

PATIENT PRICE INFORMATION LIST

ROOM AND BOARD--PER DAY CHARGES 2009

CORONARY PROGRESSIVE CARE UNIT	\$1,144.25
INTENSIVE CARE	\$1,751.25
OPEN HEART ROOM	\$3,500.75
NURSERY	\$575.00
PSYCHIATRIC CARE	\$1,061.50
PRIVATE ROOM-GENERAL CARE	\$575.00
SEMI-PRIVATE ROOM-GENERAL CARE	\$549.75

LABOR AND DELIVERY CHARGES

NORMAL DELIVERY	\$1,057.75
CESEAREAN SECTION	\$1,509.75
AMNIOCENTESIS	\$1,362.25
FETAL MONITOR	\$229.50
LABOR ROOM PER HOUR	\$106.50

EMERGENCY DEPARTMENT CHARGES

LEVEL 1	\$131.50
LEVEL 2	\$218.00
LEVEL 3	\$341.25
LEVEL 4	\$551.25
LEVEL 5	\$854.00
CRITICAL CARE 1ST 30 MINUTES	\$1,063.25
CRITICAL CARE EA ADDT'L 15 MIN	\$489.75

OPERATING ROOM CHARGES

MAJOR CASE	
1 ST HOUR	\$2,550.00
EA ADDT'L 15 MIN	\$322.75
MINOR CASE	
1 ST HOUR	\$1,301.25
EA ADDT'L 15 MIN	\$207.25

PHYSICAL THERAPY CHARGES

THERAPEUTIC EXERCISE PT	\$61.75
MANUAL TECHNIQUES (EA 15 MIN) PT	\$61.75
HOT / COLD PACKS	\$38.25
AMBULATION & GAIT TRAINING	\$53.75
COMPREHENSIVE EVALUATION PT	\$176.75

OCCUPATIONAL THERAPY CHARGES

THERAPEUTIC EXERCISE OT	\$61.75
MANUAL TECHNIQUES (EA 15 MIN) OT	\$57.25

HOME INSTRUCTION OT	\$65.75
THERAPEUTIC ACTIVITIES OT	\$64.75
COMPREHENSIVE EVALUATION OT	\$189.00

PULMONARY THERAPY CHARGES

OXYGEN - PER HOUR	\$7.00
AEROSOL TREATMENT, SUBSEQUENT	\$57.00
AEROSOL TREATMENT / MDI, INITIAL	\$57.00
BIPAP, SUBSEQUENT DAY	\$421.50
MDI, SUBSEQUENT DAY	\$57.00

X-RAY AND RADIOLOGICAL CHARGES

CHEST PA & LATERAL	\$171.75
CHEST PORTABLE	\$171.75
CAD SCREENING MAMMOGRAPHY	\$39.00
MAMMOGRAPHY BILAT SCREENING	\$162.50
LUMBAR SPINE 2 OR 3 VIEWS	\$171.75
CT HEAD W/O CONTRAST	\$748.25
CT ABDOMEN W/ CONTRAST	\$988.25
CT PELVIS W/ CONTRAST	\$988.25
MYOVIEW GATED-MULTI	\$1,573.75
WALL MOTION	\$364.50
EJECTION FRACTION	\$364.50
ACUTE ABDOMINAL SERIES	\$296.00
C-ARM FOR INJECTION PROCEDURE	\$441.25
CT ABDOMEN RENAL CALCULI W/CON	\$748.25
CT THORAX W/CONTRAST	\$988.25
CERVICAL SPINE W/ODONTOID	\$171.75
KNEE, RIGHT, 1 OR 2 VIEWS	\$171.75
KNEE, LEFT, 1 OR 2 VIEWS	\$171.75
CHEST PA	\$171.75
US GALL BLADDER	\$377.75
MR-LUMBAR	\$1,373.50
US EXTENDED PELVIS	\$377.75
CT THORACIC SPINE	\$748.25
SHOULDER, RIGHT	\$171.75
FOOT, LEFT	\$171.75
ANKLE, RIGHT	\$171.75
SHOULDER, LEFT	\$171.75
ABDOMEN KUB	\$171.75
ANKLE, LEFT	\$171.75
C-ARM < 60 MIN	\$312.50

LABORATORY CHARGES

BLOOD DRAWING FEE	#REF!
CREATININE	\$26.50
HEMOGRAM, PLAT CNT, COMP AUT DIF	\$40.00
POTASSIUM SERUM	\$23.75
UREA NITROGEN (BUN)	#REF!

SODIUM SERUM	\$24.75
GLUCOSE	\$20.25
CHLORIDE SERUM	\$23.75
CARBON DIOXIDE	\$25.25
CALCIUM QUANT	\$26.50
MOLECULAR NUCLEIC ACID PROBE	\$20.75
SGPT	\$27.25
PROTHROMBIN TIME	\$20.25
SGOT	\$26.75
LIPID PROFILE	\$65.50
PHOSPHATASE ALKALINE	\$26.75
TSH	#REF!
ALBUMIN-SERUM	\$25.50
BILIRUBIN	\$20.75
TROPONIN, QUANTITATIVE	\$50.75
ACT. PARTIEL THROMBOPLASTIN	\$31.00
URINALYSIS (WITH MICRO)	\$16.50
CULTURE, URINE W/QUANT COLONY CT	\$41.50
HEMOGLOBIN A1C	\$50.00
PTOTEIN TOTAL	\$19.00
THIN PREP CYTOLOGY	\$101.75
SERUM MAGNESIUM	\$29.75
CPK	\$33.50
PHOSPHOROUS	\$24.50
URINALYSIS W/O MICRO	\$11.75

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