2024 Top 50 Outpatient Codes



Effective Date: January 1, 2025



DISCLAIMER

The pricing presented herein is based on outpatient CPT4 codes for specific services. The physician makes the determination as to the appropriate diagnosis and procedure. Each patient is different and unique and Yuma Regional Medical Center strives to treat each patient as an individual with specific healthcare needs. Therefore, pricing will be individual as well. A physician may well believe a specific procedure is appropriate for someone, yet upon treatment, there may be complications or other factors creating the need for a different course of treatment. Charges listed do not reflect additional charges related to Physician Billing.

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2024 Top 50 CPT Listing

CPT4 Code & Description	Estimated Charge Per CPT4
36415 - COLLECTION VENOUS BLOOD VENIPUNCTURE	\$ 16
80053 - COMPREHENSIVE METABOLIC PANEL	\$ 119
85025 - BLOOD COUNT COMPLETE AUTOANDAUTO DIFRNTL WBC	\$ 63
80061 - LIPID PANEL	\$ 85
84443 - ASSAY OF THYROID STIMULATING HORMONE TSH	\$ 101
99211 - OFFICE-OUTPATIENT EST PT MAY NOT REQ PHYS-QHP	\$ 218
85027 - BLOOD COUNT COMPLETE AUTOMATED	\$ 53
83036 - HEMOGLOBIN GLYCOSYLATED A1C	\$ 103
82306 - 25 HYDROXY INCLUDES FRACTIONS IF PERFORMED	\$ 109
77067 - SCREENING MAMMOGRAPHY BI 2-VIEW BREAST INC CAD	\$ 832
84439 - ASSAY OF FREE THYROXINE	\$ 117
81001 - URNLS DIP STICK-TABLET REAGENT AUTO MICROSCOPY	\$ 94
88185 - FLOW CYTOMETRY CELL SURF MARKER TECHL ONLY EA	\$ 67
77063 - SCREENING DIGITAL BREAST TOMOSYNTHESIS BI	\$ 149
36416 - COLLECTION CAPILLARY BLOOD SPECIMEN	\$ 16
85610 - PROTHROMBIN TIME	\$ 125
96365 - IV INFUSION THERAPY-PROPHYLAXIS -DX 1ST TO 1 HR	\$ 791
80048 - BASIC METABOLIC PANEL CALCIUM TOTAL	\$ 95
86003 - ALLERGEN SPEC IGE CRUDE ALLERGEN EXTRACT EACH	\$ 35
83735 - ASSAY OF MAGNESIUM	\$ 72
82607 - CYANOCOBALAMIN VITAMIN B-12	\$ 108
11042 - DEBRIDEMENT SUBCUTANEOUS TISSUE 1ST 20 SQ CM-LESS THAN	\$ 2,806
83540 - ASSAY OF IRON	\$ 48
82728 - ASSAY OF FERRITIN	\$ 70
83550 - IRON BINDING CAPACITY	\$ 60

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^{*} Prices Subject to Change

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CPT4 Code & Description	Estimated Charge Per CPT4
96372 - THERAPEUTIC PROPHYLACTIC-DX INJECTION SUBQ-IM	\$ 352
87077 - CUL BACT AEROBIC ADDL METHS DEFINITIVE EA ISOL	\$ 128
81003 - URNLS DIP STICK-TABLET RGNT AUTO W-O MICROSCOPY	\$ 85
87086 - CULTURE BACTERIAL QUANTTATIVE COLONY COUNT URINE	\$ 112
86140 - C-REACTIVE PROTEIN	\$ 46
77080 - DXA BONE DENSITY STUDY 1-GREATER THAN SITES AXIAL SKEL	\$ 833
85652 - SEDIMENTATION RATE RBC AUTOMATED	\$ 88
71046 - RADIOLOGIC EXAM CHEST 2 VIEWS	\$ 633
80069 - RENAL FUNCTION PANEL	\$ 97
82043 - URINE ALBUMIN QUANTITATIVE	\$ 24
96375 - THERAPEUTIC INJECTION IV PUSH EACH NEW DRUG	\$ 408
99202 - OFFICE-OUTPATIENT NEW SF MDM 15 MINUTES	\$ 224
82570 - CREATININE OTHER SOURCE	\$ 53
83970 - ASSAY OF PARATHORMONE	\$ 173
84156 - PROTEIN TOTAL XCPT REFRACTOMETRY URINE	\$ 28
88341 - IMHCHEM-IMCYTCHM EA ADDL SINGLE ANTB STAIN PX	\$ 192
G0279 - TOMOSYNTHESIS MAMMO	\$ 114
76641 - US BREAST UNI REAL TIME WITH IMAGE COMPLETE	\$ 1,712
84481 - ASSAY OF TRIIODOTHYRONINE T3 FREE	\$ 62
84153 - ASSAY OF PROSTATE SPECIFIC ANTIGEN TOTAL	\$ 84
82962 - GLUC BLD GLUC MNTR DEV CLEARED FDA SPEC HOME USE	\$ 32
A9579 - GAD-BASE MR CONTRAST NOS1ML	\$ 267
76856 - US PELVIC NONOBSTETRIC REAL-TIME IMAGE COMPLETE	\$ 1,408
11045 - DEBRIDEMENT SUBCUTANEOUS TISSUE EA ADDL 20 SQ CM	\$ 1,841
96413 - CHEMOTX ADMN IV NFS TQ UP 1 HR 1-1ST SBST-DRUG	\$ 1,145

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