

CHI LakeWood Health
Clinic Reporting of top 25 procedures as required by MN Statute 62J.812

#	CPT Procedure Description	Evaluation and Management Code	Preventative Service Code	Gross Charge Amount	Medicare Allowed Amount	Medicaid Allowed Amount	Average Commercial Allowed Amount
1	Established Patient, office or other outpatient, Level III	Yes		\$ 261.00	\$ 262.74	\$ 171.47	\$ 170.55
2	Established Patient, office or other outpatient, Level IV	Yes		\$ 368.00	\$ 287.80	\$ 172.65	\$ 225.64
3	Established Patient, office or other outpatient, Level II	Yes		\$ 163.00	\$ 225.10	n/a	\$ 135.02
4	Established Patient, office or other outpatient, Level V	Yes		\$ 514.00	\$ 283.02	\$ 174.56	\$ 293.85
5	Immunization Admin. Single or Combination vaccine/toxoid		Yes	\$ 53.00	n/a	n/a	\$ 37.32
6	Kenalog-40 injection(triamcinolone acetonide) injectable suspension			\$ 589.00	n/a	n/a	\$ 241.69
7	Ther/proph/diag inj, sc/im RHC (specify substance or drug)			\$ 41.00	\$ 15.38	n/a	\$ 25.73
8	Admin influenza virus vac RHC		Yes	\$ 91.00	n/a	n/a	\$ 27.97
9	Arthrocentesis, aspiration or injection of major joint or bursa			\$ 339.00	\$ 472.20	n/a	\$ 162.90
10	Established patient, periodic comprehensive preventive med (age 40-64 years)		Yes	\$ 371.00	n/a	\$ 168.82	\$ 238.01
11	Subsequent Nursing Fac. Care, per day	Yes		\$ 211.00	\$ 70.73	n/a	n/a
12	Imm. Admin. Single or Combination vaccine/toxoid each add'l		Yes	\$ 52.00	n/a	n/a	\$ 38.66
13	New Patient, office or other outpatient, Level III	Yes		\$ 318.00	\$ 280.18	\$ 174.56	\$ 196.09
14	New Patient, office or other outpatient, Level II	Yes		\$ 207.00	\$ 248.70	\$ 174.56	\$ 119.92
15	New Patient, office or other outpatient, Level V	Yes		\$ 602.00	n/a	\$ 174.56	\$ 278.27
16	Subsequent Nursing Fac. Care, per day	Yes		\$ 114.00	\$ 37.91	n/a	\$ 114.00
17	Tdap Vaccine IM Adacel (age 7 and up)		Yes	\$ 105.00	n/a	n/a	\$ 53.32
18	Ceftriaxone sodium injection RHC			\$ 288.00	\$ 139.00	n/a	\$ 49.34
19	Annual Wellness Visit w/ Subsq Visit RCH		Yes	\$ 373.00	\$ 268.79	n/a	n/a
20	Established patient, periodic comprehensive preventive medicine, adolescent (age 12 through 17)		Yes	\$ 342.00	n/a	\$ 171.69	\$ 225.53
21	Department of Transportation Physical			\$ 101.00	n/a	n/a	\$ 101.05
22	New Patient, office or other outpatient, Level IV	Yes		\$ 476.00	\$ 315.18	\$ 168.82	\$ 280.45
23	Periodic comprehensive prev medicine re-eval established patient age 65+ yr		Yes	\$ 401.00	n/a	n/a	\$ 243.66
24	Iv Adjuvant Vaccine Im RHC		Yes	\$ 101.00	n/a	n/a	\$ 85.52
25	IIV3 Vacc no prsv 0.5 ml IM		Yes	\$ 36.00	n/a	n/a	\$ 25.41

Footnote 1 - LakeWood Clinic used data from July 1, 2024 to March 31, 2025 to provide gross charge amounts and estimated allowed amounts.

Footnote 2 - LakeWood Clinic plans to increase charges on January 1st, 2026.

Footnote 3 - The above amounts are LakeWood Clinic's good faith effort to comply with Minnesota Statute 62J.812. This statute requires each provider to maintain a list of the services over \$25.00 that correspond with the provider's 25 most frequently billed current procedural terminology (CPT) codes. This list shall include the providers ten (10) most commonly billed evaluation and management codes, and the ten (10) most frequently billed CPT codes for preventative services.

Footnote 4 - LakeWood Clinic's final charge and allowable amount may deviate from the above illustration. We have put for a good faith effort to provide the required disclosure. The disclosure above is not a final charge or allowed amount as historical data was used to develop the above financial figures.

Footnote 5 - If an item is denoted above as "N/A", which stands for not available, there was not enough recent claim activity that was fully adjudicated (paid) to provide a reasonable estimate of the allowed amounts.

Footnote 6 - If you have questions please request help from CeCe Johnson or call 218-634-5501.