

# Price Transparency



| Description                                   | Price    | Average Insurance Reimbursement | Medicare Reimbursement | Medical Assistance Reimbursement |
|---|----------|---------------------------------|------------------------|----------------------------------|
| New Patient visit about 20 minutes            | \$228.30 | \$122.26                        | \$75.63                | \$58.24                          |
| New Patient visit about 30 minutes            | \$321.87 | \$174.64                        | \$106.98               | \$82.49                          |
| New Patient visit about 45 minutes            | \$488.46 | \$265.92                        | \$162.85               | \$125.69                         |
| Established patient visit about 15 minutes    | \$222.39 | \$118.98                        | \$74.75                | \$57.69                          |
| Established patient visit about 25 minutes    | \$325.68 | \$175.22                        | \$108.51               | \$83.61                          |
| Established patient visit about 40 minutes    | \$435.12 | \$235.30                        | \$145.65               | \$112.31                         |
| Carpal Tunnel injection                       | \$228.12 | \$125.76                        | \$77.99                | \$55.42                          |
| Tendon Sheath Injection                       | \$157.86 | \$86.26                         | \$54.52                | \$38.74                          |
| Trigger Point Injection 1 or 2 muscles        | \$165.90 | \$90.12                         | \$55.66                | \$39.51                          |
| Trigger Point Injection 3 or more             | \$191.34 | \$103.79                        | \$63.78                | \$45.41                          |
| Shoulder/Hip/Knee injection                   | \$177.54 | \$97.81                         | \$61.47                | \$43.62                          |
| Shoulder/Hip/Knee injection with flouroscoy   | \$273.45 | \$147.85                        | \$94.33                | \$66.97                          |
| Caudal epidural with flouroscoy               | \$763.80 | \$404.12                        | \$261.22               | \$185.52                         |
| Greater Occipital Nerve injection             | \$243.90 | \$156.67                        | \$70.23                | \$49.78                          |
| Brachial Plexus Nerve injection               | \$359.28 | \$193.70                        | \$114.42               | \$81.34                          |
| Suprascapular Nerve injection                 | \$286.50 | \$180.05                        | \$85.07                | \$60.30                          |
| Ilioinguinal, iliohypogastric nerve injection | \$415.56 | \$220.98                        | \$113.47               | \$80.57                          |
| sciatic nerve injection                       | \$412.92 | \$224.15                        | \$127.83               | \$90.83                          |
| femoral nerve injection                       | \$368.01 | \$198.72                        | \$89.80                | \$63.63                          |
| Morton's neuroma injection                    | \$143.55 | \$77.98                         | \$48.66                | \$34.38                          |
| Flouroscoy                                    | \$309.18 | \$157.86                        | \$103.06               | \$78.26                          |
| Therapeutic activities / 15 min               | \$121.59 | \$47.36                         | \$40.53                | \$28.40                          |
| Therapeutic Exercise / 15 min                 | \$93.15  | \$35.73                         | \$31.05                | \$22.01                          |
| Neuromuscular Reeducation / 15                | \$106.23 | \$40.78                         | \$35.41                | \$25.40                          |
| Physical Therapy Evaluation level 1           | \$261.15 | \$97.83                         | \$87.05                | \$61.84                          |
| Supartz                                       | \$239.74 | \$86.70                         | \$79.91                | \$82.61                          |

**Disclaimers:**

- **Attention:** The amounts posted above DO NOT reflect the amount(s) each patient will pay for the services listed. For specific information about the amount you may owe for the services you receive, please contact your INSURER.
- The Minnesota Legislature passed a law that requires certain healthcare providers to report amounts for their 25 most frequent services that are greater than \$25. This list does not include all services provided by this establishment.
- Charges represent the standard amount our clinic bills for a service. Many times, the clinic is paid well below the listed charge.
- Patients covered by commercial health insurance or Medicare Advantage plans: Your health insurance company has likely negotiated a contracted rate for each service. Your health insurance company's negotiated price could be higher or lower than the average commercial payment amount above. To learn about your health insurance company's negotiated price or how much you may owe under the terms of your specific policy, please contact your health insurance company.
- Patients covered by government sponsored health coverage, such as Medicare or Medical Assistance: The payment rates listed above reflects amounts set by Medicare or Medicaid, not by this clinic. These listed rates do NOT reflect the amount you might owe as a co-payment.
- For more information, please contact the Billing Office at 320-217-8480 ext 2003