



Banner Medical Group: General Medicine

The prices for our most common services are listed below. For a description, please visit www.BannerHealth.com/COPriceDescription.

HCPCS/CPT Code ⁽¹⁾	Description	Facility Price ⁽²⁾	Non-Facility Price ⁽³⁾
82962	Blood Glucose (Sugar) Test Performed By Hand-Held Device	\$7	\$7
83036	Glycosylated Hemoglobin Level	\$27	\$27
95117	Injection Of Increasing Dosages Of Allergen, 2 Or More Injections	\$21	\$21
99201	New Patient Office Or Other Outpatient Visit, Problem Focused/Straightforward	\$108	\$108
99202	New Patient Office Or Other Outpatient Visit, Expanded Problem Focused/Straightforward	\$151	\$151
99203	New Patient Office Or Other Outpatient Visit, Detailed/Low Complexity	\$218	\$218
99204	New Patient Office Or Other Outpatient Visit, Comprehensive/Moderate Complexity	\$333	\$333
99205	New Patient Office Or Other Outpatient Visit, Comprehensive/High Complexity	\$417	\$417
99211	Established Patient Office Or Other Outpatient Visit, That May Not Require Presence Of Physician Or Other Qualified Health Care Professional	\$80	\$80
99212	Established Patient Office Or Other Outpatient Visit, Problem Focused/Straightforward	\$108	\$108
99213	Established Patient Office Or Other Outpatient Visit, Problem Focused/Straightforward	\$147	\$147
99214	Established Patient Office Or Other Outpatient Visit, Detailed/Moderate Complexity	\$217	\$217
99215	Established Patient Office Or Other Outpatient Visit, Comprehensive/High Complexity	\$292	\$292
99217	Hospital Observation Care, Discharge	\$147	\$147
99218	Initial Hospital Observation Care, Detailed/Comprehensive/Straightforward/Low Complexity	\$202	\$202
99219	Initial Hospital Observation Care, Comprehensive/Moderate Complexity	\$274	\$274
99220	Initial Hospital Observation Care, Comprehensive/High Complexity	\$374	\$374
99221	Initial Hospital Inpatient Care, Detailed/Comprehensive/Straightforward/Low Complexity	\$205	\$205
99222	Initial Hospital Inpatient Care, Comprehensive/Moderate Complexity	\$277	\$277
99223	Initial Hospital Inpatient Care, Comprehensive/High Complexity	\$409	\$409
99231	Subsequent Hospital Inpatient Care, Problem Focused/Straightforward/Low Complexity	\$80	\$80
99232	Subsequent Hospital Inpatient Care, Expanded Problem Focused/Moderate Complexity	\$146	\$146
99233	Subsequent Hospital Inpatient Care, Detailed/High Complexity	\$210	\$210
99238	Hospital Discharge Day Management, 30 Minutes Or Less	\$147	\$147
99239	Hospital Discharge Day Management, More Than 30 Minutes	\$217	\$217

- ⁽¹⁾ HCPCS (Healthcare Common Procedure Coding System), also referred to as CPT (Current Procedural Terminology), is a uniform coding system for describing medical, surgical, and diagnostic services as well as supplies, pharmaceuticals, etc.
- ⁽²⁾ The Facility Price is applicable when services are provided in a facility setting; for example, a hospital, a skilled nursing facility, or an ambulatory surgical center.
- ⁽³⁾ The Non-Facility Price is applicable when services are provided in a non-facility setting; for example, a physician's office, or a patient's home.