

Pediatric Services, PA
Clinic Price Transparency Posting

	CPT Category	CPT Code	CPT Description	Clinic Charge	Average Commercial Ins Payment	Medicaid Payment	Medicare Payment
1	E/M	99201	New Pt Level 1	\$ 85.00	\$ 72.35	\$ 35.15	\$ 45.64
2	E/M	99202	New Pt Level 2	\$ 143.00	\$ 121.15	\$ 58.86	\$ 76.10
3	E/M	99203	New Pt Level 3	\$ 206.00	\$ 173.09	\$ 82.86	\$ 107.29
4	E/M	99204	New Pt Level 4	\$ 314.00	\$ 263.33	\$ 125.82	\$ 162.82
5	E/M	99205	New Pt Level 5	\$ 395.00	\$ 331.15	\$ 158.19	\$ 204.48
6	E/M	99211	Established Pt Level 1	\$ 41.00	\$ 35.46	\$ 17.57	\$ 23.01
7	E/M	99212	Established Pt Level 2	\$ 84.00	\$ 71.21	\$ 34.84	\$ 45.15
8	E/M	99213	Established Pt Level 3	\$ 140.00	\$ 117.75	\$ 57.19	\$ 74.13
9	E/M	99214	Established Pt Level 4	\$ 206.00	\$ 173.08	\$ 83.97	\$ 108.56
10	E/M	99215	Established Pt Level 5	\$ 277.00	\$ 232.68	\$ 112.15	\$ 145.04
11	Preventive	90461	Immunization administration each	\$ 25.00	\$ 21.02	\$ 9.76	N/A
12	Preventive	92551	Hearing Test	\$ 25.00	\$ 19.88	\$ 8.19	N/A
13	Preventive	90688	Flu Vaccine	\$ 27.00	\$ 17.84	\$ 17.83	N/A
14	Preventive	90686	Flu Vaccine .5 pf	\$ 28.00	\$ 19.03	\$ 19.03	N/A
15	Preventive	90744	Hepatitis B Vaccine	\$ 30.00	\$ 26.14	N/A	N/A
16	Preventive	90685	Flu Vaccine .25	\$ 31.00	\$ 21.51	\$ 21.81	N/A
17	Preventive	90633	Hepatitis A Vaccine	\$ 35.00	\$ 33.01	N/A	N/A
18	Preventive	90460	Immunization administration each	\$ 47.00	\$ 30.79	\$ 12.83	N/A
19	Preventive	90471	Immunization administration -1st	\$ 47.00	\$ 30.79	\$ 12.83	N/A
20	Preventive	S0302	Completed EPSDT	\$ 90.00	\$ 20.00	N/A	N/A
21	Other	87880	Rapid Strep Test	\$ 28.00	\$ 16.53	\$ 16.53	N/A
22	Other	87804	Influenza Test	\$ 27.00	\$ 16.55	\$ 16.53	N/A
23	Other	90680	Rotavirus Vaccine	\$ 100.00	\$ 84.90	N/A	N/A
24	Other	90698	Pentacel Vaccine	\$ 105.00	\$ 93.92	N/A	N/A
25	Other	90716	Varicella Vaccine	\$ 133.00	\$ 114.47	N/A	N/A

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* The MN Legislature passed a law that requires certain clinics to report amounts for their 25 most frequent services that

*The amounts posted above DO NOT reflect the amount(s) each clinic patient will pay for the services listed.

*Patients covered by commercial health insurance: Your health insurance company has likely negotiated a discount or

*Definitions:

E/M: Evaluation and Management Service (Office clinic visit) .

Preventive: Services indicated as preventive (non-illness related) performed during a well visit.

CPT: CPT stands for Current Procedural Terminology. Clinics use this code to bill the insurance company for the

Average Commercial Insurance Payment: This is the average amount patients with commercial insurance pay for

For more information, please contact the billing department (952)922-4300 or business@pspa.md

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