

Price information in compliance with MN 62J.812

Minnesota statute 62J.812 requires our clinic to post provider charges for common services, and the average payments or reimbursements received for those services from government and commercial insurance.

Service	Provider charge	Medicare, allowable payment	Medicaid, allowable payment	Commercial, average reimbursement
<i>Outpatient office visits for new* patients, by level of complexity</i>				
LEVEL II	306	72	50	207
LEVEL III	432	111	76	294
LEVEL IV	660	166	114	448
LEVEL V	834	219	150	566
<i>Outpatient office visits for established* patients, by level of complexity</i>				
LEVEL I	141	23	16	63
LEVEL II	183	56	39	124
LEVEL III	301	91	62	205
LEVEL IV	437	129	89	297
LEVEL V	586	179	120	399
<i>Periodic preventive medicine for new* patients, by age</i>				
LESS THAN 1 YR	447	-	76	300
1-4 YRS	468	-	79	314
5-11 YRS	488	-	82	328
12-17 YRS	552	-	92	370
18-39 YRS	535	-	90	359
40-64 YRS	619	-	103	415
65 YRS AND OLDER	673	-	112	451
<i>Periodic preventive medicine for established* patients, by age</i>				
LESS THAN 1 YR	404	-	68	271
1-4 YRS	430	-	73	288
5-11 YRS	428	-	72	287
12-17 YRS	471	-	79	316
18-39 YRS	482	-	81	324
40-64 YRS	514	-	86	344
65 YRS AND OLDER	552	-	93	370
<i>Common lab services</i>				
Lipid panel	46	13	13	17
Comprehensive metabolic panel	37	11	11	13
Thyroid stimulating hormone test	57	17	17	21
Hemoglobin glycosylated A1C	34	10	10	12
Strep test (Group A)	42	17	17	20

*Coding standards and associated charge and reimbursement values may vary based on complexity of a visit (visit level) and whether a patient is a new or existing patient. A **new patient** has not received professional services from a provider in the same specialty and in the same group practice within the previous three years. An **established patient** has received professional services from a provider in the same specialty and in the same group practice within the previous three years.

This is not a comprehensive list of services provided by our clinic.

This list of charges is meant to be informative and does not reflect the amount that you may owe for your care. Individual health plans have negotiated rates with Grand Itasca Clinic & Hospital, part of Fairview Health Services. To get an accurate estimate of the payment rate our system will receive related to your care, and/or an estimate of what you may need to pay out of pocket, please contact us at **218-999-1710**.