



For questions regarding our Direct Pay Prices, please contact your provider's office.

Podiatry: General

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
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
11042	REMOVAL OF SKIN AND TISSUE FIRST 20 SQ CM OR LESS	104.00	189.00
11055	REMOVAL OF SINGLE THICKENED SKIN GROWTH	45.00	104.00
11056	REMOVAL OF 2 TO 4 THICKENED SKIN GROWTHS	63.00	125.00
11306	SHAVING OF 0.6 CENTIMETERS TO 1.0 CENTIMETERS SKIN GROWTH OF SCALP, NECK, HANDS, FEET, OR GENITALS	119.00	205.00
11307	SHAVING OF 1.1 TO 2.0 CENTIMETERS SKIN GROWTH OF SCALP, NECK, HANDS, FEET, OR GENITALS	143.00	242.00
11308	SHAVING OF OVER 2.0 CENTIMETERS SKIN GROWTH OF SCALP, NECK, HANDS, FEET, OR GENITALS	165.00	268.00
11720	REMOVAL OF TISSUE FROM 1 TO 5 FINGER OR TOE NAILS	34.00	67.00
11721	REMOVAL OF TISSUE FROM 6 OR MORE FINGER OR TOE NAILS	57.00	91.00
11730	SEPARATION OF NAIL PLATE FROM NAIL BED	114.00	205.00
11732	SEPARATION OF NAIL PLATE FROM NAIL BED	59.00	93.00
11750	REMOVAL OF NAIL	371.00	462.00
17110	DESTRUCTION OF UP TO 14 SKIN GROWTHS	149.00	236.00
20550	INJECTION OF TENDON SHEATH, LIGAMENT, OR MUSCLE MEMBRANE INJECTION OF TENDON ATTACHMENT TO BONE	89.00 92.00	123.00 124.00
20600	ASPIRATION OF INJECTION OF SMALL JOINT OR JOINT CAPSULE	85.00	116.00
20605	ASPIRATION OR INJECTION OF MEDIUM JOINT OR JOINT CAPSULE	89.00	126.00
27691	TRANSPLANT OF DEEP TENDON WITH MUSCLE REROUTING AT LOWER LEG OR ANKLE	1,624.00	1,624.00
27692	TRANSPLANT OF ADDITIONAL TENDON AND MUSCLE REPOUTING AT LOWER LEG OR ANKLE	238.00	238.00
28124	PARTIAL REMOVAL OF DEAD OR INFECTED TOE BONE	718.00	998.00
28234	INCISION TO RELEASE FOOT TENDON	576.00	854.00
28285	CORRECTION OF TOE JOINT DEFORMITY	695.00	984.00
28288	REMOVAL OF FOOT BONE SPUR	936.00	1,265.00
28296	CORRECTION OF BUNION	1,138.00	1,515.00
28299	CORRECTION OF BUNION	1,478.00	1,900.00
28308	INCISION TO STRAIGHTEN TOE BONE	808.00	1,166.00
28645	SURGICAL TREATMENT OF DISLOCATED FOOT BONE	1,025.00	1,346.00
29445	APPLICATION OF RIGID TOTAL CONTACT LEG CAST	235.00	299.00





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HCPCS/ CPT Code (1)	Description	Direct Pay <u>Facility</u> Price (2)	Direct Pay Non-Facility Price (3)
29540	STRAPPING OF ANKLE AND/OR FOOT	52.00	72.00
29550	STRAPPING OF TOES	35.00	58.00
29580	STRAPPING, UNNA BOOT	78.00	112.00
64455	INJECTION OF ANESTHETIC OR STEROID DRUG INTO NERVE OF FOOT	82.00	107.00
97597	REMOVAL OF TISSUE FROM WOUNDS	53.00	157.00
J3301	INJECTION, TRIAMCINOLONE ACETONIDE, NOT OTHERWISE SPECIFIED, 10 MG	3.20	3.20

⁽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 <u>Facility</u> 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.