

## Costs of Most Common Services - Transparency in Health Care Prices Act

Community health centers offer service to all individuals regardless of insurance status or ability to pay. Patients in households with incomes below 200% of the Federal Poverty Level (FPL) receive discounts on a sliding fee scale. Patients with incomes less than 100% FPL pay a nominal fee.

Below are some of the most common services provided. The costs below represent the cost of services for self-pay patients and do not take into account any coverage from Medicaid, Medicare, or private health insurance. Contact us if you would like help enrolling in health insurance coverage.

Current Procedural Terminology (CPT) Code	Service Description	Self-Pay Costs					
		Income Below 100% FPL	Income 100-125% FPL	Income 125-150% FPL	Income 150-175% FPL	Income 175-200% FPL	Income Above 200% FPL
90832	PSYTX W PT 30 MINUTES	\$ 20.00	\$ 21.00	\$ 22.00	\$ 23.00	\$ 24.00	\$ 110.00
90834	PSYTX W PT 45 MINUTES	\$ 20.00	\$ 21.00	\$ 22.00	\$ 23.00	\$ 24.00	\$ 130.00
90837	PSYTX W PT 60 MINUTES	\$ 20.00	\$ 21.00	\$ 22.00	\$ 23.00	\$ 24.00	\$ 150.00
90839	PSYTX CRISIS INITIAL 60 MIN	\$ 20.00	\$ 21.00	\$ 22.00	\$ 23.00	\$ 24.00	\$ 150.00
90847	FAMILY PSYTX W/PT 50 MIN	\$ 20.00	\$ 21.00	\$ 22.00	\$ 23.00	\$ 24.00	\$ 120.00
96156	H&B ASSESSMENT OR REASSESSMENT	\$ 20.00	\$ 21.00	\$ 22.00	\$ 23.00	\$ 24.00	\$ 52.00
G0470	FQHC BEHAVIORAL HEALTH VISIT	\$185.00	\$185.00	\$ 185.00	\$ 185.00	\$ 185.00	\$ 185.00
90836	PSYTX W PT W E/M 45 MIN	\$ 20.00	\$ 21.00	\$ 22.00	\$ 23.00	\$ 24.00	\$ 100.00
98966	HC PRO PHONE CALL 5-10 MIN	\$ 20.00	\$ 21.00	\$ 22.00	\$ 23.00	\$ 24.00	\$ 32.00
98967	HC PRO PHONE CALL 11-20 MIN	\$ 20.00	\$ 21.00	\$ 22.00	\$ 23.00	\$ 24.00	\$ 52.00
98968	HC PRO PHONE CALL 21-30 MIN	\$ 20.00	\$ 21.00	\$ 22.00	\$ 23.00	\$ 24.00	\$ 108.00
99408	AUDIT/DAST 15-30 MIN	\$ 20.00	\$ 21.00	\$ 22.00	\$ 23.00	\$ 24.00	\$ 52.00
99442	PHONE E/M PHYS/QHP MIN	\$ 20.00	\$ 21.00	\$ 22.00	\$ 23.00	\$ 24.00	\$ 52.00
99443	PHONE E/M PHYS/QHP MIN	\$ 20.00	\$ 21.00	\$ 22.00	\$ 23.00	\$ 24.00	\$ 108.00

We can help you determine whether you qualify for sliding fee scale discounts or if you are eligible for health care coverage to help cover the cost of care.

This document will be updated annually by Billing Supervisor and will be displayed on the Family Health Center of Southern Oklahoma's website at [www.fhcso.org](http://www.fhcso.org).

Please contact 580-371-2343 and/or [cgomez@fhcso.org](mailto:cgomez@fhcso.org) with any questions.