOUR	\$121.00
96361	INTRAVENOUS INFUSION, ADDITIONAL HOUR		\$82.00
96372	THERAPEUTIC PROPHYLACTIC /DX INJECTION SUBQ/IM		\$47.00
97597	DEBRIDEMENT (EG,HIGH PRESSURE WATERJET WITH/WITHOUT SUCTION, SHARP SELECTIVE DEVICE		\$68.00
97602	REMOVAL OF DEVITALIZED TISSUE FROM WOUND,NON-SELECTIVE DEBRIDEMENT W/O ANESTHESIA,WET TO MOIST DRESSING ENZYMATIC, ABRASION INCL. TOPICAL APPLICATION		\$62.00
97605	NEG. PRESSURE WOUND DRESSING		\$37.00
99000	SPECIMEN HANDLING		\$15.00
99000,L1	DNA		\$30.00
99000-L1	NON-DOT COC UDS COLLECTION		\$35.00
99002	QUANTILATIVE RESPIRATOR FIT TESTING		\$80.00

99072	ADD'L SUPPLIES - PPE		\$42.50
99080	INSURANCE/DISABILITY REPORT		\$26.00
99172	VISION SCREEN		\$32.00
99173	VISION SCREEN		\$16.00
99199	NO CALL NO SHOW		\$25.00
99202	EXPANDED NEW PATIENT		\$100.00
99203	DETAILED - NEW PATIENT		\$132.00
99204	COMPREHENSIVE-NEW PATIENT		\$184.00
99205	HIGH COMPLEXITY-NEW PATIENT		\$210.00
99211	PROBLEM FOCUSED		\$42.00
99212	PROBLEM FOCUSED-ESTABLISHED PATIENT		\$80.00
99213	EXPANDED FOCUSED-ESTABLISHED PATIENT		\$105.00
99214	DETAILED - ESTABLISHED PATIENT		\$158.00
99215	COMPREHENSIVE-ESTABLISHED PATIENT		\$184.00
99241	CONSULTATION-PROBLEM FOCUSED		\$110.00
99242	CONSULTATION EXPANDED PROBLEM FOCUSED		\$132.00
99243	CONSULTATION DETAILED		\$158.00
99244	CONSULTATION COMPREHENSIVE		\$210.00
99245	CONSULTATION HIGH COMPLEXITY		\$263.00
99354	PROLONGED TIME W/CONTACT-FIRST HOUR		\$289.00
99355	PROLONGED TIME W/CONTACT-EACH ADD. 30 MIN		\$158.00
99358	PROLONGED CLINICIAN TIME W/O DIRECT CONTACT 1ST HR		\$263.00
99359	PROLONGED CLINICIAN TIME W/O DIRECT CONTACT EA 30		\$132.00
99381	PREVENTIVE NEW PATIENT <1 YEAR	INT COMPREHENSIVE PREVENTIVE MEDICINE EVAL <1YR	\$95.00
99382	PREVENTIVE NEW PATIENT 1-4 YEAR	INT NEW PATIENT PREVENTIVE MEDICINE EVAL 1-4 YRS	\$100.00
99383	PREVENTIVE VISIT NEW PATIENT 5-11 YEAR	INT NEW PATIENT PREVENTIVE MEDICINE EVAL 5-11 YRS	\$105.00
99384	PREVENTIVE VISIT NEW PATIENT 12-17 YEAR		\$115.00
99385	PREVENTIVE VISIT NEW PATIENT 18-39 YEARS	INITIAL COMPREHENSIVE PREVENTIVE MEDICINE EVAL	\$115.00

