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Shoppable ID	N/A Indicator	Billing Code	Description	Location Provided	Gross Charge	Devon Health				Amerigroup	Amerihealth: HMO and PPO	Amerihealth: Medicare	Consumer Health Network: PPO	Correctional Medical Services, In.	Coventry Health Care (FKA CCN and FirstHealth)
						Aetna Health Plan: Better Health	Aetna Health Plan: Commercial	Aetna Health Plan: Medicare	Services (FKA Americare)						
70		76805	Abdominal Ultrasound Of Pregnant Uterus (Greater Or Equal To 14 Weeks 0 Days) Single Or First F	IP/OP	487.00	151.51	194.83	126.02	365.25	162.07	Contact UH	126.02	462.65	389.60	340.90
71		86480	Tuberculosis Test	IP/OP	236.00	73.42	89.68	61.98	177.00	78.54	Contact UH	61.98	224.20	188.80	165.20
72		83735	Blood Test, Magnesium	IP/OP	47.00	14.62	17.86	14.48	35.25	15.64	Contact UH	6.70	44.65	37.60	32.90
73		DRG - 115	Extraocular Procedures Except Orbit	IP	N/A	N/A	25321.88	28721.18	N/A	N/A	17942.88	28721.18	N/A	N/A	N/A
74		DRG - 117	Intraocular Procedures Without Complications	IP	N/A	N/A	16548.98	22382.42	N/A	N/A	11726.48	22382.42	N/A	N/A	N/A
75		DRG - 788	Cesarean Section Without Sterilization Without Complications	IP	N/A	N/A	14542.04	20932.33	N/A	N/A	N/A	20932.33	N/A	N/A	N/A
76		DRG - 906	Hand Procedures For Injuries	IP	N/A	N/A	29800.84	31957.40	N/A	N/A	21116.64	31957.40	N/A	N/A	N/A
77		DRG - 482	Hip And Femur Procedures Except Major Joint Without Complications	IP	N/A	N/A	27438.84	30250.76	N/A	N/A	19442.94	30250.76	N/A	N/A	N/A
78		DRG - 494	Lower Extremity And Humerus Procedures Except Hip, Foot And Femur Without Complications	IP	N/A	N/A	31484.41	33173.84	N/A	N/A	22309.60	33173.84	N/A	N/A	N/A
79		DRG - 502	Soft Tissue Procedures Without Complications	IP	N/A	N/A	22911.54	26979.62	N/A	N/A	16234.93	26979.62	N/A	N/A	N/A
80		DRG - 505	Foot Procedures W/O Cc/Mcc	IP	N/A	N/A	29450.79	31704.47	N/A	N/A	20868.59	31704.47	N/A	N/A	N/A
81		DRG - 512	Shoulder, Elbow Or Forearm Procedures, Except Major Joint Procedures Without Complications	IP	N/A	N/A	26778.75	29773.82	N/A	N/A	18975.21	29773.82	N/A	N/A	N/A
82		DRG - 660	Kidney And Ureter Procedures For Non-Neoplasm With Complications	IP	N/A	N/A	23523.29	27421.63	N/A	N/A	16668.42	27421.63	N/A	N/A	N/A
83		DRG - 142	Major Head And Neck Procedures Without Complications	IP	N/A	N/A	28365.64	30920.41	N/A	N/A	20099.66	30920.41	N/A	N/A	N/A
84		DRG - 247	Percutaneous Cardiovascular Procedures With Coronary Artery Stent	IP	N/A	N/A	31829.46	33423.15	N/A	N/A	22554.10	33423.15	N/A	N/A	N/A
85		DRG - 329	Major Small And Large Bowel Procedures With Major Comp	IP	N/A	N/A	77065.79	66108.13	N/A	N/A	54608.20	66108.13	N/A	N/A	N/A
86		DRG - 355	Hernia Procedures Except Inguinal And Femoral Without Complications	IP	N/A	N/A	22874.87	26953.12	N/A	N/A	16208.95	26953.12	N/A	N/A	N/A
87		DRG - 419	Laparoscopic Cholecystectomy Without C.D.E. Without Complications	IP	N/A	N/A	21753.05	26142.56	N/A	N/A	15414.03	26142.56	N/A	N/A	N/A
88		DRG - 479	Biopsies Of Musculoskeletal System And Connective Tissue Without Complications	IP	N/A	N/A	29477.46	31723.74	N/A	N/A	20887.49	31723.74	N/A	N/A	N/A
89		72131	Ct Scan, Lumbar Spine	IP/OP	273.00	84.93	194.83	126.02	204.75	90.85	Contact UH	126.02	259.35	218.40	191.10
90		87491	Infectious Agent Detection, Chlamydia Trachomatis	IP/OP	160.00	49.78	60.80	49.28	120.00	53.25	Contact UH	35.09	152.00	128.00	112.00
91		73700	Ct Scan, Lower Extremities	IP/OP	273.00	84.93	194.83	126.02	204.75	90.85	Contact UH	126.02	259.35	218.40	191.10
92		73630	X-Ray, Foot	IP/OP	586.00	182.30	158.36	102.43	439.50	195.02	Contact UH	102.43	556.70	468.80	410.20
93		73560	X-Ray, Knee	IP/OP	608.00	189.15	158.36	102.43	456.00	202.34	Contact UH	102.43	577.60	486.40	425.60
94		72190	X-Ray, Pelvis, 3 Views	IP/OP	239.00	74.35	194.83	126.02	179.25	79.54	Contact UH	126.02	227.05	191.20	167.30
95		92557	Comprehensive Audiometry Threshold Evaluation And Speech Recognition	IP/OP	892.00	277.50	265.09	171.47	669.00	296.86	Contact UH	171.47	847.40	713.60	624.40
96		76512	Ophthalmic Ultrasound, Diagnostic, B-Scan With And Without Quant. A	IP/OP	487.00	151.51	194.83	126.02	365.25	162.07	Contact UH	126.02	462.65	389.60	340.90
97		70355	X-Ray, Jaws, Panoramic	IP/OP	308.00	95.82	158.36	102.43	231.00	102.50	Contact UH	102.43	292.60	246.40	215.60
98		96415	Chemotherapy Administration, Intravenous Infusion Technique	IP/OP	198.00	61.60	122.98	79.55	148.50	65.89	Contact UH	79.55	188.10	158.40	138.60
99		96367	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis; Additional Sequential Infusion Of A N	IP/OP	198.00	61.60	122.98	79.55	148.50	65.89	Contact UH	79.55	188.10	158.40	138.60
100		70498	Ct Scan, Neck	IP/OP	2389.00	743.22	328.73	735.81	1791.75	795.06	Contact UH	212.63	2269.55	1911.20	1672.30
101		76376	3D Rendering With Interpretation And Post Process Supervision	IP/OP	273.00	84.93	103.74	84.08	204.75	90.85	Contact UH	N/A	259.35	218.40	191.10
