



Pediatrics: Gastroenterology

The Direct Pay Price for our most common services are listed below. For a description of 'Direct Pay Price', please visit www.bannerhealth.com/DirectPayPriceDescription.

HCPCS/ CPT Code ⁽¹⁾	Description	Direct Pay Facility Price ⁽²⁾	Direct Pay Non-Facility Price ⁽³⁾
99201	NEW PATIENT OFFICE OR OTHER OUTPATIENT VISIT, PROBLEM FOCUSED/STRAIGHTFORWARD	57.00	90.00
99202	NEW PATIENT OFFICE OR OTHER OUTPATIENT VISIT, EXPANDED PROBLEM FOCUSED/STRAIGHTFORWARD	107.00	155.00
99203	NEW PATIENT OFFICE OR OTHER OUTPATIENT VISIT, DETAILED/LOW COMPLEXITY	163.00	225.00
99204	NEW PATIENT OFFICE OR OTHER OUTPATIENT VISIT, COMPREHENSIVE/MODERATE COMPLEXITY	275.00	345.00
99205	NEW PATIENT OFFICE OR OTHER OUTPATIENT VISIT, COMPREHENSIVE/HIGH COMPLEXITY	353.00	429.00
99211	ESTABLISHED PATIENT OFFICE OR OTHER OUTPATIENT VISIT, THAT MAY NOT REQUIRE PRESENCE OF PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL	20.00	43.00
99212	ESTABLISHED PATIENT OFFICE OR OTHER OUTPATIENT VISIT, PROBLEM FOCUSED/STRAIGHTFORWARD	55.00	90.00
99213	ESTABLISHED PATIENT OFFICE OR OTHER OUTPATIENT VISIT, EXPANDED PROBLEM FOCUSED/LOW COMPLEXITY	108.00	150.00
99214	ESTABLISHED PATIENT OFFICE OR OTHER OUTPATIENT VISIT, DETAILED/MODERATE COMPLEXITY	165.00	223.00
99215	ESTABLISHED PATIENT OFFICE OR OTHER OUTPATIENT VISIT, COMPREHENSIVE/HIGH COMPLEXITY	233.00	300.00
99217	HOSPITAL OBSERVATION CARE, DISCHARGE	151.00	151.00
99218	INITIAL HOSPITAL OBSERVATION CARE, DETAILED/COMPREHENSIVE/STRAIGHTFORWARD/LOW COMPLEXITY	141.00	141.00
99219	INITIAL HOSPITAL OBSERVATION CARE, COMPREHENSIVE/MODERATE COMPLEXITY	234.00	234.00
99220	INITIAL HOSPITAL OBSERVATION CARE, COMPREHENSIVE/HIGH COMPLEXITY	327.00	327.00
99221	INITIAL HOSPITAL INPATIENT CARE, DETAILED/COMPREHENSIVE/STRAIGHTFORWARD/LOW COMPLEXITY	211.00	211.00
99222	INITIAL HOSPITAL INPATIENT CARE, COMPREHENSIVE/MODERATE COMPLEXITY	287.00	287.00
99223	INITIAL HOSPITAL INPATIENT CARE, COMPREHENSIVE/HIGH COMPLEXITY	422.00	422.00
99231	SUBSEQUENT HOSPITAL INPATIENT CARE, PROBLEM FOCUSED/STRAIGHTFORWARD/LOW COMPLEXITY	84.00	84.00
99232	SUBSEQUENT HOSPITAL INPATIENT CARE, EXPANDED PROBLEM FOCUSED/MODERATE COMPLEXITY	152.00	152.00
99233	SUBSEQUENT HOSPITAL INPATIENT CARE, DETAILED/HIGH COMPLEXITY	217.00	217.00
99241	PATIENT OFFICE CONSULTATION, PROBLEM FOCUSED/STRAIGHTFORWARD	71.00	102.00
99242	PATIENT OFFICE CONSULTATION, EXPANDED PROBLEM FOCUSED/STRAIGHTFORWARD	147.00	191.00
99243	PATIENT OFFICE CONSULTATION, DETAILED/LOW COMPLEXITY	205.00	260.00
99244	PATIENT OFFICE CONSULTATION, COMPREHENSIVE/MODERATE COMPLEXITY	324.00	384.00
99245	PATIENT OFFICE CONSULTATION, COMPREHENSIVE/HIGH COMPLEXITY	402.00	470.00
99251	INPATIENT HOSPITAL CONSULTATION, PROBLEM FOCUSED/STRAIGHTFORWARD	103.00	103.00
99252	INPATIENT HOSPITAL CONSULTATION, EXPANDED PROBLEM FOCUSED/STRAIGHTFORWARD	158.00	158.00
99253	INPATIENT HOSPITAL CONSULTATION, DETAILED/LOW COMPLEXITY	241.00	241.00
99254	INPATIENT HOSPITAL CONSULTATION, COMPREHENSIVE/MODERATE COMPLEXITY	347.00	347.00
99255	INPATIENT HOSPITAL CONSULTATION, COMPREHENSIVE/HIGH COMPLEXITY	419.00	419.00
99291	CRITICAL CARE DELIVERY, FIRST 30-74 MINUTES	472.00	575.00
99292	CRITICAL CARE DELIVERY, EACH ADDITIONAL 30 MINUTES	237.00	259.00
99354	PROLONGED OFFICE OR OTHER OUTPATIENT SERVICE, FIRST 30-74 MINUTES	194.00	208.00
99355	PROLONGED OFFICE OR OTHER OUTPATIENT SERVICE, EACH ADDITIONAL 30 MINUTES	192.00	206.00
99356	PROLONGED INPATIENT OR OBSERVATION HOSPITAL SERVICE, FIRST 30-74 MINUTES	191.00	191.00
99367	MEDICAL TEAM CONFERENCE WITH PHYSICIAN, 30 MINUTES OR MORE	121.00	121.00
43235	DIAGNOSTIC EXAMINATION OF STOMACH AND UPPER UPPER SMALL BOWEL USING AN ENDOSCOPE	323.00	649.00
43236	INJECTION OF ESOPHAGUS, STOMACH, AND UPPER SMALL BOWEL USING AN ENDOSCOPE	389.00	804.00
43239	BIOPSY OF THE ESOPHAGUS, STOMACH, OR UPPER SMALL BOWEL USING AN ENDOSCOPE	380.00	752.00
43244	TYING OF DILATED VEINS OF STOMACH OR ESOPHAGUS USING AN ENDOSCOPE	656.00	656.00
43246	INSERTION OF STOMACH TUBE USING AN ENDOSCOPE	559.00	559.00
4324680	INSERTION OF STOMACH TUBE USING AN ENDOSCOPE (ASSISTANT SURGEON CHARGE ONLY)	140.00	140.00
43247	REMOVAL OF FOREIGN BODY OF ESOPHAGUS, STOMACH, OR UPPER SMALL BOWEL USING AN ENDOSCOPE	445.00	445.00

