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
Outpatient office visits for new* patients, by level of complexity				
LEVEL II	306	71	50	193
LEVEL III	442	108	76	293
LEVEL IV	659	161	114	438
LEVEL V	871	212	150	576
Outpatient office visits for established* patients, by level of complexity				
LEVEL I	141	23	16	61
LEVEL II	223	55	39	146
LEVEL III	358	88	62	234
LEVEL IV	504	124	88	332
LEVEL V	711	174	124	465
Periodic preventive medicine for new* patients, by age				
LESS THAN 1 YR	432	-	75	284
1-4 YRS	450	-	79	296
5-11 YRS	468	-	82	308
12-17 YRS	532	-	92	349
18-39 YRS	516	-	90	338
40-64 YRS	597	-	103	391
65 YRS AND OLDER	645	-	112	423
Periodic preventive medicine for established* patients, by age				
LESS THAN 1 YR	390	-	68	256
1-4 YRS	414	-	72	272
5-11 YRS	413	-	72	271
12-17 YRS	452	-	79	297
18-39 YRS	461	-	80	303
40-64 YRS	496	-	86	325
65 YRS AND OLDER	534	-	92	350
Common lab services				
Lipid panel	43	13	13	17
Comprehensive metabolic panel	34	10	11	13
Metabolic panel total ca	27	8	8	11
Hemoglobin glycosylated A1C	30	10	10	12
Surgical Pathology Exam	280	71	70	164

^{*}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**.