102		92567	Tympanometry	OP	202.00	62.84	61.90	40.04	151.50	67.23	Contact UH	40.04	191.90	161.60	141.40
103		92235	Fluorescein Angiography	OP	931.00	289.63	510.49	286.75	698.25	309.84	Contact UH	330.20	884.45	744.80	651.70
104		76815	Abdominal Ultrasound Of Pregnant Uterus	IP/OP	416.00	129.42	194.83	126.02	312.00	138.44	Contact UH	126.02	395.20	332.80	291.20
105		96368	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis; Concurrent Infusion	IP/OP	140.00	43.55	53.20	43.12	105.00	46.59	Contact UH	N/A	133.00	112.00	98.00
106		90472	Immunization Administration	IP/OP	137.00	42.62	52.06	42.20	102.75	45.59	Contact UH	N/A	130.15	109.60	95.90
107		92603	Diagnostic Analysis Of Cochlear Implant, Age 7 Years Or Older; With Programming	OP	821.00	255.41	265.09	171.47	615.75	273.23	Contact UH	171.47	779.95	658.80	574.70
108		92250	Fundus Photography With Interpretation And Report	OP	388.00	120.71	211.65	136.90	291.00	129.13	Contact UH	136.90	368.60	310.40	271.60
109		96523	Irrigation Of Implanted Venous Access Device	IP/OP	239.00	74.35	104.77	73.61	179.25	79.54	Contact UH	67.77	227.05	191.20	167.30
110		90746	Hepatitis B Vaccine (Hepb), Adult Dosage, 3 Dose Schedule, For Intramuscular Use	IP/OP	453.00	140.93	172.14	70.38	339.75	150.76	Contact UH	70.38	430.35	362.40	317.10
111		89051	Cell Count, Miscellaneous Body Fluids	IP/OP	42.00	13.07	15.96	12.94	31.50	13.98	Contact UH	5.60	39.90	33.60	29.40
112		73590	X-Ray, Lower Leg	IP/OP	586.00	182.30	158.36	102.43	439.50	195.02	Contact UH	102.43	556.70	468.80	410.20
113		72170	X-Ray, Pelvis, 1-2 Views	IP/OP	246.00	76.53	194.83	126.02	184.50	81.87	Contact UH	126.02	233.70	196.80	172.20
114		73070	X-Ray, Elbow	IP/OP	586.00	182.30	158.36	102.43	439.50	195.02	Contact UH	102.43	556.70	468.80	410.20
115		72125	Ct Scan, Neck Spine Without Contrast	IP/OP	1278.00	397.59	194.83	126.02	958.50	425.32	Contact UH	126.02	1214.10	1022.40	894.60
116		73030	X-Ray, Shoulder	IP/OP	586.00	182.30	158.36	180.49	439.50	195.02	Contact UH	102.43	556.70	468.80	410.20
117		73060	X-Ray, Humerus	IP/OP	586.00	182.30	158.36	102.43	439.50	195.02	Contact UH	102.43	556.70	468.80	410.20
118		72100	X-Ray, Lumbar Spine, 2-3 Views	IP/OP	451.00	140.31	194.83	126.02	338.25	150.09	Contact UH	126.02	428.45	360.80	315.70
119		73120	Hepatitis B Surface Antibody (Hbsab)	IP/OP	336.00	104.53	194.83	126.02	252.00	111.82	Contact UH	126.02	319.20	268.80	235.20
120		73610	X-Ray, Ankle	IP/OP	229.00	71.24	158.36	102.43	171.75	76.21	Contact UH	102.43	217.55	183.20	160.30
121		73110	X-Ray, Wrist	IP/OP	347.00	107.95	158.36	102.43	260.25	115.48	Contact UH	102.43	329.65	277.60	242.90
122		73090	X-Ray, Forearm	IP/OP	586.00	182.30	158.36	102.43	439.50	195.02	Contact UH	102.43	556.70	468.80	410.20
123		93312	Echocardiography, Transesophageal	IP/OP	2710.00	843.08	917.10	834.68	2032.50	901.89	Contact UH	593.21	2574.50	2168.00	1897.00
124		97140	Manual Therapy Techniques, 1 Or More Regions, Each 15 Minutes	IP/OP	204.00	63.46	77.52	62.83	153.00	67.89	Contact UH	N/A	193.80	163.20	142.80
125		92611	Motion Fluoroscopic Evaluation Of Swallowing Function By Cine Or Video Recording	IP/OP	969.00	301.46	368.22	298.45	726.75	322.48	Contact UH	N/A	920.55	775.20	678.30
126		73562	X-Ray, Knee, 3 Views	IP/OP	246.00	76.53	158.36	102.43	184.50	81.87	Contact UH	102.43	233.70	196.80	172.20
127		96374	Therapeutic, Prophylactic, Or Diagnostic Injection; Intravenous Push, Single Or Initial Substance/Dr	IP/OP	747.00	232.39	376.53	243.55	560.25	248.60	Contact UH	243.55	709.65	597.60	522.90
128		92950	Cardiopulmonary Resuscitation	IP/OP	931.00	289.63	510.49	286.75	698.25	309.84	Contact UH	330.20	884.45	744.80	651.70
129		77386	Intensity Modulated Radiation Therapy Delivery Complex	IP/OP	2316.00	720.51	1043.50	674.97	1737.00	770.76	Contact UH	674.97	2200.20	1852.80	1621.20
130		93990	Duplex Scan Of Hemodialysis Access	IP/OP	2039.00	634.33	194.83	126.02	1529.25	678.58	Contact UH	126.02	1937.05	1631.20	1427.30
131		93926	Duplex Scan Of Lower Extremity Arteries Or Arterial Bypass Grafts; Unilateral Or Limited Study	IP/OP	463.00	144.04	194.83	126.02	347.25	154.09	Contact UH	126.02	439.85	370.40	324.10
132		84703	Blood Test, Human Chorionic Gonadotropin (Hcg)	IP/OP	68.00	21.15	25.84	7.52	51.00	22.63	Contact UH	7.52	64.60	54.40	47.60
133		93978	Duplex Scan Of Aorta, Inferior Vena Cava, Iliac Vasculature, Or Bypass Grafts; Complete Study	IP/OP	728.00	226.48	425.66	275.33	546.00	242.28	Contact UH	275.33	691.60	582.40	508.60
134		93925	Duplex Scan Of Lower Extremity Arteries Or Arterial Bypass Grafts; Complete Bilateral Study	IP/OP	728.00	226.48	425.66	275.33	546.00	242.28	Contact UH	275.33	691.60	582.40	508.60
135		90375	Rabies Immune Globulin (Rig)	IP/OP	1454.00	452.34	518.91	278.24	1090.50	483.89	Contact UH	N/A	1361.30	1163.20	1017.80
136		92587	Distortion Product Evoked Otoacoustic Emissions	IP/OP	990.00	307.99	510.49	304.92	742.50	329.47	Contact UH	330.20	940.50	792.00	693.00
