

# COVENANT PULMONARY CRITICAL CARE

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PULMONARY DISEASES • SLEEP MEDICINE • LUNG HEALTH

#### NOTICE:

If a patient has active insurance coverage at the time of service, you are not considered self-pay.

By law, we are required to bill your insurance.

#### **PHYSICIAN VISITS**

SERVICE	BILLING (CPT) CODE	SELF-PAY RATE	PROMPT PAYMENT INCENTIVE
Office Visit - New Patient	99203-99204	\$250.00	\$212.50
Office Visit - Established	99213-99214	\$120.00	\$102.00

<sup>\*\*</sup> Complex visits may be billed at a higher level of service and cost.

### **PROCEDURES & TESTS**

SERVICE	BILLING (CPT) CODE	SELF-PAY RATE	PROMPT PAYMENT INCENTIVE
Breathing Capacity Test (Basic Spirometry)	94010	\$100.75	\$85.64
Overnight Oximetry	94762	\$71.50	\$60.78
Pulmonary Stress Test (6MWT)	94618	\$53.00	\$45.05

## **PULMONARY FUNCTION TEST (PFT)**

SERVICE	BILLING (CPT) CODE	SELF-PAY RATE	PROMPT PAYMENT INCENTIVE
Evaluation of Bronchospasm (Pre-, post- spirometry)	94060	\$150.00	\$127.50
Breathing Capacity Test	94010	\$100.75	\$85.64
Full PFT including Lung Volume w/Plethysmogrophy, DLCO	94060, 94726, 94729	\$300.00	\$255.00

<sup>\*\*</sup> A PFT consists of either (but never both) CPT 94060 or 94010 and one or more of the other CPT codes. The total cost can range: \$100.75-300.00.

### **SLEEP STUDIES**

SERVICE	BILLING (CPT) CODE	SELF-PAY RATE	PROMPT PAYMENT INCENTIVE
Home Sleep Study	95806	\$250.00	\$212.50