



Banner Medical Group: Urology

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⁾
51700	Simple bladder irrigation	\$93	\$169
51702	Insertion of a temporary indwelling bladder catheter	\$63	\$143
51705	Simple change of bladder tube	\$107	\$185
51720	Bladder instillation of cancer preventive or inhibiting agent	\$165	\$222
51798	Ultrasound measurement of bladder capacity after voiding	\$39	\$39
52000	Diagnostic examination of the bladder and urethra by endoscope	\$260	\$416
52356	Crushing of stone in urinary duct (ureter) including stent by endoscope	\$859	\$859
55250	Removal of unilateral or bilateral sperm duct(s)	\$467	\$782
81003QW	Urinalysis, automated test	\$7	\$7
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

- ⁽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.