

Denali OB-GYN Clinic
3976 University Lake Drive, Suite 300
Anchorage, AK 99508

Undiscounted Prices for Top Ten Services in 2025

Per Alaska State law (AS 18.23.400) health care providers and facilities are required to annually compile and report a list of our top 10 most frequently billed services within each of the six sections of the Current Procedural Terminology, Category I (CPT) book. The six sections are:

1. Evaluation and Management
2. Anesthesia
3. Surgery
4. Radiology
5. Pathology and Laboratory
6. Medicine

By law, we are required to tell you that “the undiscounted prices described in this list may be higher or lower than the amount an individual may pay.” This amount does not include any discounts that may be available to you. What this means is that if we are in-network with your insurance, we have a contracted rate (called an allowable) that may be lower than the prices listed here. In addition, you will need to understand the deductibles, co-pays, and co-insurance for your health insurance plan. The actual amount a patient pays out of pocket may be substantially lower than the prices listed below.

If we are **not in network** with your insurance, then our charges will be no higher than the prices listed here but may also be lower as many insurance plans provide some level of discount for out-of-network coverage. Again, you will need to understand the deductibles, co-pays, and co-insurance for your out-of-network coverage.

If you are a self-pay patient, we provide discounts from the prices listed below. Self-pay patients who pay in full at the time of service are provided with a 30% discount off the prices listed below. If a patient pays on a payment plan of 4 equal monthly payments after the date of service, the discount is 20% off the prices listed below, and any payment plans greater than 4 months but less than 12 months, the discount is 10%.

We are in-network with the following insurance companies:

- Premiera Blue Cross and Blue Shield and associated BCBS plans
- Aetna and associated plans in the Aetna network
- Medicaid
- Medicare
- Tricare
- United Health Care (UHC)
- First Choice Health Network (FCHN)
- Cigna

For any insurance not listed above, we are considered out of network.

Good Faith Estimate

You will be provided with what is called a Good Faith Estimate of anticipated charges for our non-emergency care upon request. Please do not hesitate to ask for a good faith estimate. This estimate will only include **our** estimated fees; we cannot provide estimates for other providers or facilities. However, we can provide you with their contact information so you can get an estimate from them. The good faith estimate is specific to your treatment needs as a patient and your insurance status. It is not a repeat of the list below. Therefore, it will require paperwork on your part because we will need numerous pieces of information from you to provide the estimate. The food faith estimate is generally provided in writing, and we will ask you to sign off that you received it. This estimate is not necessarily what you will pay once all the charges are calculated. It is only our best estimate at the time. In some cases, we may provide a reasonable range of final charges and any discounts applied. We will explain the details of the estimate when you are provided it.

Denali OBGYN Evaluation and Management codes for 2025:

<u>CPT</u>	<u>Description</u>	<u>Cost</u>
99203	Office Visit, New Pt, 30-44 minutes	\$365.00
99204	Office Visit, New Pt, 45-59 minutes	\$554.00
99212	Office Visit, Established Pt, 10-19 minutes	\$182.00
99213	Office Visit, Established Pt, 20-29 minutes	\$298.00
99214	Office Visit, Established Pt, 30-39 minutes	\$424.00
99215	Office Visit, Established Pt, 40-54 minutes	\$599.00

<u>CPT</u>	<u>Description</u>	<u>Cost</u>
99385	Preventative Medicine, New Pt 18-39 years	\$427.00
99386	Preventative Medicine, New Pt 40-46 years	\$496.00
99395	Preventative Medicine, Established Pt 18-39 years	\$385.00
99396	Preventative Medicine, Established Pt, 40-67 years	\$411.00
99397	Preventative Medicine, Established Pt, 65+ years	\$441.00

Denali OBGYN Anesthesia codes for 2025:

We do not bill any anesthesia codes

Denali OBGYN Surgery codes for 2025:

<u>CPT</u>	<u>Description</u>	<u>Cost</u>
58100	Endometrial biopsy (separate procedure)	\$786.00
58300	Insertion of Intrauterine Device (IUD)	\$835.00
58301	Removal of Intrauterine Device (IUD)	\$852.00
58558	Hysteroscopy; biopsy and/or polypectomy with or without dilation and curettage	\$2,158.00
58661	Laparoscopy with removal of partial or total oophorectomy/salpingectomy	\$6,089.00
59025	Fetal Non-Stress Test	\$278.00
59400	Obstetric care, including antepartum, vaginal delivery and post-partum care	\$14,200.00
59410	Vaginal delivery including post-partum care	\$6,428.00
59510	Cesarean delivery including antepartum and post-partum care	\$15,693.00
59515	Cesarean delivery including post-partum care	\$7,910.00

Denali OBGYN Radiology codes for 2025:

<u>CPT</u>	<u>Description</u>	<u>Cost</u>
76801	Ultrasound, transabdominal, pregnant pt, 1 st trimester	\$649.00
76805	Ultrasound, transabdominal, pregnant pt, after 1 st trimester, single fetus	\$741.00
76813	Fetal Nuchal Translucency Ultrasound, 1 st trimester	\$654.00
76815	Ultrasound, pregnant pt, limited, 1 or more fetuses	\$446.00
76816	Ultrasound, transabdominal, follow up, pregnant pt, per fetus	\$605.00
76817	Ultrasound, transvaginal, pregnant pt	\$511.00
76818	Fetal biophysical profile with non-stress test	\$660.00
76819	Fetal biophysical profile without non-stress test	\$477.00
76830	Ultrasound, transvaginal	\$640.00
76857	Ultrasound, pelvic, limited (follicle check)	\$278.00

Denali OBGYN Pathology and Laboratory codes for 2025:

<u>CPT</u>	<u>Description</u>	<u>Cost</u>
81001	Urinalysis, culture if indicated	\$32.00
81002	Urinalysis, dipstick without microscopy	\$35.00
81025	Urine pregnancy test	\$86.00
87086	Urine culture, bacterial	\$80.00
87210	Wet mount	\$58.00

Denali OBGYN Medicine codes for 2025:

<u>CPT</u>	<u>Description</u>	<u>Cost</u>
90471	Immunization, 1 vaccine	\$92.00
90472	Immunization, each add'l vaccine	\$67.00
90651	Human Papillomavirus (9vHPV) vaccine, 2 or 3 dose	\$725.00
90715	Tdap vaccine, 7 years or older	\$107.00
96372	Therapeutic, prophylactic, or diagnostic injection	\$66.00

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The State of Alaska Department of Health and Social Services (DHSS) is responsible for overseeing this law, their website is: <https://health.alaska.gov/dph/VitalStats/Pages/transparency/A.aspx>

You may also find a copy of this Price Transparency on our website at: www.denaliobgyn.com