



## Prices for Primary Care Services

Any visit, appointment, or consultation that involves a standard medical examination and/or requires any medical decision making to assess, diagnose, and treat a medical condition or issue. While the prices are mostly based on time, the nature of your visit also factors in to your costs.

CPT Code	Description	Cost
99201	*New Patient 10 Minute face-to-face with the patient and/or family. A problem focused history; a problem focused examination; and straightforward medical decision making.	\$175.00
99202	*New Patient 20 minute face-to-face with the patient and/or family. An expanded problem focused history; an expanded problem focused examination; and straightforward medical decision making.	\$219.00
99203	*New Patient 30 minute face-to-face with the patient and/or family. A detailed history; a detailed examination; and medical decision making of low complexity.	\$285.00
99204	*New Patient 45 minute face-to-face with the patient and/or family. A comprehensive history; a comprehensive examination; and Medical decision making of moderate complexity.	\$407.00
99205	*New Patient 60 minute face-to-face with the patient and/or family. A comprehensive history; a comprehensive examination; and medical decision making of high complexity.	\$549.00
99211	Standard 5 Minute Outpatient Visit With Established Patient.	\$103.00
99212	Standard 5-10 Minute Outpatient Visit With Established Patient.	\$147.00
99213	Standard 10-15 Minute Outpatient Visit With Established Patient.	\$188.00
99214	Standard 20-25 Minute Outpatient Visit With Established Patient.	\$272.00
99215	Standard 30-45 Minute Outpatient Visit With Established Patient.	\$436.00

\*New Patient is defined as never being seen at SVT Health & Wellness before and/or has not received services by a medical primary care provider at SVT Health & Wellness for previous 18 months or more.

## Prices for Preventive Primary Care

Preventive medicine re-evaluation and management, including age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions; and the ordering of appropriate immunization(s), screening laboratory/diagnostic procedures. This visit is considered a preventive wellness exam and does not cover the discussion of problems, conditions, illnesses, or any other care that would be considered part of a "Regular Visit."

CPT Code	Description	Cost
99391	Infant <b>Well-Child Check (WCC)</b>	\$211.00
99392	1-4 Year Old Annual WCC	\$224.00
99393	5-11 Year Old Annual WCC	\$244.00
99394	12-17 Year Old Annual WCC	\$263.00
99395	18-39 Year Old Wellness Exam	\$355.00
99396	40-64 Year Old Wellness Exam	\$388.00
99397	65+ Year Old Wellness Exam	\$441.00



# Prices for Primary Care Services

## Discount Fee Program

SVT Health and Wellness offers discounts to patients who qualify based on household size and income, in accordance with the Federal Poverty Guidelines for Alaska as published and updated annually in the Federal Register.

Discount	Description - Medical, Integrative & Behavioral Health	Nominal Fee
Nominal Fee (NF)	Per visit to include in-house labs, x-rays, and RX dispensed on-site = / - <b>100% Federal Poverty Line (FPL)</b>	\$25.00
NF - Quest Labs	78% discount on <u>Quest</u> lab fees (fees are assessed in addition to NF per visit above).	=/- 100% FPL
"C"	65% Discount <b>101% - 150% Federal Poverty Line.</b>	N/A
"B"	40% Discount <b>151% - 175% Federal Poverty Line.</b>	N/A
"A"	20% Discount to <b>176% - 200% Federal Poverty Line.</b>	N/A

Discount	Description - Dental	Nominal Fee
Nominal Fee	Per visit plus dental appliances(crowns, bridges, dentures) at cost* =/ <b>&lt; 100% Federal Poverty Line</b>	\$40.00
"C"	40% Discount all dental services. <b>101% - 150% Federal Poverty Line.</b>	N/A
"B"	20% Discount all dental services. <b>151% - 175% Federal Poverty Line.</b>	N/A
"A"	10% Discount all dental services. <b>176% - 200% Federal Poverty Line.</b>	N/A

## SERVICES/ITEMS EXCLUDED FROM DISCOUNT FEE PROGRAM

Medical	<ul style="list-style-type: none"> <li>• Travel Vaccines</li> <li>• Massage Therapy</li> <li>• Acupuncture</li> <li>• Specialty labs for which no money is exchanged at SVT Health &amp; Wellness.</li> </ul>
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<b>Estimates of costs for Nominal Fee patients for the following restorative services are:</b>	Dental	Full Denture (per arc)	\$300 + 5 visits = \$500
		Metal Partial denture:	\$475 + 4 visits = \$635
		Acrylic Partial denture:	\$375 + 4 visits = \$535
		Flipper:	\$300 + 2 visits = \$380
		Crown:	\$350 + 2 visits = \$430
		Bridge (3 unit):	\$1050 + 2 visits = \$1130

Eff. 12/13/18 - SVT Health and Wellness prepares its schedule of fees for the provision of its services consistent with locally prevailing rates or charges and designed to cover its reasonable costs of operations.