

ALASKA DIGESTIVE AND LIVER DISEASE LLC

3851 Piper ST STE U466

Anchorage, AK

2021

| 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 | |
| 2 | | | |
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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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