Medical services; Primary Care, Psychiatry, Office Visits	Billing Code	Self-Pay Price
Prev visit new age 18-39 (Preventive medicine visit for new		
patient ages 18 to 39)	99385	\$ 140.00
Prev visit new age 40-64 (Preventive medicine visit for new		
patient ages 40 to 64)	99386	\$ 112.00
Prev visit est age 18-39 (Preventive medicine visit for		
established patient ages 18 to 39)	99395	\$ 154.00
Prev visit est age 40-64 (Preventive medicine visit for		
established patient ages 40 to 64)	99396	\$ 126.00
Level 2 Office/outpatient visit new patient	99202	\$ 84.00
Level 3 Office/outpatient visit new patient	99203	\$ 112.00
Level 4 Office/outpatient visit new patient	99204	\$ 140.00
Level 5 Office/outpatient visit new patient	99205	\$ 168.00
Level 2 Office/outpatient visit established patient	99212	\$ 56.00
Level 3 Office/outpatient visit established patient	99213	\$ 84.00
Level 4 Office/outpatient visit established patient	99214	\$ 112.00
Level 5 Office/outpatient visit established patient	99215	\$ 140.00
Psychiatric diagnostic evaluation w/ medical services	90792	\$ 252.00
**Office Visit Levels differ due to complexity of visit		

Covid and Upper Respiratory Specific Testing	<b>Billing Code</b>	Self-	Pay Price
Flu/Covid/RSV PCR Screen (no office visit required)	87635	\$	150.00

In-House Laboratory	<b>Billing Code</b>	Self-Pa	ay Price
Blood Draw	36415	\$	15.00
Urinalysis - Dipstick	81000	\$	5.00
Urinalysis - Microscopy	81000	\$	5.00
Qualitative Urine Drug Screen	80300	\$	10.00
Rapid Bact Antigen - Strep	87802	\$	5.00
Rapid Mono	81025	\$	8.00
Rapid Antigen Flu/Covid	87428	\$	74.00
Strep-A PCR Screen	87651	\$	60.00

Sexual Health Labs	<b>Billing Code</b>	Self-P	ay Price
Chlamydia/Gonorrhea	87491/87591	\$	80.00
Herpes Culture (Symptomatic, Swab)	87255	\$	56.00
Herpes Culture (Asymptomatic)	86695/86696	\$	140.00
HPV High Risk Typing - Pap	88175	\$	58.00
Syphilis	86592		\$10-\$40
Pregnancy Test (Urine)	81025	\$	5.00

Radiology	Billing Code	Self-Pay	Price
Abdomen	74019	\$	56.00
Ankle	73610	\$	50.00
Chest	71046	\$	60.00
Clavicle	73000	\$	46.00
Elbow	73080	\$	50.00

Finger	73140 \$	50.00
Foot	13630 \$	50.00
Hand	73130 \$	50.00
Hip	73502 \$	56.00
Knee	73564 \$	56.00
Ribs	71101 \$	80.00
Shoulder	73030 \$	56.00
Spine	72040/72100	\$60-\$96
Wrist	73110 \$	50.00

Procedures	Billing Code	Self-Pay Price
EKG w/12 Lead Trace	93005	\$ 27.00
Nebulizer Treatment	94640	\$ 25.00
Spirometry	94010/94060	\$59-\$99
Wart Treatment**	17110	\$90-170
**office visit included in price		

Immunization Specific Laboratory	<b>Billing Code</b>	Self	f-Pay Price
	86765/86735		
MMR Immunity Test	/86762	\$	126.00
Hep B Titer	86317	\$	30.00
Hep C Titer	86803	\$	30.00
Varicella (Chicken Pox)	86787	\$	60.00

Vaccination	Covered by Insurance?	Price Per Shot
Flu (seasonal)	N/A	Free
COVID-19	N/A	Free
Gardasil - Human Papillomavirus (HPV - need 3 doses)	Yes	\$250.00
Hepatitis A (need 2 doses)	Yes	\$113.00
Hepatitis B (need 2 doses)	Yes	\$126.00
Hepatitis A & B combo - Twinrix (need 3 doses)	Yes	\$110.00
Measles, Mumps, Rubella (MMR - need 2 doses)	Yes	\$75.00
Meningitis (Meningococcal - need 2 doses)	Yes	\$218 Bexsero
Meningitis (Meningococcal - need 1 dose)	Yes	\$148 Menveo
Tdap: Tetanus, Diphtheria and Pertussis	Yes	\$52.00
Chicken Pox (Varicella)	Yes	\$200.00
Rabies (need 2 doses, need to be pre-pay to special order)	No	\$350.00
Typhoid (injectable)	No	\$140.00
TB Skin Test	No	\$5.00