

Physician Services Fee Schedule		
36415	BLOOD DRAW ROUTINE	12.50
36416	BLOOD COLLECTION BY STICK	20.00
85610	PROTHROMBIN TIME	15.00
90460	IMMUN ADM <18YRS EACH INJ	55.00
90471	IMMUN ADMIN SINGLE	41.00
90662	FLUZONE IMMUN HIGH DOSE	91.00
90670	PREVNAR 13	396.00
90686	FLU QUAD PRESERVE 0.5 mL	45.00
90688	FLU QUAD 0.5 mL DOSAGE	45.00
93000	EKG	59.00
94760	PULSE OXIMETRY SINGLE	54.00
96372	IM INJECTION	41.00
99173	VISUAL SCREENING ACUITY	31.00
99203	OFFICE VISIT NEW LEVEL 3	213.00
99204	OFFICE VISIT NEW LEVEL 4	325.00
99212	OFFICE VISIT EST LEVEL 2	87.00
99213	OFFICE VISIT EST LEVEL 3	144.00
99214	OFFICE VISIT EST LEVEL 4	213.00
99391	PREVENTIVE VISIT EST <1	191.00
99392	PREVENTIVE VISIT EST 1-4	213.00
99396	PREVENTIVE VIS EST 40-64	258.00
G0008	ADMIN FLU VACCINE	41.00
G0009	ADMIN PNEUMOCOCC VACCINE	41.00
G0101	PELVIC/BREAST EXAM	76.00
G0439	MEDICARE ANNUAL VISIT	232.00