

HEALTHCARE SERVICE PRICING

Axis Health System (Axis) provides basic pricing information for services provided across all our clinic locations. The list includes the type of service provided and the corresponding customary charges. These charges are *an estimate* of the maximum amount that may be due to Axis for the service. Your financial responsibility as a patient is dependent on a variety of factors, including insurance coverage (if applicable), the service combination provided, and discounts for self-pay patients who qualify.

If you have health insurance: Please consult with your health insurer to determine your financial responsibility. Understanding your insurance plan coverage will help identify charges that your insurance plan may cover and what charges you may be responsible for. Depending on your plan coverage, the customary charges listed below *may not* reflect the actual amount of your financial responsibility.

If you do not have health insurance: We encourage you to contact our billing team at (970) 335-2342 to discuss payment expectations, options and/or your potential qualification for income-based sliding fee discounts. If you are eligible for the sliding fee discount, the customary charges listed **will not** reflect the actual amount of your financial responsibility.

FEE SCHEDULE

The following are the published fees, which are based on industry standards for ***the type of service provided and the amount of time spent providing these services.***

DUI Level One and Level Two Service Fee	Customary Charge
DUI Intake Evaluation	\$168.00
DUI Assessment Update	\$82.00
DUI Interlock Enhancement Individual Therapy (30mins)	\$75.00
DUI Interlock Enhancement Group	\$30.00
Individual Therapy DUI treatment services	\$164.00
Level Two Group Therapy	\$30.00
Level Two Education book	\$10.00
Therapy Journals	\$5.00

Psychiatric and Behavioral Health Services		Customary Charge
Psych Diagnostic Evaluation- (90791)		\$278.29
Psych Diagnostic Evaluation w/Med services (90792)		\$402.64
E/M – Evaluation, and Management (99212/99213/99214)		\$161.60 \$226.77 \$315.83
Individual Therapy (90832)	30 min. session	\$149.84
Individual Therapy with E/M (90833)	30 min. session	\$116.33
Individual Therapy (90834)	45 min. session	\$178.13
Individual Therapy with E/M (90836)	45 min. session	\$181.78
Individual Therapy (90837)	60 min. session	\$ 181.78
Family/Couple’s Therapy w/o patient (90846)	50 min. session	\$ 200.00
Family/Couple’s Therapy w/patient (90847)	50 min. session	\$ 165.40
Multiple family group Therapy (90849)		\$ 323.53
Group Psychotherapy (90853)		\$69.84
Detox – (Residential addiction program inpatient) (H0010) (Per day rate)		\$380.00
Primary Care Services		Customary Charge
Blood Draw Fee (36415)		\$20.00
Primary Care – an appointment for a new patient Minimal (99202)		\$219.54
Primary Care – an appointment for a new patient Moderate (99203)		\$324.84
Primary Care – an appointment for an established patient Minimal (99212)		\$161.60
Primary Care – an appointment for established patient Moderate (99213)		\$226.77
Primary Care – Annual pediatric exam “Well Child Check” (infants up to one-year-old) (99391)		200.00
Primary Care - Annual pediatric exam “Well Child Check” (ages1-4) (99392)		\$210.00
Primary Care - Annual pediatric exam “Well Child Check” (ages 5-11) (99393)		\$215.00
Primary Care - Annual pediatric exam “Well Child Check” (ages 12-17) (99394)		\$233.00

Acute Treatment Unit (ATU)			
Code	Type of Service	Description of Service	Customary Charge
Bundled			
H0017	Psychiatric Stabilization	Psychiatric stabilization and short-term residential treatment at the ATU bundled rate (per day)	\$1,250
Unbundled**			
0124	Psychiatric Stabilization	ATU Room and Board, per facility fee	\$700
99212	Psychiatric Stabilization	A psychiatric session where one or two conditions are addressed with minimal treatment	\$120
99213	Psychiatric Stabilization	A psychiatric session where three or more conditions are addressed with minimal treatment	\$197
99214	Psychiatric Stabilization	A psychiatric session where three or more conditions are addressed with moderate treatment	\$289
99215	Psychiatric Stabilization	A psychiatric session where three or more conditions are addressed with extensive treatment	\$387
90832	Psychiatric	Brief individual psychotherapy session (16 - 37 minutes)	\$179
90834	Psychiatric	Standard individual psychotherapy session (38 - 53 minutes)	\$239
90837	Psychiatric	Extended individual psychotherapy (longer than 53 minutes)	\$358

*Bundled: A bundled charge means that you will receive one charge that is the overall sum for taking care of your condition rather than being paid for each individual treatment, test, or procedure.

**Unbundled: An unbundled charge required that services are billed separately as they are provided. A separate 'room and board' charge will cover the facility fee associated with your stay.

Credit Balances

- A. Billing Staff will utilize EHR system generated reports to identify patient over payments or "credit" balances.
- B. Patient credit balances less than \$5.00 that have remained on the account for 60 days or longer will be written off as a small balance write-off.

1. Medicaid copays cannot be written off as small balance write off.

Patient Refunds:

- A. Once a refund is determined to be appropriate, the Billing Staff will initiate the refund within 30 days; and
 - 1. Billing Staff are authorized to issue refunds for patient balances less than \$250.
- B. The A/R Lead has the authority to approve a patient refund request up to \$499. Any refunds in excess of that require the following approval:
 - 1. \$501 - \$5000 - Sr. Reimbursement Manager;
 - 2. Greater than \$5000 - Chief Financial Officer.
- C. Once appropriate approvals have been obtained and documented by signing the Refund Approval Worksheet (Exhibit D), the Billing Staff will process the refund in the appropriate EHR system.
- D. Patient refund checks returned to Axis for an insufficient address will be routed to Billing Staff for processing.
 - 1. Billing staff will attempt to contact the patient by phone to get a correct address. If no contact is made, the check is returned to the finance department. The finance department then follows the unclaimed property process they have in place.