137		92134	Scanning Computerized Ophthalmic Diagnostic Imaging, Posterior Segment; Retina	IP/OP	213.00	66.26	104.77	65.60	159.75	70.89	Contact UH	67.77	202.35	170.40	149.10
138		96411	Chemotherapy Administration; Intravenous, Push Technique, Each Additional Substance/Drug	OP	393.00	122.26	122.98	79.55	294.75	130.79	Contact UH	79.55	373.35	314.40	275.10

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Shoppable		N/A							Devon Health						Coventry Health Care	
ID	Indicator	Billing Code	Description	Location Provided	Gross Charge	Aetna Health Plan: Better Health	Aetna Health Plan: Commercial	Aetna Health Plan: Medicare	Services (FKA Americare)	Amerigroup	Amerihealth: HMO and PPO	Amerihealth: Medicare	Consumer Health Network: PPO	Correctional Medical Services, In.	(FKA CCN and FirstHealth)	
139		82805	Blood Gasses With O2 Saturation	IP/OP	480.00	149.33	182.40	78.77	360.00	159.74	Contact UH	78.77	456.00	384.00	336.00	
140		94664	Demonstration And/Or Evaluation Of Patient Utilization Of An Aerosol Generator, Nebulizer, Metered	IP/OP	765.00	237.99	349.07	225.79	573.75	254.59	Contact UH	225.79	726.75	612.00	535.50	
141		94667	Manipulation Chest Wall	IP/OP	388.00	120.71	211.65	136.90	291.00	129.13	Contact UH	136.90	368.60	310.40	271.60	
142		94660	Continuous Positive Airway Pressure Ventilation (Cpap)	IP/OP	632.00	196.62	349.07	225.79	474.00	210.33	Contact UH	225.79	600.40	505.60	442.40	
143		95816	Electroencephalogram (Eeg)	IP/OP	1007.00	313.28	510.49	330.20	755.25	335.13	Contact UH	330.20	956.65	805.60	704.90	
144		96521	Refilling And Maintenance Of Portable Pump	IP/OP	732.00	227.73	376.53	243.55	549.00	243.61	Contact UH	243.55	695.40	585.60	512.40	
145		97597	Debridement	IP/OP	683.00	212.48	329.16	212.91	512.25	227.30	Contact UH	212.91	648.85	546.40	478.10	
146		90651	Hpv Vaccine	IP/OP	625.00	194.44	237.50	192.50	468.75	208.00	Contact UH	N/A	593.75	500.00	437.50	
147		96413	Chemotherapy Administration, Intravenous Infusion Technique; Up To 1 Hour	IP/OP	1230.00	382.65	606.29	392.17	922.50	409.34	Contact UH	392.17	1168.50	984.00	861.00	
148		92570	Acoustic Immittance Testing	OP	549.00	170.79	265.09	171.47	411.75	182.71	Contact UH	171.47	521.55	439.20	384.30	
149		92133	Scanning Computerized Ophthalmic Diagnostic Imaging, Optic Nerve	OP	213.00	66.26	104.77	67.77	159.75	70.89	Contact UH	67.77	202.35	170.40	149.10	
150		90675	Rabies Vaccine, For Intramuscular Use	IP/OP	983.00	305.81	601.50	302.76	737.25	327.14	Contact UH	N/A	933.85	786.40	688.10	
151		96417	Chemotherapy Administration, Intravenous Infusion Technique	IP/OP	430.00	133.77	122.98	132.44	322.50	143.10	Contact UH	79.55	408.50	344.00	301.00	
152		92083	Visual Field Examination	IP/OP	388.00	120.71	211.65	136.90	291.00	129.13	Contact UH	136.90	368.60	310.40	271.60	
153		92136	Ophthalmic Biometry	OP	427.00	132.84	211.65	136.90	320.25	142.11	Contact UH	136.90	405.65	341.60	298.90	
154		96401	Chemotherapy Administration, Subcutaneous Or Intramuscular; Non-Hormonal Anti-Neoplastic	IP/OP	1772.00	551.27	122.98	79.55	1329.00	589.72	Contact UH	79.55	1683.40	1417.60	1240.40	
155		96402	Chemotherapy Administration, Subcutaneous Or Intramuscular; Hormonal Anti-Neoplastic	OP	300.00	93.33	122.98	79.55	225.00	99.84	Contact UH	79.55	285.00	240.00	210.00	
156		90734	Meningococcal Conjugate Vaccine	IP/OP	535.00	166.44	203.30	164.78	401.25	178.05	Contact UH	N/A	508.25	428.00	374.50	
157		96365	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis; Initial, Up To 1 Hour	IP/OP	747.00	232.39	376.53	230.08	560.25	248.60	Contact UH	243.55	709.65	597.60	522.90	
158		90396	Varicella-Zoster Immune Globulin, Human, For Intramuscular Use	OP	3088.00	960.68	4114.63	2661.47	2316.00	1027.69	Contact UH	N/A	2933.60	2470.40	2161.60	
159		90670	Pneumococcal Conjugate Vaccine, 13 Valent (Pcv13), For Intramuscular Use	IP/OP	586.00	182.30	222.68	257.99	439.50	195.02	Contact UH	N/A	556.70	468.80	410.20	
160		77336	Continuing Medical Physics Consultation	IP/OP	1419.00	441.45	243.12	157.26	1064.25	472.24	Contact UH	157.26	1348.05	1135.20	993.30	
161		92602	Diagnostic Analysis Of Cochlear Implant, Patient Younger Than 7 Yrs Of Age; Subsequent Reprogr	OP	897.00	279.06	265.09	276.28	672.75	298.52	Contact UH	171.47	852.15	717.60	627.90	
162		92025	Computerized Corneal Topography	OP	213.00	66.26	104.77	67.77	159.75	70.89	Contact UH	N/A	202.35	170.40	149.10	
163		93923	Complete Bilateral Noninvasive Physiologic Studies Of Upper Or Lower Extremity Arteries, 3 Or Mon	IP/OP	1441.00	448.30	265.09	171.47	1080.75	479.56	Contact UH	171.47	1368.95	1152.80	1008.70	
164		82948	Glucose Test	IP/OP	42.00	13.07	15.96	12.94	31.50	13.98	Contact UH	5.04	39.90	33.60	29.40	
165		94150	Vital Capacity, Total (Separate Procedure)	IP/OP	549.00	170.79	265.09	171.47	411.75	182.71	Contact UH	171.47	521.55	439.20	384.30	
