

ALASKA DIGESTIVE AND LIVER DISEASE LLC

3851 Piper ST STE U466

Anchorage 2023

Evaluation and Management			
Rank	CPT Code	Procedure description	Undiscounted price
1	99212	Established patient office visit	\$147.00
2	99213	Established patient office visit	\$252.00
3	99214	Established patient office visit	\$367.50
4	99215	Established patient office visit	\$498.75
5	99202	New patient office visit	\$288.75
6	99203	New patient office visit	\$367.50

7	99204	New patient office visit	\$525.00
8	99205	New patient office visit	\$603.75
9	99232	Hospital visit established patient	\$262.50
10	99223	Hospital visit New patient	\$540.00

- Undiscounted prices for health care services described in this list may be higher or lower than the amount an individual will pay.
- “You will be provided with an estimate of anticipated charges for our nonemergency care upon request. Please do not hesitate to ask for information.”

- <https://go.dhss.ak.local/pub/home/dph/VitalStats/Pages/transparency.aspx>

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Anesthesia			
Rank	CPT Code	Procedure description	Undiscounted price
1		Provider does not offer service	
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Surgery			
Rank	CPT Code	Procedure description	Undiscounted price
1	43239	Upper esophageal exam with biopsy	\$1,184.40
2	45380	Colonoscopy with biopsy	\$1,785.00
3	45385	Colonoscopy with polyp/lesion removal	\$2,073.75
4	45378	Colonoscopy_ exam of entire colon	\$1,470.00
5	43235	Upper esophageal exam	\$1,021.65
6	43264	Exam of hepatobiliary system with removal of debris	\$2,625.00
7	43274	Exam of hepatobiliary system with stent placement	\$3,307.50
8	45381	Colonoscopy with submucosal injection	\$1,793.00

9	46600	Anoscopy_ exam of the anal canal	\$530.00
10	45330	Proctosigmoidoscopy- diagnostic exam of the rectum	\$451.50

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Radiology			
Rank	CPT Code	Procedure description	Undiscounted price
1		Provider does not offer service	
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Pathology and Laboratory			
Rank	CPT Code	Procedure description	Undiscounted price
1		Provider does not offer service	
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Medicine			
Rank	CPT Code	Procedure description	Undiscounted price
1	91110	Capsule gastrointestinal tract imaging w/ interpretation	\$5,250.00
2	91020	Gastric motility study	\$200.55
3	91037	Esophageal function test	\$212.00
4	91035	Esophageal acid reflux test with pH electrode	\$451.50
5	99152	Moderate Conscious sedation 15 minutes	\$52.50
6	99153	Moderate Conscious sedation additional 15 minutes	\$78.75
7	96413	Initial intravenous infusion complex drug	\$796.82
8	96415	Intravenous infusion additional time complex drug	\$180.42
9	96365	Initial intravenous infusion therapeutic	\$330.00
10	96366	Intravenous infusion additional time therapeutic	\$84.49

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