99385,OH	PREVENTIVE VISIT-NEW PATIENT 18-39 YEARS	OCCUPATIONAL HEALTH- LOCAL CNTS(AUD/VIS/UA)	\$160.00
99385,OH1	PREVENTIVE VISIT-NEW PATIENT 18-39 YEARS	OCCUPATIONAL HEALTH- LOCAL CONTRACTS	\$120.00
99386	PREVENTIVE VISIT-NEW PATIENT 40-64 YEARS		\$140.00
99386,OH	PREVENTIVE VISIT-NEW PATIENT 40-64 YEARS	OCCUPATIONAL HEALTH- LOCAL CONTRACTS	\$125.00
99386,OH1	PREVENTIVE VISIT-NEW PATIENT 40-64 YEARS	OCCUPATIONAL HEALTH- LOCAL CNTS (AUD/VIS/UA)	\$180.00
99387	PREVENTIVE VISIT NEW PATIENT >60 YEARS	INITIAL NEW PATIENT PREVENTIVE MEDICINE EVAL	\$160.00
99387,OH	PREVENTIVE VISIT-NEW PATIENT >65 YEARS		\$71.00
99387,OH1	PREVENTIVE VISIT-NEW PATIENT >66 YEARS		\$86.00
99391	PREVENTIVE VISIT-ESTABLISHED PATIENT <1 YEAR		\$105.00
99392	PREVENTIVE VISIT-ESTABLISHED PATIENT 1-4 YEAR		\$116.00
99393	PREVENTIVE VISIT-ESTABLISHED PATIENT 5-11 YEAR		\$132.00
99394	PREVENTIVE VISIT-ESTABLISHED PATIENT 12-17 YEAR		\$158.00
99395	PREVENTIVE VISIT-ESTABLISHED PATIENT 18-39 YEAR		\$184.00
99395,OH1	PREVENTIVE VISIT-ESTABLISHED PATIENT 18-39 YEAR	OCCUPATIONAL HEALTH- LOCAL CONTRACTS	\$120.00
99396	PREVENTIVE VISIT-ESTABLISHED PATIENT 40-64 YEAR		\$210.00
99396,OH1	PREVENTIVE VISIT-ESTABLISHED PATIENT 40-64 YEAR	OCCUPATIONAL HEALTH- LOCAL CONTRACTS	\$140.00
99397	PREVENTIVE VISIT-ESTABLISHED PATIENT >65 YEAR		\$210.00
99397,OH1	PREVENTIVE VISIT-ESTABLISHED PATIENT >65 YEAR	OCCUPATIONAL HEALTH- LOCAL CONTRACTS	\$150.00
99406	TOBACCO CESSATION COUNSELING		\$0.00
99407	TOBACCO CESSATION MEDICATION		\$0.00
99455	VA MEDICAL DISABILITY		\$190.00
99456	SSI EVALUATION		\$158.00
99499	VITAL SIGNS		\$10.00
A4565	SLING (SHOULDER/ARM		\$26.00
A4570	FROG SPLINT		\$24.00

A4615	NASAL CANNULA		\$5.00
A9150	NON-PRESCRIPTION DRUGS		\$0.00
A9270	AS MEDICATIONS		\$0.00
C19MFEE	MODERNA COVID 19 VACCINE ADMIN FEE		\$0.00
C19MFEE2ND	MODERNA COVID 19 VACCINE ADMIN FEE - 2ND DOSE		\$0.00
C9290	INJECTION, BUPIVACAINE LIPOSOME, IMG		\$4.00
DISCEMPSC	2ND PART OF SELF PAY VISIT	45 DAY GRACE PERIOD	\$0.00
E0113	CRUTCH UNDERARM WOOD ADJUSTABLE		\$60.00
G0008	ADMIN INFLUENZA AGE 19>		\$15.62
G0009	ADMIN PNEUMOVAX		\$12.00
G0010	ADMIN HEP B		\$12.00
G0101	PELVIC BREAST EXAM		\$68.00
G0108	DIABETES TRAINING 30 MIN		\$87.00
G0328	COLORECTAL CANCER SCREENING;FECAL OCCULT BLOOD TEST, IMMUNOASSAY, 1-3		\$21.00
G0402	INITIAL PREVENTIVE PHYSICAL EXAMINATION	INITIAL PREVENTIVE PHYSICAL EXAMINATION	\$210.00
G0438	PPPS FIRST ANNUAL WELLNESS VISIT		\$210.00
G0439	ANNUAL WELLNESS VISIT - SUBSEQUENT		\$184.00
G0444	ADULT DEPRESSION SCREENING	ADULT DEPRESSION ANNUAL SCREENING	\$18.00
G8553	ENCOUNTER WITH E-PRESCRIBING		\$0.00
G9141	INFLUENZA VACCINE		\$16.00
H0033	PO MED ADMIN SUPERVISED		\$13.00
I001	TETANUS - DIPHTHERIA BOOSTER		\$40.00
I001A	TETANUS-DIPHTHERIA-PERTUSSIS (TADAP)	FIRE DEPARTMENT-CHS	\$70.00
I005	INFLUENZA SHOT-VACCINATION AND ADMINISTRATION	FIRE DEPARTMENT-CHS	\$30.00
I010	MMR VIRUS VACCINATION AND ADMINISTRATION	FIRE DEPARTMENT-CHS	\$50.00
I016	PNEUMOCOCCAL IMMUNIZATION-VACCINATION AND ADMINISTRATION	FIRE DEPARTMENT-CHS	\$126.00
J0170	EPINEPHRINE		\$6.00
J0540	BICILLIN 1.2		\$108.00
J0561	BICILLIN 1,200,000	1.2 = 12 UNITS AND 0.6 = 6 UNITS	\$108.00
J0696	CEFTRIAZONE 250 MG		\$37.00
J1030	INJECTION, METHYLPREDNISOLONE ACETATE, 40 MG	INJECTION, METHYLPREDNISOLONE ACETATE, 40 MG	\$10.00