166		94060	Bronchodilation Responsiveness	IP/OP	636.00	197.86	510.49	195.89	477.00	211.66	Contact UH	330.20	604.20	508.80	445.20	
167		90732	Pneumococcal Polysaccharide Vaccine	IP/OP	120.00	37.33	45.60	133.47	90.00	39.94	Contact UH	133.47	114.00	96.00	84.00	
168		92584	Electrocochleography	OP	904.00	281.23	265.09	171.47	678.00	300.85	Contact UH	171.47	858.80	723.20	632.80	
169		92550	Tympanometry And Reflex Threshold Measurements	OP	549.00	170.79	265.09	171.47	411.75	182.71	Contact UH	171.47	521.55	439.20	384.30	
170		92626	Evaluation Of Auditory Function, First Hour	OP	645.00	200.66	265.09	171.47	483.75	214.66	Contact UH	171.47	612.75	516.00	451.50	
171		92579	Visual Reinforcement Audiometry (Vra)	IP/OP	549.00	170.79	265.09	171.47	411.75	182.71	Contact UH	171.47	521.55	439.20	384.30	
172		92582	Conditioning Play Audiometry	OP	892.00	277.50	265.09	171.47	669.00	296.86	Contact UH	171.47	847.40	713.60	624.40	
173		90686	Influenza Virus Vaccine	IP/OP	81.00	25.20	30.78	21.52	60.75	26.96	Contact UH	N/A	76.95	64.80	56.70	
174		92604	Diagnostic Analysis Of Cochlear Implant, Age 7 Yrs Or Older	OP	587.00	182.62	265.09	171.47	440.25	195.35	Contact UH	171.47	557.65	469.60	410.90	
175		90715	Tetanus, Diphtheria Toxoids And Acellular Pertussis Vaccine (Tdap), 7 Years+	IP/OP	168.00	52.26	63.84	51.74	126.00	55.91	Contact UH	N/A	159.60	134.40	117.60	
176		86901	Blood Typing Rhd	IP/OP	137.00	42.62	61.90	2.99	102.75	45.59	Contact UH	2.99	130.15	109.60	95.90	
177		93922	Limited Bilateral Noninvasive Physiologic Studies Of Upper Or Lower Extremity Arteries	IP/OP	845.00	262.88	211.65	136.90	633.75	281.22	Contact UH	136.90	802.75	676.00	591.50	
178		36415	Routine Venipuncture	IP/OP	58.00	18.04	22.04	8.57	43.50	19.30	Contact UH	8.57	55.10	46.40	40.60	
179		92610	Evaluation Of Oral And Pharyngeal Swallowing Function	IP/OP	251.00	78.09	95.38	77.31	188.25	83.53	Contact UH	N/A	238.45	200.80	175.70	
180		92522	Evaluation Of Speech Sound Production	IP/OP	551.00	171.42	209.38	169.71	413.25	183.37	Contact UH	N/A	523.45	440.80	385.70	
181		93880	Duplex Scan Of Extracranial Arteries; Complete Bilateral Study	IP/OP	918.00	285.59	425.66	275.33	688.50	305.51	Contact UH	275.33	872.10	734.40	642.60	
182		97802	Medical Nutrition Therapy	OP	490.00	152.44	186.20	150.92	367.50	163.07	Contact UH	N/A	465.50	392.00	343.00	
183		86703	Antibody; Hiv-1 And Hiv-2, Single Result	IP/OP	54.00	16.80	20.52	13.71	40.50	17.97	Contact UH	13.71	51.30	43.20	37.80	
184		93970	Duplex Scan Of Extremity Veins; Complete Bilateral Study	IP/OP	2244.00	698.11	425.66	275.33	1683.00	746.80	Contact UH	275.33	2131.80	1795.20	1570.80	
185		96376	Therapeutic, Prophylactic, Or Diagnostic Injection Sequential Intravenous Push Of The Same Subst	IP/OP	205.00	63.78	77.90	63.14	153.75	68.22	Contact UH	N/A	194.75	164.00	143.50	
186		90744	Hepatitis B Vaccine (Hepb), Pediatric/Adolescent Dosage, 3 Dose Schedule	IP/OP	166.00	51.64	63.08	29.90	124.50	55.24	Contact UH	29.90	157.70	132.80	116.20	
187		93971	Duplex Scan Of Extremity Veins; Unilateral Or Limited Study	IP/OP	463.00	144.04	194.83	126.02	347.25	154.09	Contact UH	126.02	439.85	370.40	324.10	
188		90471	Immunization Administration	IP/OP	236.00	73.42	122.98	79.55	177.00	78.54	Contact UH	79.55	224.20	188.80	165.20	
189		90632	Hepatitis A Vaccine (Hepa), Adult Dosage, For Intramuscular Use	IP/OP	217.00	67.51	82.46	70.17	162.75	72.22	Contact UH	70.17	206.15	173.60	151.90	
190		99153	Mod Sedation Services Provided By The Same Physician	OP	253.00	78.71	96.14	77.92	189.75	84.20	Contact UH	N/A	240.35	202.40	177.10	
191		93303	Transthoracic Echocardiography	IP/OP	2710.00	843.08	917.10	593.21	2032.50	901.89	Contact UH	593.21	2574.50	2168.00	1897.00	
192		73552	X-Ray, Femur, 2 Views	IP/OP	269.00	83.69	158.36	102.43	201.75	89.52	Contact UH	102.43	255.55	215.20	188.30	
193		96372	Therapeutic, Prophylactic, Or Diagnostic Injection; Subcutaneous Or Intramuscular	IP/OP	182.00	56.62	122.98	79.55	136.50	60.57	Contact UH	79.55	172.90	145.60	127.40	
194		95851	Range Of Motion Measurements And Report	IP/OP	112.00	34.84	42.56	34.50	84.00	37.27	Contact UH	N/A	106.40	89.60	78.40	
195		77300	Basic Radiation Dosimetry Calculation	IP/OP	639.00	198.79	243.12	196.81	479.25	212.66	Contact UH	157.26	607.05	511.20	447.30	
196		96366	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis, Each Additional Hour	IP/OP	251.00	78.09	77.24	77.31	188.25	83.53	Contact UH	49.96	238.45	200.80	175.70	
197		94761	Noninvasive Ear Or Pulse Oximetry For Oxygen Saturation; Multiple Determinations	IP/OP	371.00	115.42	140.98	114.27	278.25	123.47	Contact UH	N/A	352.45	296.80	259.70	
198		94640	Inhalation Therapy	IP/OP	632.00	196.62	349.07	225.79	474.00	210.33	Contact UH	225.79	600.40	505.60	442.40	
199		77412	Radiation Therapy Delivery	IP/OP	886.00	275.63	479.26	310.00	664.50	294.86	Contact UH	310.00	841.70	708.80	620.20	

Notes:
Inpatient charges are not separately billable and are included in the DRG rate.
