



Urology

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
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
50590	SHOCK WAVE CRUSHING OF KIDNEY STONES	1,270.00	1,926.00
51610	INJECTION PROCEDURE THROUGH THE BLADDER AND BLADDER CANAL (URETHRA) FOR X-RAY IMAGING	143.00	245.00
51700	BLADDER IRRIGATION OR INSTILLATION	100.00	192.00
51701	INSERTION OF TEMPORARY BLADDER CATHETER	62.00	130.00
51702	INSERTION OF INDWELLING BLADDER CATHETER	68.00	169.00
51705	REMOVAL OF SKIN SUTURE WITH CHANGE OF BLADDER TUBE	152.00	248.00
51720	BLADDER INSTILLATION OF CANCER PREVENTIVE, INHIBITING, OR SUPPRESSIVE AGENT	183.00	252.00
51728	INSERTION OF ELECTRONIC DEVICE INTO BLADDER WITH VOIDING PRESSURE STUDIES	661.00	661.00
51741	ELECTRONIC ASSESSMENT OF BLADDER EMPTYING	169.00	169.00
51784	NON-NEEDLE MEASUREMENT AND RECORDING OF ELECTRICAL ACTIVITY OF MUSCLES AT BLADDER AND BOWEL OPENINGS	449.00	449.00
51798	ULTRASOUND MEASUREMENT OF BLADDER CAPACITY AFTER VOIDING	43.00	43.00
52000	DIAGNOSTIC EXAMINATION OF THE BLADDER AND BLADDER CANAL (URETHRA) USING AN ENDOSCOPE	284.00	466.00
52005	IRRIGATION OR INSTILLATION INTO BLADDER AND BLADDER CANAL (URETHRA) USING AN ENDOSCOPE	301.00	638.00
52224	DESTRUCTION OF (LESS THAN 0.5 CENTIMETERS) GROWTHS OF THE BLADDER AND BLADDER CANAL (URETHRA) USING AN ENDOSCOPE	383.00	1,651.00
52234	DESTRUCTION OF (0.5 CENTIMETERS UP TO 2.0 CENTIMETERS) GROWTHS OF THE BLADDER AND BLADDER CANAL (URETHRA) USING AN ENDOSCOPE	555.00	555.00
52281	DILATION OF BLADDER CANAL (URETHRA) USING AN ENDOSCOPE	331.00	640.00
52310	REMOVAL OF FOREIGN BODY, STONE, OR STENT FROM BLADDER CANAL (URETHRA) OR BLADDER USING AN ENDOSCOPE	343.00	553.00
52320	REMOVAL OF STONE IN URINARY DUCT (URETER) USING AN ENDOSCOPE	557.00	557.00

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.



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52332	INSERTION OF STENT IN URINARY DUCT (URETER) USING AN ENDOSCOPE	321.00	984.00
52351	DIAGNOSTIC EXAMINATION OF THE BLADDER, BLADDER CANAL (URETHRA), AND URINARY DUCT (URETER) OR KIDNEY USING AN ENDOSCOPE	709.00	709.00
52353	CRUSHING OF STONE IN URINARY DUCT (URETER) USING AN ENDOSCOPE	956.00	956.00
52648	LASER VAPORIZATION OF PROSTATE INCLUDING CONTROL OF BLEEDING	1,551.00	4,631.00
55250	REMOVAL OF SPERM DUCT	513.00	936.00
55700	BIOPSY OF PROSTATE GLAND	312.00	508.00
7442026	IMAGING OF URINARY TRACT (PROFESSIONAL COMPONENT ONLY)	40.00	40.00
76872	ULTRASOUND OF RECTUM	308.00	308.00
76942	ULTRASONIC GUIDANCE IMAGING SUPERVISION AND INTERPRETATION FOR INSERTION OF NEEDLE	432.00	432.00
J0278	INJECTION, AMIKACIN SULFATE, 100 MG	1.90	1.90
J0585	INJECTION, ONABOTULINUMTOXINA, 1 UNIT	12.00	12.00
J1080	INJECTION, TESTOSTERONE CYPIONATE, 1 CC, 200 MG	11.20	11.20
J1212	INJECTION, DMSO, DIMETHYL SULFOXIDE, 50%, 50 ML	142.30	142.30
J1580	INJECTION, GARAMYCIN, GENTAMICIN, UP TO 80 MG	2.00	2.00
J1644	INJECTION, HEPARIN SODIUM, PER 1000 UNITS	1.00	1.00
J3301	INJECTION, TRIAMCINOLONE ACETONIDE, NOT OTHERWISE SPECIFIED, 10 MG	3.20	3.20
J9217	LEUPROLIDE ACETATE (FOR DEPOT SUSPENSION), 7.5 MG	430.00	430.00
J9280	INJECTION, MITOMYCIN, 5 MG	44.00	44.00

⁽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.