

## SELF-PAY OFFICE CONSULT FEE SCHEDULE

NEW PATIENT W/REFERRAL		FEE
99245	Consult- Comprehensive/High	\$650.00
99244	Consult- Comprehensive/Moderate	\$550.00
99243	Consult- Detailed/Moderate	\$360.00
99242	Consult- Expanded/Low	\$260.00
99241	Consult - Low	\$140.00
NEW PATIENT W/O REFERRAL		FEE
99205	Consult- Comprehensive/High	\$510.00
99204	Consult- Comprehensive/Moderate	\$405.00
99203	Consult- Detailed/Moderate	\$265.00
99202	Consult- Expanded/Low	\$180.00
99201	Consult- Problem Focused/Straight	\$105.00
ESTABLISHED PATIENT		FEE
99215	Established Comprehensive/High	\$355.00
99214	Established Comprehensive/Moderate	\$265.00
99213	Established Expanded/Low	\$175.00
99212	Established Focused/Low	\$108.00
99211	Established Low	\$55.00

**NOTE:** *Patients will receive a 50% discount when a full payment is made at the time of initial visit.*

*If unable make a full payment, the 50% discount will not apply. A \$50 payment is required at the time of initial visit, and a 90-day payment plan agreement will be issued.*