The gross charges for the DRG based billing codes are average charge per case.
Discounted prices that are not currently available are noted as T.B.D.
Prices not directly translated on a contract or service group are noted as Contact UH.

Shoppable		N/A					Devon Health										Coventry Health Care	
ID	Indicator	Billing Code	Description	Location Provided	Gross Charge	Aetna Health Plan: Better Health	Aetna Health Plan: Commercial	Aetna Health Plan: Medicare	Services (FKA Americare)	Amerigroup	Amerihealth: HMO and PPO	Amerihealth: Medicare	Consumer Health Network: PPO	Correctional Medical Services, In.	(FKA CCN and FirstHealth)			
208		76705	Ultrasound Of Abdomen, Limited	IP/OP	762.00	237.06	194.83	234.70	571.50	253.59	Contact UH	126.02	723.90	609.60	533.40			
209		95813	Electroencephalogram (Eeg) Extended Monitoring; 61-119 Minutes	IP/OP	795.00	247.32	510.49	244.86	596.25	264.58	Contact UH	330.20	755.25	636.00	556.50			
210		93005	Electrocardiogram	IP/OP	232.00	72.18	104.77	67.77	174.00	77.21	Contact UH	67.77	220.40	185.60	162.40			
211		95819	Electroencephalogram (Eeg)	IP/OP	1007.00	313.28	510.49	330.20	755.25	335.13	Contact UH	330.20	956.65	805.60	704.90			
212		94727	Gas Dilution	IP/OP	549.00	170.79	265.09	169.09	411.75	182.71	Contact UH	171.47	521.55	439.20	384.30			
213		94760	Noninvasive Ear Or Pulse Oximetry For Oxygen Saturation	IP/OP	132.00	41.07	50.16	40.66	99.00	43.93	Contact UH	N/A	125.40	105.60	92.40			
214		94644	Continuous Inhalation Therapy With Aerosol Medication For Acute Airway Obstruction; First Hour	IP/OP	388.00	120.71	211.65	136.90	291.00	129.13	Contact UH	136.90	368.60	310.40	271.60			
215		94645	Continuous Inhalation Therapy With Aerosol Medication For Acute Airway Obstruction; Each Additional Hour	IP/OP	398.00	123.82	151.24	122.58	298.50	132.45	Contact UH	N/A	378.10	318.40	278.60			
216		94003	Ventilation Assist And Management; Hospital Inpatient/Observation, Each Subsequent Day	IP/OP	969.00	301.46	1014.79	656.40	726.75	322.48	Contact UH	656.40	920.55	775.20	678.30			
217		94002	Ventilation Assist And Management; Hospital Inpatient/Observation, Initial Day	IP/OP	1918.00	596.69	1014.79	656.40	1438.50	638.31	Contact UH	656.40	1822.10	1534.40	1342.60			
218		94681	Oxygen Uptake, Expired Gas Analysis	IP/OP	931.00	289.63	510.49	330.20	698.25	309.84	Contact UH	330.20	884.45	744.80	651.70			
219		94010	Spimetry	IP/OP	549.00	170.79	265.09	171.47	411.75	182.71	Contact UH	171.47	521.55	439.20	384.30			
220		93888	Transcranial Doppler Study Of The Intracranial Arteries; Limited Study	IP/OP	862.00	268.17	194.83	126.02	646.50	286.87	Contact UH	126.02	818.90	689.60	603.40			
221		77417	Therapeutic Radiology Port Image(S)	IP/OP	371.00	115.42	140.98	114.27	278.25	123.47	Contact UH	N/A	352.45	296.80	259.70			
222		94729	Diffusing Capacity	IP/OP	371.00	115.42	140.98	114.27	278.25	123.47	Contact UH	N/A	352.45	296.80	259.70			
223		77085	Bone Density Study, Dual-Energy X-Ray Absorptiometry	IP/OP	424.00	131.91	194.83	126.02	318.00	141.11	Contact UH	126.02	402.80	339.20	296.80			
224		77334	Therapy Devices, Design And Construction; Complex	IP/OP	1429.00	444.56	653.88	422.95	1071.75	475.57	Contact UH	422.95	1357.55	1143.20	1000.30			
225		94668	Manipulation Of Chest Wall	IP/OP	239.00	74.35	211.65	136.90	179.25	79.54	Contact UH	136.90	227.05	191.20	167.30			
226		87536	Infectious Agent Detection; Hiv-1, Quant	IP/OP	867.00	269.72	329.46	85.10	650.25	288.54	Contact UH	85.10	823.65	693.60	606.90			
227		95951	Eeg Monitoring, Video Recording	IP/OP	4272.00	1329.02	1623.36	1315.78	3204.00	1421.72	Contact UH	N/A	4058.40	3417.60	2990.40			
228		76642	Ultrasound Of Breast	IP/OP	422.00	131.28	158.36	102.43	316.50	140.44	Contact UH	102.43	400.90	337.60	295.40			
229		96360	Intravenous Infusion, Hydration; Initial, 31 Minutes To 1 Hour	IP/OP	599.00	186.35	376.53	243.55	449.25	199.35	Contact UH	243.55	569.05	479.20	419.30			
230		93458	Catheter Placement In Coronary Artery(S) For Coronary Angiography	IP/OP	13982.00	4349.80	5392.66	3488.14	10486.50	4653.21	Contact UH	3488.14	13282.90	11185.60	9787.40			
231		76770	Ultrasound Of Retroperitoneal, Complete	IP/OP	488.00	151.82	194.83	126.02	366.00	162.41	Contact UH	126.02	463.60	390.40	341.60			
232		93975	Vascular Study	IP/OP	871.00	270.97	425.66	275.33	653.25	289.87	Contact UH	275.33	827.45	696.80	609.70			
233		76536	Ultrasound Of Head And Neck	IP/OP	762.00	237.06	194.83	234.70	571.50	253.59	Contact UH	126.02	723.90	609.60	533.40			
234		76775	Ultrasound Of Retroperitoneal, Limited	IP/OP	488.00	151.82	194.83	126.02	366.00	162.41	Contact UH	126.02	463.60	390.40	341.60			
235		74018	X-Ray, Abdomen	IP/OP	256.00	79.64	158.36	78.85	192.00	85.20	Contact UH	102.43	243.20	204.80	179.20			
