



For questions regarding our prices, Please contact your provider's office

Banner Medical Group: Pain Management

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

HCPCS/CPT	Description	Facility (2)	Non-Facility
Code (1)	·	Price ⁽²⁾	Price ⁽³⁾
20552	Trigger point injection(s) in 1 or 2 muscles	\$79	\$113
20553	Trigger point injections in 3 or more muscles	\$89	\$130
20610	Aspiration or injection of unilateral large joint or joint capsule	\$95	\$123
2709650	Injection for bilateral sacroiliac joint, anesthetic/steroid, with imaging guidance	\$262	\$494
27096	Injection for sacroiliac joint, anesthetic/steroid, with imaging guidance	\$175	\$329
64483	Injections of anesthetic and/or steroid drug into lower or sacral spine nerve root using	\$233	\$449
	imaging guidance, single level		
6448350	Bilateral injections of anesthetic and/or steroid drug into lower or sacral spine nerve	\$350	\$673
	root using imaging guidance, single level		
6449050	Bilateral injections of upper or middle spine facet joint with imaging guidance, single	\$330	\$584
	level		
6449350	Bilateral injections of lower or sacral spine facet joint using imaging guidance, single level	\$283	\$530
6449450	Bilateral injections of lower or sacral spine facet joint using imaging guidance, second level	\$162	\$266
99151	Moderate sedation, 0-4 years of age, first 15 minutes	\$49	\$157
99152	Moderate sedation , 5+ years of age, first 15 minutes	\$26	\$105
99153	Moderate sedation, each additional 15 minutes	\$23	\$23
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	\$80	\$80
	physician or other qualified health care professional		
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

⁽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.