



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

Physician Assistant (Surgical)

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 <u>Facility</u> 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
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
99281	EMERGENCY DEPARTMENT VISIT, PROBLEM FOCUSED/STRAIGHTFORWARD	45.00	45.00
99282	EMERGENCY DEPARTMENT VISIT, EXPANDED PROBLEM FOCUSED/LOW COMPLEXITY	88.00	88.00
99283	EMERGENCY DEPARTMENT VISIT, EXPANDED PROBLEM FOCUSED/MODERATE COMPLEXITY	133.00	133.00
99284	EMERGENCY DEPARTMENT VISIT, DETAILED/MODERATE COMPLEXITY	251.00	251.00
99285	EMERGENCY DEPARTMENT VISIT, COMPREHENSIVE/HIGH COMPLEXITY	368.00	368.00
21931AS	REMOVAL (3 CENTIMETERS OR GREATER) TISSUE GROWTH OF BACK OR FLANK (SURGICAL ASSIST BY NPP CHARGE ONLY)	258.00	258.00
32505AS	PARTIAL REMOVAL OF LUNG TISSUE (SURGICAL ASSIST BY NPP CHARGE ONLY)	516.00	516.00
32506AS	PARTIAL REMOVAL OF EACH ADDITIONAL LUNG TISSUE (SURGICAL ASSIST BY NPP CHARGE ONLY)	88.00	88.00
32552	REMOVAL OF TUNNELED CATHETER IN LUNG LINING	361.00	411.00
32651AS	PARTIAL REMOVAL OF CHEST CAVITY LINING AND LUNG USING AN ENDOSCOPE (SURGICAL ASSIST BY NPP CHARGE ONLY)	608.00	608.00
32653AS	REMOVAL OF FOREIGN BODY FROM LINING OF CHEST CAVITY USING AN ENDOSCOPE (SURGICAL ASSIST BY NPP CHARGE ONLY)	586.00	586.00
32666AS	PARTIAL REMOVAL OF LUNG TISSUE USING AN ENDOSCOPE (SURGICAL ASSIST BY NPP CHARGE ONLY)	483.00	483.00
32667AS	PARTIAL REMOVAL OF EACH ADDITIONAL LUNG TISSUE USING AN ENDOSCOPE (SURGICAL ASSIST BY NPP CHARGE ONLY)	88.00	88.00
36578	CATHETER REPLACEMENT OF CENTRAL VENOUS ACCESS DEVICE	484.00	1,125.00
36581	REPLACEMENT OF CENTRAL VENOUS CATHETER FOR INFUSION	446.00	1,683.00
43653AS	CREATION OF STOMACH FEEDING TUBE USING AN ENDOSCOPE (SURGICAL ASSIST BY NPP CHARGE ONLY)	302.00	302.00
43659LPSAS	LAPAROSCOPIC PYLOROMYOTOMY STOMACH (SURGICAL ASSIST BY NPP CHARGE ONLY)	620.00	620.00
44050AS	INCISIONAL REPAIR OF TWISTED OR HERNIATED SMALL BOWEL (SURGICAL ASSIST BY NPP	499.00	499.00





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	CHARGE ONLY)		
44120	PARTIAL REMOVAL OF SMALL BOWEL	2,613.00	2,613.00
44121AS	PARTIAL REMOVAL OF SMALL BOWEL (SURGICAL ASSIST BY NPP CHARGE ONLY)	131.00	131.00
44125AS	PARTIAL REMOVAL OF SMALL BOWEL WITH CREATION OF DRAINAGE TRACT TO SKIN SURFACE (SURGICAL ASSIST BY NPP CHARGE ONLY)	632.00	632.00
44970	REMOVAL OF APPENDIX USING AN ENDOSCOPE	1,275.00	1,275.00
44970AS	REMOVAL OF APPENDIX USING AN ENDOSCOPE (SURGICAL ASSIST BY NPP CHARGE ONLY)	319.00	319.00
47562AS	REMOVAL OF GALLBLADDER USING AN ENDOSCOPE (SURGICAL ASSIST BY NPP CHARGE ONLY)	398.00	398.00
47563AS	REMOVAL OF GALLBLADDER WITH X-RAY STUDY OF BILE DUCTS USING ENDOSCOPE (SURGICAL ASSIST BY NPP CHARGE ONLY)	403.00	403.00
49491AS	REPAIR OF GROIN HERNIA PRETERM INFANT YOUNGER THAN 37 WEEKS GESTATION PERFORMED FROM BIRTH TO 50 WEEKS POST-CONCEPTION (SURGICAL ASSIST BY NPP CHARGE ONLY)	420.00	420.00
49495AS	REPAIR OF GROIN HERNIA FULL TERM INFANT YOUNGER THAN AGE 6 MONTHS OR PRETERM INFANT OLDER THAN 50 WEEKS POST-CONCEPTION AGE AND YOUNGER THAN AGE 6 MONTHS AT TIME OF SURGERY (SURGICAL ASSIST BY NPP CHARGE ONLY)	215.00	215.00
49500AS	REPAIR OF GROIN HERNIA PATIENT AGE 6 MONTHS TO YOUNGER THAN 5 YEARS (SURGICAL ASSIST BY NPP CHARGE ONLY)	205.00	205.00
49505AS	REPAIR OF GROIN HERNIA PATIENT AGE 5 YEARS OR OLDER (SURGICAL ASSIST BY NPP CHARGE ONLY)	276.00	276.00
49570AS	REPAIR OF TRAPPED INCISIONAL OR ABDOMINAL HERNIA (SURGICAL ASSIST BY NPP CHARGE ONLY)	220.00	220.00
49572AS	REPAIR OF TRAPPED INCISIONAL OR ABDOMINAL HERNIA (SURGICAL ASSIST BY NPP CHARGE ONLY)	272.00	272.00
49585AS	REPAIR OF HERNIA AT NAVEL PATIENT AGE 5 YEARS OR OLDER (SURGICAL ASSIST BY NPP CHARGE ONLY)	235.00	235.00
58662AS	DESTRUCTION OF OVARY OR PELVIC GROWTHS USING AN ENDOSCOPE (SURGICAL ASSIST BY NPP CHARGE ONLY)	387.00	387.00

⁽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 <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.