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	Medicare,	Medicaid,	Commercial,
	charge	allowable	allowable	average
		payment	payment	reimbursement
Outpatient office visits	for new* patier	nts, by level of comp	lexity	
LEVEL II	267	71	50	204
LEVEL III	409	108	76	308
LEVEL IV	609	161	114	461
LEVEL V	804	212	150	605
Outpatient office visits for e	established* pa	itients, by level of co	omplexity	
LEVELI	87	23	16	66
LEVEL II	207	55	39	153
LEVEL III	335	88	62	246
LEVEL IV	471	124	88	349
LEVEL V	661	174	124	529
Periodic preventive	medicine for n	ew* patients, by ag	е	•
LESS THAN 1 YR	404	-	75	297
1-4 YRS	420	-	79	310
5-11 YRS	437	-	82	322
12-17 YRS	493	-	92	364
18-39 YRS	479	-	90	353
40-64 YRS	553	-	103	409
65 YRS AND OLDER	599	-	112	443
Periodic preventive me	dicine for estab	plished* patients, by	i age	- -
LESS THAN 1 YR	364	-	68	268
1-4 YRS	387	-	72	285
5-11 YRS	386	-	72	284
12-17 YRS	422	-	79	311
18-39 YRS	431	-	80	318
40-64 YRS	460	-	86	339
65 YRS AND OLDER	494	-	92	365
Co	ommon lab serv	vices	·	
Lipid panel	41	13	13	21
Comprehensive metabolic panel	32	10	11	17
Metabolic panel total ca	25	8	8	13
Hemoglobin glycosylated A1C	28	10	10	15
Surgical Pathology Exam	236	71	70	160

*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 specialty and in 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 Fairview Health Services. To get an accurate estimate of the payment rate Fairview will receive related to your care, and/or an estimate of what you may need to pay out of pocket, please contact Fairview's pricing department at **612-672-1048** or view the billing page on **mhealthfairview.org**.