



**2021 Fee Schedule Self-Pay Clients**

<b>New Client</b>	<b>Pediatric and Adults</b>	<b>17%</b>	<b>33%</b>	<b>50%</b>	<b>67%</b>	<b>83%</b>	<b>100%</b>
99381 thru 99387	Physical and Initial Exam	\$ 44	\$ 86	\$ 130	\$ 174	\$ 216	\$ 251
99202	Expanded Problem Focused	\$ 19	\$ 37	\$ 57	\$ 76	\$ 94	\$ 109
99203	Detailed Problem Focused	\$ 28	\$ 54	\$ 82	\$ 110	\$ 136	\$ 169
99204	Comprehensive Moderate	\$ 43	\$ 83	\$ 125	\$ 168	\$ 208	\$ 254
G0101	Breast Examination	\$ 7	\$ 14	\$ 22	\$ 29	\$ 36	\$ 59
99205	Comprehensive High	\$ 54	\$ 104	\$ 158	\$ 211	\$ 261	\$ 335
<b>Established Client</b>	<b>Pediatric and Adults</b>						
99391 thru 99397	Phy Initial Exam and/or Adult Health Screening	\$ 30	\$ 58	\$ 88	\$ 118	\$ 146	\$ 198
99211	Nursing Visit	\$ 5	\$ 11	\$ 16	\$ 21	\$ 27	\$ 33
99212	Problem Focused	\$ 11	\$ 22	\$ 33	\$ 44	\$ 55	\$ 84
99213	Expanded Problem Focused	\$ 19	\$ 36	\$ 55	\$ 74	\$ 91	\$ 137
99214	Detailed Visit	\$ 28	\$ 53	\$ 81	\$ 109	\$ 134	\$ 195
99215	Comprehensive Visit	\$ 37	\$ 73	\$ 110	\$ 147	\$ 183	\$ 272
99403	FP primary Method/Assesment.Coun	\$ 11	\$ 22	\$ 34	\$ 45	\$ 56	\$ 42
<b>Family Planning</b>							
<b>New Client</b>							
99383FP - 99396FP	Initial Physical Exam and/or Adult Health Screening	\$ 44	\$ 86	\$ 130	\$ 174	\$ 216	\$ 251
<b>Family Planning</b>							
<b>Established Client</b>							
99393FP - 99396FP	Annual Physical/Screening	\$ 30	\$ 58	\$ 88	\$ 118	\$ 146	\$ 198
<b>Devices:</b>							
J7303	NuvaRing	\$ 2	\$ 2	\$ 2	\$ 2	\$ 2	\$ 2
J1050	Depo	\$ 2	\$ 2	\$ 2	\$ 2	\$ 2	\$ 2
J7307	Nexplanon	\$ 68	\$ 132	\$ 200	\$ 267	\$ 331	\$ 399
J7297	Liletta	\$ 16	\$ 30	\$ 46	\$ 62	\$ 76	\$ 92
J7300	Paragard IUD	\$ 42	\$ 81	\$ 123	\$ 165	\$ 204	\$ 246
<b>Family Planning Procedures</b>							
58300	IUD Insertion	\$ 14	\$ 27	\$ 42	\$ 56	\$ 69	\$ 83
58301	IUD Removal	\$ 28	\$ 55	\$ 83	\$ 111	\$ 138	\$ 166
11981	Nexplanon Insertion	\$ 27	\$ 52	\$ 80	\$ 107	\$ 132	\$ 159
11982	Nexplanon Removal	\$ 31	\$ 59	\$ 90	\$ 121	\$ 149	\$ 180
11983	Nexplanon Rem. & Reinsert	\$ 38	\$ 74	\$ 112	\$ 150	\$ 186	\$ 224
<b>Other Procedures</b>							
10060	Incision & Drain of Abcess	\$ 31	\$ 61	\$ 93	\$ 124	\$ 154	\$ 185
96372	Medication Injection Admin	\$ 4	\$ 7	\$ 11	\$ 14	\$ 17	\$ 21

Revised January 2021  
(Updated Annually)

Lab Services	Cost + \$5
Immunizations	Cost + \$10
Medication Pickup	\$5
Ear Irrigation	\$20
EKG	\$20
HIV Testing	\$0
Nebulizer Treatment	\$30
School/Sports Physicals	\$25
Cryosurgery	\$35
PPD	\$15
Bicillin	\$1