236		86900	Blood Typing Abo	IP/OP	250.00	77.78	211.65	2.99	187.50	83.20	Contact UH	2.99	237.50	200.00	175.00			
237		87186	Susceptibility Studies, Antimicrobial Agent	IP/OP	368.00	114.48	139.84	8.65	276.00	122.47	Contact UH	8.65	349.60	294.40	257.60			
238		96375	Therapeutic, Prophylactic, Or Diagnostic Injection; Sequential Intravenous Push Of A New Substance	IP/OP	212.00	65.95	77.24	49.96	159.00	70.55	Contact UH	49.96	201.40	169.60	148.40			
239		86923	Compatibility Test Each Unit; Electronic	IP/OP	455.00	141.55	286.63	185.40	341.25	151.42	Contact UH	185.40	432.25	364.00	318.50			
240		86920	Compatibility Test Each Unit; Immediate Spin Technique	IP/OP	437.00	135.95	286.63	185.40	327.75	145.43	Contact UH	185.40	415.15	349.60	305.90			
241		99152	Mod Sedation Services Provided By The Same Physician	OP	290.00	90.22	110.20	89.32	217.50	96.51	Contact UH	N/A	275.50	232.00	203.00			
242		97161	Physical Therapy Evaluation: Low Complexity 20 Minutes	IP/OP	204.00	63.46	77.52	62.83	153.00	67.89	Contact UH	N/A	193.80	163.20	142.80			
243		71046	C-Reactive Protein;	IP/OP	256.00	79.64	158.36	102.43	192.00	85.20	Contact UH	102.43	243.20	204.80	179.20			
244		87040	Culture, Bacterial, Blood	IP/OP	89.00	27.69	33.82	27.41	66.75	29.62	Contact UH	10.32	84.55	71.20	62.30			
245		97165	Occupational Therapy Evaluation, Low Complexity, 30 Minutes	IP/OP	204.00	63.46	77.52	62.83	153.00	67.89	Contact UH	N/A	193.80	163.20	142.80			
246		97166	Occupational Therapy Evaluation, Mod Complexity 45 Minutes	IP/OP	371.00	115.42	140.98	114.27	278.25	123.47	Contact UH	N/A	352.45	296.80	259.70			
247		73502	X-Ray, Hip, 2-3 Views	IP/OP	269.00	83.69	158.36	102.43	201.75	89.52	Contact UH	102.43	255.55	215.20	188.30			
248		86850	Antibody Screen, Rbc, Each Serum Technique	IP/OP	173.00	53.82	91.40	9.77	129.75	57.57	Contact UH	9.77	164.35	138.40	121.10			
249		72040	X-Ray, Neck, Spine, 2-3 Views	IP/OP	251.00	78.09	158.36	77.31	188.25	83.53	Contact UH	102.43	238.45	200.80	175.70			
250		80307	Drug Tests	IP/OP	94.00	29.24	35.72	28.95	70.50	31.28	Contact UH	62.14	89.30	75.20	65.80			
251		83690	Blood Test, Lipase	IP/OP	57.00	17.73	21.66	6.89	42.75	18.97	Contact UH	6.89	54.15	45.60	39.90			
252		82550	Blood Test, Creatine Kinase (Ck)	IP/OP	47.00	14.62	17.86	6.51	35.25	15.64	Contact UH	6.51	44.65	37.60	32.90			
253		93306	Echocardiography, With Doppler	IP/OP	1949.00	606.33	917.10	593.21	1461.75	648.63	Contact UH	593.21	1851.55	1559.20	1364.30			
254		97018	Application Of A Modality To 1 Or More Areas; Paraffin Bath	OP	112.00	34.84	42.56	34.50	84.00	37.27	Contact UH	N/A	106.40	89.60	78.40			
255		77002	X-Ray, Guidance Of Needle Placement	IP/OP	871.00	270.97	330.98	268.27	653.25	289.87	Contact UH	N/A	827.45	696.80	609.70			
256		96361	Intravenous Infusion, Hydration; Each Additional Hour	IP/OP	307.00	95.51	77.24	49.96	230.25	102.17	Contact UH	49.96	291.65	245.60	214.90			
257		71045	X-Ray, Chest, 1 View	IP/OP	256.00	79.64	158.36	102.43	192.00	85.20	Contact UH	102.43	243.20	204.80	179.20			
258		92526	Therapy Swallowing Dysfunction And/Or Oral Function For Feeding	IP/OP	184.00	57.24	69.92	56.67	138.00	61.24	Contact UH	N/A	174.80	147.20	128.80			
259		97129	Therapeutic Interventions, 15 Minutes	IP/OP	184.00	57.24	69.92	56.67	138.00	61.24	Contact UH	N/A	174.80	147.20	128.80			
260		82248	Bilirubin; Direct	IP/OP	48.00	14.93	18.24	5.02	36.00	15.97	Contact UH	5.02	45.60	38.40	33.60			
261		86706	Hepatitis B Surface Antibody	IP/OP	94.00	29.24	35.72	10.74	70.50	31.28	Contact UH	10.74	89.30	75.20	65.80			
262		83036	Hemoglobin; Glycosylated (A1C)	IP/OP	59.00	18.35	22.42	9.71	44.25	19.64	Contact UH	9.71	56.05	47.20	41.30			
263		97164	Re-Evaluation Of Physical Therapy Established Plan Of Care	IP/OP	204.00	63.46	77.52	62.83	153.00	67.89	Contact UH	N/A	193.80	163.20	142.80			
264		97150	Therapeutic Procedure, Group	IP/OP	204.00	63.46	77.52	62.83	153.00	67.89	Contact UH	N/A	193.80	163.20	142.80			
265		97112	Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes	IP/OP	149.00	46.35	56.62	45.89	111.75	49.59	Contact UH	N/A	141.55	119.20	104.30			
266		97760	Orthotic(S) Management And Training	IP/OP	157.00	48.84	59.66	48.36	117.75	52.25	Contact UH	N/A	149.15	125.60	109.90			
267		93454	Catheter Placement In Coronary Artery(S) For Coronary Angiography	IP/OP	13982.00	4349.80	5392.66	3488.14	10486.50	4653.21	Contact UH	3488.14	13282.90	11185.60	9787.40			
268		84702	Gonadotropin, Chorionic (Hcg); Quantitative	IP/OP	54.00	16.80	20.52	15.05	40.50	17.97	Contact UH	15.05	51.30	43.20	37.80			
269		97163	Physical Therapy Evaluation: High Complexity	IP/OP	728.00	226.48	276.64	224.22	546.00	242.28	Contact UH	N/A	691.60	582.40	509.60			
270		97530	Therapeutic Activities	IP/OP	204.00	63.46												

Notes:
Inpatient charges are not separately billable and are included in the DRG rate.