Prices are subject to change without notice. If this is a printed copy of this document, please visit www.bannerhealth.com/DirectPayPriceDescription to validate current prices.



Pediatrics: Gastroenterology

The Direct Pay Price for our most common services are listed below. For a description of 'Direct Pay Price', please visit www.bannerhealth.com/DirectPayPriceDescription.

HCPCS/ CPT Code ⁽¹⁾	Description	Direct Pay Facility Price ⁽²⁾	Direct Pay Non-Facility Price ⁽³⁾
43248	INSERTION OF GUIDE WIRE WITH DILATION OF ESOPHAGUS USING AN ENDOSCOPE	419.00	419.00
45100	BIOPSY OF RECTUM	627.00	627.00
45330	DIAGNOSTIC EXAMINATION OF LARGE BOWEL USING AN ENDOSCOPE	138.00	300.00
45331	BIOPSY OF LARGE BOWEL USING AN ENDOSCOPE	167.00	374.00
45378	DIAGNOSTIC EXAMINATION OF LARGE BOWEL USING AN ENDOSCOPE	480.00	862.00
45380	BIOPSY OF LARGE BOWEL USING AN ENDOSCOPE	576.00	1,030.00
45385	REMOVAL OF POLYPS OR GROWTHS OF LARGE BOWEL USING AN ENDOSCOPE	683.00	1,161.00
91035	MONITORING AND RECORDING OF GASTROESOPHAGEAL REFLUX WITH PH ELECTRODE INSERTION INCLUDING ANALYSIS AND INTERPRETATION	1,060.00	1,060.00
91110	ADMINISTRATION OF ORAL CAPSULE FOR EVALUATION USING AN ENDOSCOPE	2,005.00	2,005.00
9111026	ADMINISTRATION OF ORAL CAPSULE FOR EVALUATION USING AN ENDOSCOPE (PROFESSIONAL COMPONENT ONLY)	429.00	429.00
91122	STUDY OF ANORECTAL PRESSURE GENERATED BY MUSCLES SURROUNDING ANUS (SPHINCTER)	498.00	498.00
98960	EDUCATION AND TRAINING FOR PATIENT SELF-MANAGEMENT, EACH 30 MINUTES	57.00	57.00

⁽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 Direct Pay 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 Direct Pay 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.