

# PRICE TRANSPARENCY REQUIREMENTS IN PRIMARY CARE



In 2018, the Minnesota legislature passed a new policy (Minn. Stat. 62J.812) which requires the prices for certain health care procedures be made available to patients. The law requires physicians and other allied providers to post the prices for their practice's 25 most frequently billed services that cost more than \$25.

<u>CPT</u>	<u>Description</u>	<u>Billed Charge</u>	<u>Avg Reimbursement</u>	<u>Medicare</u>	<u>MA Reimbursement</u>
99395	PREV VISIT EST AGE 18-39	\$ 301.00	\$ 260.26	n/a	\$ 85.32
99394	PREV VISIT EST AGE 12-17	\$ 295.00	\$ 254.92	n/a	\$ 83.55
99393	PREV VISIT EST AGE 5-11	\$ 270.00	\$ 233.04	n/a	\$ 76.21
99392	PREV VISIT EST AGE 1-4	\$ 271.00	\$ 233.81	n/a	\$ 76.46
99391	PER PM REEVAL EST PAT INFANT	\$ 254.00	\$ 218.89	n/a	\$ 71.90
99383	PREV VISIT NEW AGE 5-11	\$ 305.00	\$ 264.10	n/a	\$ 86.59
99382	INIT PM E/M NEW PAT 1-4 YRS	\$ 295.00	\$ 254.43	n/a	\$ 83.30
99381	INIT PM E/M NEW PAT INFANT	\$ 282.00	\$ 243.75	n/a	\$ 79.75
99215	OFFICE/OUTPATIENT VISIT EST	\$ 455.00	\$ 391.83	n/a	\$ 131.15
99214	OFFICE/OUTPATIENT VISIT EST	\$ 326.00	\$ 280.88	n/a	\$ 93.43
99213	OFFICE/OUTPATIENT VISIT EST	\$ 230.00	\$ 198.10	n/a	\$ 66.08
99212	OFFICE/OUTPATIENT VISIT EST	\$ 141.00	\$ 122.05	n/a	\$ 41.01
99211	OFFICE/OUTPATIENT VISIT EST	\$ 57.00	\$ 49.66	n/a	\$ 16.96
99203	OFFICE/OUTPATIENT VISIT NEW	\$ 283.00	\$ 242.97	n/a	\$ 80.77
90471	IMMUNIZATION ADMIN	\$ 43.00	\$ 37.18	n/a	\$ -
90461	IM ADMIN EACH ADDL COMPONENT	\$ 32.00	\$ 28.00	n/a	\$ -
90460	IM ADMIN 1ST/ONLY COMPONENT	\$ 43.00	\$ 37.18	n/a	\$ 21.22
87651	STREP A DNA AMP PROBE	\$ 70.00	\$ 48.23	n/a	\$ 35.09
	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); SEVERE ACUTE RESPIRATORY SYNDROME CORONAVIRUS 2 (SARS-COV-2) (CORONAVIRUS DISEASE [COVID-19]), AMPLIFIED PROBE TECHNIQUE				
87635		\$ 115.00	\$ 76.88	n/a	\$ 51.31
87631	RESP VIRUS 3-5 TARGETS	\$ 284.00	\$ 195.82	n/a	\$ 142.63
87591	N.GONORRHOEAE DNA AMP PROB	\$ 70.00	\$ 48.93	n/a	\$ 35.09
87491	CHYLMD TRACH DNA AMP PROBE	\$ 193.00	\$ 72.32	n/a	\$ 35.09
87428	RAPID FLU + SARS AG	\$ 134.00	\$ 96.58	n/a	\$ 30.94
74018	X-RAY EXAM OF ABDOMEN	\$ 75.00	\$ 64.98	n/a	\$ 22.51
71046	RADIOLOGICAL EXAMINATION, CHEST; 2 VIEWS	\$ 85.00	\$ 73.23	n/a	\$ 25.04

Effective 04/01/2022