J1050	MEDROXYPROGESTERONE 150 MG/ML INTRAMUSCULAR SUSPENSION	(BILL BY UNITS) 150MG = 1UNITS	\$100.00
J1055	DEPO-PROVERA		\$100.00
J1070	DEPO-TESTOSTERONE 100		\$11.00
J1071	INJ TESTOSTERINE CYPIONATE		\$32.00
J1080	INJECTION, TESTOSTERONE 1 CC, 200MG	DEPO-TEST	\$32.00
J1100	DEXAMETHASONE 1M		\$2.00
J1200	DIPHENHYDRAMINE 50 MG/ML INJ		\$1.50
J1817	INSULIN FOR ADMINISTRATION THROUGHT DME. PER 50 UNITS		\$11.00
J1820	INSULIN 100 UNITS		\$11.00
J1885	INJECTION, KETOROLAC TROMETHAMINE, PER 15 MG		\$2.00
J2001	LIDOCAINE 50CC		\$11.00
J2405	ONDANSETRON HCL 4MG2ML INJECTION SOLUTION		\$32.00
J3301	KENALOG INJECTION 10MG		\$16.00
J3360	DIAZEPAM 5 MG		\$26.00
J3420	VITAMIN B12		\$16.00
J3490	DOXYCYCLINE HYCLATE		\$160.00
J7030	0.9% SODIUM CHLORIDE - INTRAVENOUS SOLUTION		\$10.00
J7611	ALBUTEROL 1MG		\$2.00
J7613	ALBUTEROL,SULFATE INHALATION SOLUTION		\$1.00
J7644	IPRATROPIUM BROMIDE, INHALATION SOLUTION		\$5.00
J7799	EPINEPHRINE 1MG/ML		\$6.00
L,710000	DOT/CDL NEW CERTIIFCATION		\$135.00
L,710001	DOT/CDL RECERTIFICATION		\$100.00
L,710002	FRA CERTIFICATION/RECERTIFICATION/PERIOD IC		\$45.00
L,710029	DOT/CDL RECERTIFICATION		\$75.00
L,92551	AUDIOGRAM		\$30.00
L,99002	QUANTITATIVE RESPIRATOR FIT TESTING		\$80.00
L,PHA,1	PERIODIC HEALTH ASSESSMENT, FOCUSED EXAM		\$85.00
L,PHN	PERIODIC HEALTH ASSESSMENT, BRIEF OFFICE VISIT		\$65.00
L-36415	VENIPUNCTURE/BLOOD DRAW		\$15.00

L-92499	VISION SCREEN		\$10.00
L-92552	AUDIOGRAM (PURE TONE AIR)		\$30.00
L-93000	EKG		\$70.00
L-99000	STOOL FOR OCCULT BLOOD		\$20.00
L-99201	PERIODIC HEALTH ASSESSMENT		\$65.00
L-99202	PERIODIC HEALTH ASSESSMENT- FOCUSED EXAM		\$85.00
L-99499	PAP/PELVIC		\$65.00
L-DOT/CDL	DOT/CDL RECERTIFICATION		\$100.00
L1-99000	DOT COC UDS COLLECTION		\$35.00
L1-99499	VITAL SIGNS		\$10.00
L1810	KNEE ORTHOSIS-HINGED KNEE BRACE	HINGED KNEE BRACE- WRAPAROUND/HOOK&LOOP STRAPS	\$51.00
L1820	KNEE BRACE SLEEVE, ELASTIC WITH PADS AND JOINTS, WITHOUT PATELLAR		\$132.00
L1830	KNEE ORTHOSIS, IMMOBILIZER, CANVAS LONGITUDINAL PREFABRICATED, OFF THE SHELF	22" COMFOR KNEE IMMOBILIZER- UNIVERSAL	\$76.00
L1902	ANKLE FOOT ORTHOSIS, ANKLE GAUNTLET,PREFABRICATED, OFF THE SHELF		\$79.00
L2,99000	DNA		\$30.00
L3908	WRIST SPLING		\$63.00
L710028	DOT/CDL NEW CERTIFICATION FMCSA		\$100.00
L710029	DOT/CDL RECERTIFICATION FMCSA		\$75.00
L92551	AUDIOGRAM		\$30.00
LABCORP,I	CBC,CMP,LIPID		\$154.00
LABCORP,II	CBC, CMP, LIPID, PSA		\$249.00
LABCORP1	CBC, CMP, LIPID		\$154.00
LABCORP2	CBC, CMP, LIPID, PSA		\$249.00
LHI1003	PREPLACEMENT AGREEMENT SAFETY SENSITIVE-TRAIN SVC ONLY W/O SPIROMETRY		\$100.00
LHI1004	FRA CERTIFICATION/RE-CERTIFICATIN		\$45.00
LHI1022	DOT/CDL RE-CERTIFICATION FMCSA		\$100.00
LHI1042	PHA CALL CENTER	OFFICE OUTPT NEW 10 MIN	\$65.00
LHI1043	PHA CALL CENTER	OFFICE OUTPT NEW 20 MIN	\$85.00
LHI1044	ACCESSION EXAM		\$108.00
LHI36415	VENIPUNCTURE / BLOOD DRAW		\$15.00
LHI90632	HEPATITIS A		\$90.00

