

Code	Description	Fee	Average Ins reimbursement
99391	Prev visit, est, infant	\$195.00	\$154.86
99392	Prev visit, est, age 1-4	\$175.00	\$166.04
99393	Prev visit, est, age 5-11	\$173.00	\$165.73
99394	Prev visit, est, age 12-17	\$191.00	\$183.00
99395	Prev visit, est, age 18 +	\$230.00	\$187.17
90670	Pneumococcal vaccine	\$265.00	\$193.91
90680	Rotavirus vaccine	\$120.00	\$82.35
90651	Human Papilloma Virus 9 (HPV-9) vaccine	\$278.00	\$220.00
90723	DtaP-HepB-IPV	\$275.00	\$76.12
90734	Meningococcal vaccine	\$150.00	\$119.04
99212	Office visit, est lvl II	\$90.00	\$66.13
99213	Office visit, est lvl III	\$150.00	\$113.56
99214	Office visit, est lvl IIII	\$215.00	\$168.85
99215	Office visit, est lvl IIIII	\$285.00	\$229.12
99203	Office visit, new lvl III	\$207.00	\$157.75
87070	Culture, bacteria, other	\$26.00	\$11.96
94010	Breathing capacity test	\$81.00	\$60.40
85025	Hemogram w/platelet ct & diff	\$45.00	\$10.83
94640	Pressurized or nonpressurized inhalation t	\$37.00	\$31.24
87880	Strep a assay w/optic	\$35.00	\$18.10
80061	Lipid Panel	\$40.00	\$18.63
87807	respiratory syncytial virus	\$50.00	\$16.68
87804	Influenza screen A/B each	\$40.00	\$18.16
17110	Destruction (eg, laser surgery, electrosurge	\$225.00	\$194.53
82274	Blood, occult, by fecal hemoglobin determ	\$40.00	\$24.26