The gross charges for the DRG based billing codes are average charge per case.
Discounted prices that are not currently available are noted as T.B.D.
Prices not directly translated on a contract or service group are noted as Contact UH.

Shoppable		N/A		Location Provided	Gross Charge	Aetna Health Plan:	Aetna Health Plan:	Aetna Health Plan:	Devon Health	Amerigroup		Amerihealth:	Consumer Health	Correctional Medical	Coventry Health Care	
ID	Indicator	Billing Code	Description			Better Health	Commercial	Medicare	Services (FKA Americare)		PPO	Medicare	Network: PPO	Services, In.	(FKA CCN and FirstHealth)	
277		93350	Echocardiography, Transthoracic	IP/OP	1949.00	606.33	917.10	593.21	1461.75	648.63	Contact UH	593.21	1851.55	1559.20		1364.30
278		97116	Therapeutic Procedure, Gait Training	IP/OP	303.00	94.26	115.14	93.32	227.25	100.84	Contact UH	N/A	287.85	242.40		212.10
279		92523	Evaluation Of Speech Sound Production	IP/OP	551.00	171.42	209.38	169.71	413.25	183.37	Contact UH	N/A	523.45	440.80		385.70
280		83540	Blood Test, Iron	IP/OP	40.00	12.44	15.20	6.47	30.00	13.31	Contact UH	6.47	38.00	32.00		28.00
281		84439	Blood Test, Free T4	IP/OP	81.00	25.20	30.78	9.02	60.75	26.96	Contact UH	9.02	76.95	64.80		56.70
282		82728	Blood Test, Ferritin	IP/OP	119.00	37.02	45.22	36.65	89.25	39.60	Contact UH	13.63	113.05	95.20		83.30
283		93308	Echocardiography, Transthoracic, Follow-Up Or Limited Study	IP/OP	1147.00	356.83	425.66	275.33	860.25	381.72	Contact UH	275.33	1089.65	917.60		802.90
284		86592	Syphilis Test	IP/OP	46.00	14.31	17.48	4.27	34.50	15.31	Contact UH	4.27	43.70	36.80		32.20
285		83605	Blood Test, Lactic Acid	IP/OP	51.00	15.87	19.38	11.57	38.25	16.97	Contact UH	11.57	48.45	40.80		35.70
286		84100	Blood Test, Phosphorus	IP/OP	47.00	14.62	17.86	14.48	35.25	15.64	Contact UH	4.74	44.65	37.60		32.90
287		93017	Cardiovascular Stress Test	IP/OP	1115.00	346.88	510.49	330.20	836.25	371.07	Contact UH	330.20	1059.25	892.00		780.50
288		76856	Ultrasound Of Pelvis	IP/OP	476.00	148.08	194.83	126.02	357.00	158.41	Contact UH	126.02	452.20	380.80		333.20
289		70496	Ct Scan, Head Or Brain	IP/OP	2389.00	743.22	328.73	212.63	1791.75	795.06	Contact UH	212.63	2269.55	1911.20		1672.30
290		74170	Ct Scan, Abdomen With And Without Contrast	IP/OP	4475.00	1392.17	328.73	212.63	3356.25	1489.28	Contact UH	212.63	4251.25	3580.00		3132.50
291		70486	Ct Scan, Maxillofacial Without Contrast	IP/OP	1126.00	350.30	194.83	126.02	844.50	374.73	Contact UH	126.02	1069.70	900.80		788.20
292		71260	Ct Scan, Thorax With Contrast	IP/OP	1545.00	480.65	328.73	212.63	1158.75	514.18	Contact UH	212.63	1467.75	1236.00		1081.50
293		88341	Immunohistochemistry Or Immunocytochemistry, Per Specimen	IP/OP	157.00	48.84	59.66	48.36	117.75	52.25	Contact UH	N/A	149.15	125.60		109.90
294		87077	Culture, Bacterial; Aerobic Isolate	IP/OP	76.00	23.64	28.88	8.08	57.00	25.29	Contact UH	8.08	72.20	60.80		53.20
295		76937	Ultrasound Guided Vascular Access	IP/OP	575.00	178.88	218.50	177.10	431.25	191.36	Contact UH	N/A	546.25	460.00		402.50
296		77001	Fluoroscopic Guidance For Vein Dvc	IP/OP	468.00	145.59	177.84	144.14	351.00	155.75	Contact UH	N/A	444.60	374.40		327.60
297		83615	Lactate Dehydrogenase (Ld), (Ldh)	IP/OP	57.00	17.73	21.66	17.56	42.75	18.97	Contact UH	6.04	54.15	45.60		39.90
298		85652	Sedimentation Rate, Erythrocyte, Automated	IP/OP	24.00	7.47	9.12	7.39	18.00	7.99	Contact UH	2.70	22.80	19.20		16.80
299		82306	Gonadotropin, Chorionic (Hcg), Quantitative	IP/OP	171.00	53.20	64.98	29.60	128.25	56.91	Contact UH	29.60	162.45	136.80		119.70
300		86803	Hepatitis C Antibody	IP/OP	122.00	37.95	46.36	37.58	91.50	40.60	Contact UH	14.27	115.90	97.60		85.40
301		80202	Blood Test, Vancomycin	IP/OP	100.00	31.11	38.00	30.80	75.00	33.28	Contact UH	13.54	95.00	80.00		70.00
302		86704	Hepatitis B Core Antibody (Hbcab); Total	IP/OP	110.00	34.22	41.80	12.05	82.50	36.61	Contact UH	12.05	104.50	88.00		77.00
303		84484	Blood Test, Troponin	IP/OP	79.00	24.58	30.02	12.47	59.25	26.29	Contact UH	12.47	75.05	63.20		55.30
304		84145	Procalcitonin (Pct)	IP/OP	566.00	176.08	215.08	27.22	424.50	188.36	Contact UH	27.22	537.70	452.80		396.20
305		86140	C-Reactive Protein	IP/OP	36.00	11.20	13.68	11.09	27.00	11.98	Contact UH	5.18	34.20	28.80		25.20
306		87340	Infectious Agent Antigen Detection, Hep B	IP/OP	93.00	28.93	35.34	28.64	69.75	30.95	Contact UH	10.33	88.35	74.40		65.10
307		84132	Blood Test, Potassium	IP/OP	27.00	8.40	10.26	8.32	20.25	8.99	Contact UH	4.76	25.65	21.60		18.90
308		88305	Level Iv - Surgical Pathology, Gross And Microscopic Examination	IP/OP	109.00	33.91	91.40	33.57	81.75	36.28	Contact UH	59.12	103.55	87.20		76.30
