

Top 25 Clinic Procedures/Services

The Minnesota Legislature passed a law (MN State Statute 62J.812) that requires certain clinics to report information for their 25 most frequent services that are billed at a rate higher than \$25.00. The services listed below do not reflect all of the services provided at Ortonville Area Health Services' (OAHS) clinics. Charges represent the standard amount OAHS bills for the associated service. Most often, OAHS is paid at an amount well below the charge due to negotiated rates or set pricing (see below for more information).

| Description | Average Billed Charge | Medicare Allowable | Medicaid Allowable | Average Commercial Allowable |
|---|-----------------------|--------------------|--------------------|------------------------------|
| Office Outpatient Visit New Patient Level II | \$147.00 | \$89.66 | \$54.35 | \$118.26 |
| Office Outpatient Visit New Patient Level III | \$227.00 | \$135.42 | \$83.05 | \$182.81 |
| Office Outpatient Visit New Patient Level IV | \$336.00 | \$167.10 | \$124.46 | \$256.56 |
| Office Outpatient Visit New Patient Level V | \$444.00 | \$220.36 | \$163.83 | \$338.89 |
| Office Outpatient Visit Established Patient Level I | \$40.00 | \$23.30 | \$17.78 | \$32.21 |
| Office Outpatient Visit Established Patient Level II | \$115.00 | \$56.59 | \$42.67 | \$92.54 |
| Office Outpatient Visit Established Patient Level III | \$183.00 | \$90.88 | \$68.32 | \$147.39 |
| Office Outpatient Visit Established Patient Level IV | \$240.00 | \$128.16 | \$96.26 | \$175.14 |
| Office Outpatient Visit Established Patient Level V | \$362.00 | \$180.42 | \$135.12 | \$276.21 |
| Preventive Med Clinic Visit New Patient Age 5-11 | \$238.00 | Not Covered | \$89.40 | \$181.74 |
| Preventive Med Clinic Visit New Patient Age 12-17 | \$268.00 | Not Covered | \$100.07 | \$204.63 |
| Preventive Med Clinic Visit New Patient Age 18-39 | \$261.00 | Not Covered | \$97.28 | \$210.36 |
| Preventive Med Clinic Visit New Patient Age 40-64 | \$300.00 | Not Covered | \$112.01 | \$241.77 |
| Preventive Med Clinic Visit Established Patient < 1 | \$198.00 | Not Covered | \$74.16 | \$159.36 |
| Preventive Med Clinic Visit Established Patient 1-4 | \$211.00 | Not Covered | \$78.74 | \$170.02 |
| Preventive Med Clinic Visit Established Patient 5-11 | \$211.00 | Not Covered | \$78.48 | \$169.82 |
| Preventive Med Clinic Visit Established Patient 12-17 | \$230.00 | Not Covered | \$85.85 | \$175.54 |
| Preventive Med Clinic Visit Established Patient 18-39 | \$235.00 | Not Covered | \$87.63 | \$189.30 |
| Preventive Med Clinic Visit Established Patient 40-64 | \$249.00 | Not Covered | \$92.96 | \$200.66 |
| Psychotherapy Services – 30 minutes | \$152.00 | \$78.23 | \$63.80 | \$98.87 |
| Immunization Administration 1 Vaccine IM | \$48.00 | \$20.64 | \$15.74 | \$34.93 |
| Venipuncture (Blood Draw) | \$35.00 | \$16.14 | \$8.83 | \$3.05 |
| Urinalysis-Dipstick Only | \$60.00 | \$34.50 | \$2.25 | \$2.29 |
| Therapeutic, Prophylactic, Diagnostic Injection SUBQ/IM | \$49.00 | \$48.14 | \$10.41 | \$35.52 |
| *EKG Interpretation and Report Only | \$59.00 | \$9.44 | \$10.41 | \$14.59 |

*EKG's will also include a facility fee of \$62.00 making the total charge of an EKG \$121.00

Attention: The amounts posted do not reflect the amount(s) each OAHS clinic patient will pay for the services listed above. For specific information about the amount you will owe for services you receive, please contact your insurer or call our patient financial services (PFS) department at (320) 839-4096. The PFS department office hours are 7:30 – 4:30 Monday through Friday.

Patients covered by commercial insurance companies or Medicare Advantage plan: Your health insurance company has likely negotiated a discount or contracted rate for each service. Your health insurance company's negotiated price might be higher or lower than the average commercial payment amount listed above. To learn more about your health insurance company's negotiated price or how much you will owe under the terms of your specific health policy, please contact your health insurance company.

Patients with government sponsored health coverage, such as Medicare or Medical Assistance: The payment rates listed above reflect amounts set by Medicare or Medical Assistance, not by OAHS. These listed rates do not reflect the amount you might owe as a co-payment. Because of the way of which OAHS Ortonville Clinic bills, the dollar amount for some of the services will be split *

between two distinct charges of a professional fee and a facility fee although the total charge will be the same (e.g. New Patient Level II: \$147.00 total charge: \$112.00 billed as professional fee and \$35.00 billed as facility fee).

Top 25 Clinic Procedures/Services FAQ:



Q: There are ten different “office outpatient visit” charges. What factors determine which charge I might receive for my clinic visit?

- A: There are five levels/charges for a “new” patient and five levels/charges for an “established” patient
- A new patient level is charged for the first time the patient sees an OAHS provider within a given specialty (e.g. Family Medicine vs ENT vs Mental Health) and/or if there is a lapse in care of three years or more within that specialty.

Within the new and established levels/charges there five additional levels/charges that could be charged; this charge can be determined by two different methodologies. The laws of billing these levels/charges allow providers to bill using either method, whichever is the higher level/charge, on any given visit.

1. Determined based on the clinic visit and the exam, concerns and symptoms discussed and/or addressed, level of complexity of medical conditions reviewed and/or addressed and medical decision making involved ***or***
2. Could be based on time spent: Each level has an expected amount of time spent to qualify for billing that given level:

| | |
|------------------------------------|--|
| New Patient Level I = 10 Minutes | Established Patient Level I = 5 Minutes |
| New Patient Level II = 20 Minutes | Established Patient Level II = 10 Minutes |
| New Patient Level III = 30 Minutes | Established Patient Level III = 15 Minutes |
| New Patient Level IV = 45 Minutes | Established Patient Level IV = 25 Minutes |
| New Patient Level V = 60 Minutes | Established Patient Level V = 40 Minutes |

Q: How do my co-pays and deductibles apply to this list of charges and allowable columns?

A: Your co-payment and deductibles are unique to your insurance plan and not accounted for in the information provided. Contact your insurance company or review your policy to understand what co-payments or deductibles may apply to your visit.

Q: I am under the impression I have 100% coverage for wellness visits. Does this mean I will be billed for my wellness visits?

A: Many insurance policies cover wellness visits and potentially associated wellness services at 100%. Each plan is different; please contact your insurance company or review your policy to understand what wellness coverage applies to you.

Q: For government sponsored health coverage, such as Medicare or Medical Assistance; it says because of the way OAHS clinic bills some of the services may be split between two distinct charges. Is this applicable to Clinton and Trojan Clinic as well?

A: No, this is not applicable to Clinton and Trojan Clinic. Although, the total billed charges will not change, it is simply itemized differently on the claim form.