

This notice is being posted in accordance with AS 18.23.400. Disclosure and reporting of health care services, prices, and fee information.

Effective January 1, 2022 and until further notice, Valley Chiropractic Clinic Inc. charges the following undiscounted fees for the listed health care services:

You will be provided an estimate of the anticipated charges for your non-emergency care upon request. Please do not hesitate to ask for information.

The undiscounted prices listed below may be higher or lower than the amount an individual actually pays for the health care services described.

Valley Chiropractic is contracted to provide health care services as an in-network preferred provider for only Premera Blue Cross Blue Shield of Alaska and Aetna.

Evaluation/Management

Procedure Code	Description	Undiscounted Fee
99202	New patient exam 20 minutes	\$195.00
99203	New patient exam 30 minutes	\$250.00
99204	New patient exam 45 minutes	\$360.00
99212	Established patient exam 10 minutes	\$120.00
99213	Established patient exam 15 minutes	\$150.00
99214	Established patient exam 25 minutes	\$230.00
99347	Home Visit- established patient exam	\$205.00
99348	Home Visits- established patient	\$250.00

	exam- expanded	

Medicine

Procedure Code	Description	Undiscounted Fee
98940	Chiropractic Adjustment 1- 2 regions	\$65.00
98941	Chiropractic Adjustment 3-4 regions	\$80.00
98942	Chiropractic Adjustment 5 regions	\$102.00
98943	Extremity Adjustment – i.e. shoulder, wrist, ankle,	\$30.00
97124	Massage Therapy per 15 minute unit	\$37.50
97140	Manual Therapy per unit	\$45.00
97032	Electrical muscle stimulation per unit	\$45.00
97035	Ultrasound therapy per unit	\$40.00
97039/S8948	Low Level Laser Therapy	\$30.00
97012	Cervical Mechanical Traction per unit	\$37.00

Radiology

Procedure Code	Description	Undiscounted Fee
72040	X-ray – Neck – 2-3 views	\$225.00
72050	X-ray – neck – 4-5 views	\$325.00
73030	X-ray – shoulder – 2 view	\$245.00
72070	X-ray – thoracic spine - 2 views	\$184.00
73100	X-ray – Wrist – 2 views	\$180.00

72100	X-ray – lumbosacral – 2/3 views	\$230.00
73600	X-ray – Ankle - 2 View	\$185.00
73620	X-ray – lateral view Both Feet	\$185.00
73560	X-ray Knee – 1-2 views	\$135.00
73120	X-ray – Hand – 2 views	\$180.00

Surgery

Procedure Code	Description	Undiscounted Fee
NONE	None	\$0.00

Anesthesia

Procedure Code	Description	Undiscounted Fee
NONE	None	\$0.00

Pathology

Procedure Code	Description	Undiscounted Fee
NONE	None	\$0.00

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You may also find a copy of this fee schedule on our website at www.valleychiropracticwasilla.com

The State of Alaska Department of Health and Social Services website address is <http://dhss.alaska.gov/Pages/default.aspx>