LHI90658	INFLUENZA VACCINE		\$27.00
LHI90746	HEPATITIS B		\$80.00
LHI99000	DNA		\$30.00
MISCCOLPE	ANNUAL COLLEGE PHYSICAL		\$100.00
MISCDSINST	DRUG SCREEN-INSTANT RESULTS		\$80.00
MISCMRR	MEDICAL RECORD REQUEST		\$20.00
MISCNSFFE E	RETURNED CHECK FEE		\$35.00
MISCPESP	PHYSICAL EXAMINATION	OCCUPATIONAL HEALTH	\$125.00
MISCRX	AMOXICILLIN 500 MG		\$10.00
MISCSPDR	DISCOUNT SPORTS PHYSICAL EXAMINE		\$40.00
MISCSPDR2 1	SPORTS PHYSICAL EXAM 2021 FEE		\$70.00
MISCSPPE	SPORTS PHYSICAL	SPORTS PE (SCHOOL AGE UNDER 18)	\$80.00
NAC99212	NAC EMPLOYEE SCREENING	PROBLEM FOCUSED-ESTABLISHED PATIENT	\$0.00
NOSHOW	NO SHOW FEE		\$25.00
NOSHOWVA	NO SHOW VA		\$40.00
OTCDME	OVER THE COUNTER - DME		\$0.00
OTCMED	OVER THE COUNTER MEDS		\$0.00
P0010	HISTORY REVIEW W/O EXAM		\$10.00
P002	PHYSICAL EXAMINATION	FIRE DEPARTMENT-CHS	\$125.00
P002A	BRIEF PHYSICAL EXAMINATION		\$90.00
P003V	VITAL		\$5.00
P005F	FLEXIBILITY ASSESSMENT		\$25.00
P010	PURIFIED PROTEIN DERIVATIVE	FIRE DEPARTMENT-CHS	\$40.00
P1012	VISUAL ACUITY		\$25.00
P1014	REFRACTION BY AUTO REFRACTION OR MANIFEST		\$20.00
P104	VISION-COLOR (ISHIHARA 14+ PLATES)		\$30.00
P104G	VISION-COLOR, TITMUS OR SIMILAR		\$25.00
P105	DEPTH PERCEPTION		\$25.00
P106	PERIPHERAL VISUAL FIELDS	FIRE DEPARTMENT-CHS	\$30.00
P201	AUDIOGRAM - SCREENING TEST,PURE TONE,AIR ONLY	FIRE DEPARTMENT-CHS	\$35.00
P201D	AUDIOGRAM - DECIBEL LOSS WITH THRESHOLD		\$30.00
P201O	AUDIOGRAM - PURE TONE - MEETS OSHA		\$30.00

P301	RESTING EKG - TRACING & INTERPR	FIRE DEPARTMENT-CHS	\$80.00
P303	SPIROMETRY		\$85.00
P900	BLOOD DRAW	FIRE DEPARTMENT-CHS	\$20.00
P900FS	FINGERSTICK	FIRE DEPARTMENT-CHS	\$25.00
P900U	SPECIMEN COLLECTION-URINALYSIS		\$35.00
P900UD	URINE DIPSTICK	FIRE DEPARTMENT-CHS	\$40.00
P902H	HAIR TEST COLLECTION		\$35.00
P902RC	SPECIMEN COLLECTION-REGULATED DRUG SCREEN		\$35.00
P99201	FOCUSED EXAM W/REPORT 10 MINUTES		\$75.00
PDOT	DOT EXAMINATION		\$100.00
Q0091	PAP		\$41.00
Q0144	AZITHROMYCIN 1 QM		\$63.00
Q2035	AFLURIA INFLUENZA VIRUS VACCINE		\$26.00
Q2036	INFLUENZA VACCINE (SPLIT VIRUS) 3+		\$26.00
Q2037	INFLUENZA VIRUS VACCINE, SPLIT VIRUS, 3 YRS AND OLDER, INTRAMUSCULAR USE	FLUVIRIN	\$16.00
Q2038	INFLUENZA VIRUS VACCINE FLUZONE	MEDICARE	\$16.00
Q2039	INFLUENZA VIRUS VACCINE, SPLIT VIRUS, 3 YRS AND OLDER, INTRAMUSCULAR USE. NOS		\$16.00
Q4049	FINGER SPLINT, STATIC		\$20.00
Q4093	ALBUTEROL 1MG		\$2.00