

2021 Clinic Price Transparency

	Procedure Description	Clinic Charge	Average Commercial Insurance Payment	Medicare Reimbursement	Medical Assistance Reimbursement
1	Office/Outpatient Visit New Patient Level 2	\$227.00	\$165.98	\$67.79	\$58.24
2	Office/Outpatient Visit New Patient Level 3	\$321.00	\$237.73	\$103.75	\$82.49
3	Office/Outpatient Visit New Patient Level 4	\$490.00	\$361.90	\$155.54	\$125.69
4	Office/Outpatient Visit New Patient Level 5	\$619.00	\$460.21	\$205.29	\$158.58
5	Office/Outpatient Visit Established Patient Level 1	\$69.00	\$51.09	\$22.03	\$17.83
6	Office/Outpatient Visit Established Patient Level 2	\$136.00	\$103.56	\$53.01	\$34.83
7	Office/Outpatient Visit Established Patient Level 3	\$224.00	\$169.91	\$85.26	\$57.69
8	Office/Outpatient Visit Established Patient Level 4	\$324.00	\$245.77	\$121.43	\$83.61
9	Office/Outpatient Visit Established Patient Level 5	\$435.00	\$331.98	\$169.22	\$112.31
10	Preventive Visit New Patient Infant	\$331.00	\$265.17	\$0.00	\$85.56
11	Preventive Visit New Patient Ages 1-4 Years	\$347.00	\$277.81	\$0.00	\$89.74
12	Preventive Visit New Patient Ages 5-11 Years	\$362.00	\$275.27	\$0.00	\$93.36
13	Preventive Visit New Patient Ages 12-17 Years	\$410.00	\$311.31	\$0.00	\$105.34
14	Preventive Visit New Patient Ages 18-39 Years	\$397.00	\$301.62	\$0.00	\$102.28
15	Preventive Visit New Patient Ages 40-64 Years	\$459.00	\$348.96	\$0.00	\$118.16
16	Preventive Visit New Patient Ages 65+ Years	\$499.00	\$399.28	\$0.00	\$128.20
17	Preventive Visit Established Patient Under Age 1	\$300.00	\$227.78	\$0.00	\$77.19
18	Preventive Visit Established Patient Ages 1-4 Years	\$319.00	\$242.32	\$0.00	\$82.21
19	Preventive Visit Established Patient Ages 5-11 Years	\$318.00	\$241.51	\$0.00	\$81.93
20	Preventive Visit Established Patient Ages 12-17 Years	\$349.00	\$265.58	\$0.00	\$90.02
21	Preventive Visit Established Patient Ages 18-39 Years	\$358.00	\$272.04	\$0.00	\$92.24
22	Preventive Visit Established Patient Ages 40-64 Years	\$381.00	\$289.50	\$0.00	\$98.10
23	Preventive Visit Established Patient Ages 65+ Years	\$410.00	\$311.31	\$0.00	\$105.34
24	Administration of Injection	\$43.00	\$33.35	\$14.30	\$10.86
25	X-ray exam chest 2 views	\$65.00	\$45.83	\$22.04	\$23.35

ATTENTION: The amounts posted above DO NOT reflect the amount(s) each clinic patient will pay for the services listed. For specific information about the amount you will owe, please contact your insurance provider.

The Minnesota Legislature passed a law that requires certain clinics to report amounts for their 25 most frequent services that cost more than \$25. The services listed here do not reflect all of the services provided at this clinic

Charges represent the standard amount a clinic bills for a service. For most patients, clinics get paid an amount below the listed charge.

Patients covered by commercial health insurance or a Medicare Advantage plan: Your health insurance company has likely negotiated a discount or contracted rate for each service. Your health insurance company's negotiated rate might be higher or lower than the average commercial payment amount

Patients with government-sponsored health coverage, such as Medicare or Medical Assistance: The payment rates listed above reflect amounts set by Medicare or Medical Assistance, not by this clinic. These rates do not reflect the amount you may owe as a co-payment.