

CPT Code	Service Description	Approved Fee effective 01/01/2021	Proposed Fee 2021-2022
New Patient Preventive Visits			
99381	Initial/New preventive < 1 year	\$325.00	
99382	Initial/New preventive 1 - 4 years	\$325.00	
99383	Initial/New preventive 5-11 years	\$350.00	
99384	Initial/New preventive 12 - 17 years	\$340.00	
99385	Initial/New preventive 18 - 39 years	\$325.00	
99386	Initial/New preventive 40 - 64 years	\$326.00	
99387	Initial/New preventive > 65 Years	\$325.00	
Established Patient Preventive Visits			
99391	Established Preventive < 1 year	\$290.00	
99392	Established Preventive 1 - 4 years	\$290.00	
99393	Established Preventive 5 -11 years	\$300.00	
99394	Established Preventive 12 - 17 years	\$290.00	
99395	Established Preventive 18 - 39 years	\$279.00	
99396	Established Preventive 40 - 64 years	\$326.00	
99397	Established Preventive > 65 years	\$300.00	
New Patient Evaluation & Management Visits			
99201	New-Problem Focused	\$125.00	
99202	New-Expanded Focused	\$200.00	
99203	New-Detailed/Low Complexity	\$275.00	
99204	Complexity	\$425.00	
99205	New-Comprehensive/HighComplexity	\$495.00	
00000	No Charge Visit		
Established Patient Evaluation & Management Visits			
99211	Established-Nurse Encounter (no MD required)	\$50.00	
99212	Established-Problem Focused	\$125.00	
99213	Established-Expanded /Low Complexity	\$195.00	
99214	Complexity	\$275.00	
99215	Established-Comprehensive/High Complexity	\$345.00	
T1002	RN service up to 15 minutes	\$75.00	

Tele Health Services (Phone Only)			Remove, will only pay if audio & visual is used
99441	Telephone E/M 5-10 Minutes	\$14.45	
99442	Telephone E/M 11-20 Minutes	\$28.15	
99443	Telephone E/M 21-30 Minutes	\$41.15	
CPT Code	Service Description	Approved Fee effective 01/01/2021	Proposed Fee 2021-2022
Immunizations			
90474	injectable	\$20.45	
90473	Admin of intranasal/oral only vaccine	\$20.45	
90472	Admin. Each additional vaccine	\$20.45	
90471	Admin. Single vaccine	\$20.45	
90632	Adult Hepatitis A-IM	\$50.00	
90702	DT Pediatric IM	\$50.00	Remove
90700	DTaP-Pediatric-IM	\$24.00	
90651	Gardasil 9-IM	\$210.00	\$240.00
90633	Hepatitis A-Ped/Adol.-IM	\$50.00	\$35.00
90746	Hepatitis B vaccine-Adult-3 dose	\$57.00	\$65.00
90739	Hepatitis B vaccine-Adult 2 dose	\$90.00	\$95.00
90744	Hepatitis B vaccine-Pediatric or Adolescent-IM	\$26.00	
90648	HIB-4 dose schedule-IM; (ActHIB, Hiberix)	\$16.00	
90713	IPV (Inactivated Polio Virus)-SQ or IM	\$35.00	
90696	Kinrix, only for age 4-6 year booster dose of DTaP and Polio (IPV)	\$58.00	
90734	Meningococcal (Menactra)-IM	\$115.00	\$130.00
90707	MMR-SQ	\$75.00	\$85.00
90723	Pediarix-IM	\$72.00	
90698	Pentacel, do not administer to anyone over 4 years of age-IM	\$90.00	
90670	Pneumococcal 13 valent conjugate vaccine ≥; (PVC 13)-IM (Prevnar)	\$180.00	\$210.00
90710	ProQuad - Measles, Mumps, Rubella, Varicella (MMRV)-SQ	\$210.00	\$245.00
90688	Quadrivalent Flu Vaccine 6 months and older-IM	\$20.00	
90687	Quadrivalent Flu Vaccine, 6 months-35 months IM	\$10.00	Remove, see above code
90675	Rabies pre-exposure vaccine or booster-IM, per dose (3 dose schedule)	\$280.00	\$285.00

90680	Rotavirus Vaccine (RotaTeq)-oral, for use \geq 6 weeks through 7 months	\$90.00	
90714	Td-IM (Tenivac)	\$45.00	
90715	Tdap-IM	\$50.00	
90636	Twinrix (Hepatitis A and Hepatitis B)-IM	\$90.00	
90716	Varicella Immunization-SQ	\$135.00	\$ 145.00
90736	Zoster (Shingles, Zostavax)-SQ	\$225.00	Remove
90750	Zoster (Shingles, 2 doses required, Shingrix)-IM	\$150.00	\$160.00
0001A	Administration of Pfizer BioNTech COVID-19 Vaccine-1st Dose	N/A	\$65.00
0002A	Administration of Pfizer BioNTech COVID-19 Vaccine-2nd Dose	N/A	\$65.00
0003A	Administration of Pfizer BioNTech COVID-19 Vaccine-3rd Dose	N/A	\$65.00
0004A	Administration of Pfizer BioNTech COVID-19 Vaccine-Booster Dose	N/A	\$65.00
0011A	Administration of Moderna COVID-19 Vaccine-1st Dose	N/A	\$65.00
0012A	Administration of Moderna COVID-19 Vaccine-2nd Dose	N/A	\$65.00
0013A	Administration of Moderna COVID-19 Vaccine-3rd Dose	N/A	\$65.00
0064A	Administration of Moderna COVID-19 Vaccine-Booster Dose	N/A	\$65.00
0031A	Administration of Janssen COVID-19 Vaccine-1st Dose	N/A	\$65.00
0034A	Administration of Janssen COVID-19 Vaccine-Booster Dose	N/A	\$65.00
0071A	Administration of Pfizer BioNTech COVID-19 Vaccine, Pediatric-1st Dose	N/A	\$65.00

0072A	Administration of Pfizer BioNTech COVID-19 Vaccine, Pediatric-2nd Dose	N/A	\$65.00
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G0008 Medicare Code Only	Flu Vaccine Administration	\$20.45	
G0010 Medicare Code Only	Hep B Vaccine Administration	\$20.45	
Clinical Laboratory			
Lab Handling			
36415	Collection of Venous Blood by Venipuncture	\$13.00	
36416	Collection of Capillary Blood Specimen	\$12.00	
99000	Lab handling fee	\$15.00	
In House Labs			
82947	Glucose random	\$15.00	
87081	GC Culture	N/C	
87205	Gram Stain, smear	N/C	
82270	Hemocult	\$10.00	
85018	Hgb (fingerstick)	\$9.00	
83037	Hemoglobin A1C	\$21.00	
80061	Cholesterol, in-house testing (T. Chol, HDL, Triglycerides)	\$45.00	
81025	Urine pregnancy test	\$30.00	
87880	Streptococcus, Group A; Rapid test	\$30.00	
81002	Urinalysis by dipstick	\$10.00	
82120	Amines, vaginal fluid	\$10.00	
83986	Vaginal pH	\$10.00	
87210	Wet Mount/prep	\$20.00	
89060	Fern Test	\$15.00	
State Labs			
83655	Blood Lead	N/C	
87265	Bordetella Pertussis Swab	N/C	
87252	Herpes Virus Culture	N/C	
86703	HIV-1 Antibody and HIV-2 Antibody, single result	N/C	
87501	Influenza test	N/C	
87177	Ova and parasites; stool	N/C	