

Good Faith Estimate & Fee Schedule

All the services below may or may not be covered by your insurance plan. If billed to your insurance and they are not covered, you are responsible to pay the full “Billed Amount.”

If you are not using insurance, you will be charged the Time of Service (TOS) TOS Discount fee. It is your responsibility to contact your insurance plan to find out how much, if any, your plan will cover and pay for and how much you will be responsible for paying.

Please use this [Insurance Verification Form](#) to determine your benefits and responsibilities and submit to Amber Wellness Group for your records.

Procedure Code	Description	Billed to Insurance	TOS Discount
99204	New Patient Visit total pt. care time up to 59 min.	\$360.00	\$288.00
99214	Return visit total pt. care time up to 39 min.	\$280.00	\$224.00
99205	New Patient Visit total pt. care time up to 74 min.	\$ 440.00	\$352.00
99215	Return visit total pt. care time up to 54 min.	\$360.00	\$288.00
99417/ G2212	Each 15 min. of time added to a 99215/99205 visit - that the physician spends on patient care (inc. but not limited to intake review, charting, prescription refills, lab review, plan development, physician consults, research).	\$100.00	\$60.00
99402	Lifestyle Counseling (Nutrition, Diabetes, Smoking cessation, Birth Control during Visit)	\$150.00	\$100.00
99447	Interprofessional Consultation 11 to 20 min.	\$150.00	\$75.00
99448	Interprofessional Consultation 21 to 30 min.	\$200.00	\$100.00
97140	Manual Therapy per 15 minute unit	\$90.00	\$60.00
Unlikely to be Covered By Insurance			
99443	Phone Consult (Supplement Review, Rx Requests not covered during a visit, COVID-19 Questions)	\$195.00	\$100.00
99421	Initiated by Patient - Portal Exchange 5 to 10 min.	\$75.00	\$50.00
99422	Initiated by Patient – Portal Exchange 11 to 20 min.	\$75.00	\$50.00
99423	Initiated by Patient – Portal Exchange 21 + min.	\$75.00	\$50.00
99080	Special Reports – (Insurance Forms, HSA, Workers Comp, DMV	\$75.00	\$50.00
NOT COVERED/NOT BILLED TO INSURANCE			
	NO SHOW or Late Appointment Cancellations	N/A	\$140.00
	Lab Handling Fee (Clinic to Lab Preparation, # of labs)	N/A	\$30-40.00
	Vitamin/Nutritional IV's	N/A	\$155-\$300.00
	Vitamin/Nutritional Injections	N/A	\$35-\$100.00
	Mona Lisa Touch and ThermiVa Series	N/A	\$3000
	Mona Lisa Touch and ThermiVa Annual Touch up	N/A	\$1000
<i>Check with front office on current promotions and discounts</i>			