309		83550	Iron Binding Capacity	IP/OP	28.00	8.71	10.64	8.62	21.00	9.32	Contact UH	8.74	26.60	22.40		19.60
310		87389	Infectious Agent Antigen Detection, With Hiv	IP/OP	102.00	31.73	38.76	24.08	76.50	33.95	Contact UH	24.08	96.90	81.60		71.40
311		84295	Blood Test, Sodium	IP/OP	28.00	8.71	10.64	4.81	21.00	9.32	Contact UH	4.81	26.60	22.40		19.60
312		83880	Blood Test, B-Type Natriuretic Peptide (Bnp)	IP/OP	157.00	48.84	59.66	39.26	117.75	52.25	Contact UH	39.26	149.15	125.60		109.90
313		82570	Blood Test, Creatine Urine	IP/OP	53.00	16.49	20.14	5.18	39.75	17.64	Contact UH	5.18	50.35	42.40		37.10
314		82247	Bilirubin; Total	IP/OP	48.00	14.93	18.24	5.02	36.00	15.97	Contact UH	5.02	45.60	38.40		33.60
315		88185	Flow Cytometry, Cell Surface, Cytoplasmic, Or Nuclear Marker, Technical Component Only	IP/OP	66.00	20.53	25.08	20.33	49.50	21.96	Contact UH	N/A	62.70	52.80		46.20
316		87070	Culture, Bacterial; Any Other Source Except Urine, Blood, Stool Or Aerobic	IP/OP	157.00	48.84	59.66	8.62	117.75	52.25	Contact UH	8.62	149.15	125.60		109.90
317		87205	Smear, Primary Source With Interpretation; Gram Or Giemsa Stain For Bacteria, Fungi, Or Cell Type	IP/OP	41.00	12.76	15.58	4.27	30.75	13.64	Contact UH	4.27	38.95	32.80		28.70
318		85007	Blood Count	IP/OP	21.00	6.53	7.98	3.80	15.75	6.99	Contact UH	3.80	19.95	16.80		14.70
319		87081	Culture, Presumptive, Pathogenic Organisms, Screening Only	IP/OP	86.00	26.75	32.68	6.63	64.50	28.62	Contact UH	6.63	81.70	68.80		60.20
320		74176	Ct Scan, Abdomen And Pelvis Without Contrast	IP/OP	1001.00	311.41	425.66	275.33	750.75	333.13	Contact UH	275.33	950.95	800.80		700.70
321		82435	Blood Test, Chloride	IP/OP	27.00	8.40	10.26	8.32	20.25	8.99	Contact UH	4.60	25.65	21.60		18.90

Stoppable	N/A			Location	First Trenton	Horizon Plan:	Horizon Plan:	Horizon Plan:	Horizon Plan:	Managed Care				Three Rivers Provider	
ID	Indicator	Billing Code	Description	Provided	Gross Charge	Indemnity	Indemnity	Medicare Blue	Managed	Horizon Plan: NJ Health	Horizon Plan: PPO	Incorporated	Multiplan, Inc	QualCare	Network
1		85027	Complete Blood Count, Automated	I/OP	33.00	29.70	12.63	9.90	12.63	N/A	12.63	29.70	26.40	24.75	31.35
2		80053	Blood Test, Comprehensive Group Of Blood Chemicals	I/OP	53.00	47.70	20.29	15.90	20.29	N/A	20.29	47.70	42.40	39.75	50.35
3		80061	Blood Test, Lipids (Cholesterol And Triglycerides)	I/OP	123.00	110.70	47.08	36.90	47.08	N/A	47.08	110.70	98.40	92.25	116.85
4		84153	Psa (Prostate Specific Antigen)	I/OP	161.00	144.90	61.63	48.30	61.63	N/A	61.63	144.90	128.80	120.75	152.95
5		80076	Liver Function Blood Test Panel	I/OP	68.00	61.20	26.03	20.40	26.03	N/A	26.03	61.20	54.40	51.00	64.60
6		70450	Ct Scan, Head Or Brain, Without Contrast	I/OP	2498.00	2248.20	230.24	126.02	230.24	N/A	230.24	2248.20	1998.40	1873.50	2373.10
7		74177	Ct Scan Of Abdomen And Pelvis With Contrast	I/OP	1545.00	1390.50	793.63	434.39	793.63	N/A	793.63	1390.50	1236.00	1158.75	1467.75
8		81001	Manual Urinalysis Test With Examination Using Microscope	I/OP	36.00	32.40	13.78	10.80	13.78	N/A	13.78	32.40	28.80	27.00	34.20
9		76830	Ultrasound Pelvis Through Vagina	I/OP	476.00	428.40	230.24	126.02	230.24	N/A	230.24	428.40	380.80	357.00	452.20
10		62323	Injection Of Substance Into Spinal Canal Of Lower Back Or Sacrum Using Imaging Guidance	I/OP	2381.00	2142.90	1387.97	759.70	1387.97	N/A	1387.97	2142.90	1904.80	1785.75	2261.95
11		85610	Blood Test, Clotting Time	I/OP	43.00	38.70	16.46	12.90	16.46	N/A	16.46	38.70	34.40	32.25	40.85
12		85730	Coagulation Assessment Blood Test	I/OP	51.00	45.90	19.52	15.30	19.52	N/A	19.52	45.90	40.80	38.25	48.45
13		80048	Basic Metabolic Panel	I/OP	65.00	58.50	24.88	19.50	24.88	N/A	24.88	58.50	52.00	48.75	61.75
14		72193	Ct Scan, Pelvis, With Contrast	I/OP	1670.00	1503.00	388.48	212.63	388.48	N/A	388.48	1503.00	1336.00	1252.50	1586.50
15		93452	Insertion Of Catheter Into Left Heart For Diagnosis	OP	13982.00	12583.80	6372.83	3488.14	6372.83	N/A	6372.83	12583.80	11185.60	10486.50	13282.90
16		76700	Ultrasound Of Abdomen	I/OP	488.00	439.20	230.24	126.02	230.24	N/A	230.24	439.20	390.40	366.00	463.60
17		73721	Mri Scan Of Leg Joint	I/OP	1789.00	1610.10	503.03	275.33	503.03	N/A	503.03	1610.10	1431.20	1341.75	1699.55
18		59400	Routine Obstetric Care For Vaginal Delivery, Including Pre-And Post-Delivery Care	I/OP	8062.00	7255.80	3086.13	2418.60	3086.13	N/A	3086.13	7255.80	6449.60	6046.50	7658.90
19		77067	Mammography, Screening, Bilateral	I/OP	487.00	438.30	186.42	146.10	186.42	N/A	186.42	438.30	389.60	365.25	462.85
20		43239	Biopsy Of The Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope	I/OP	2840.00	2556.00	1778.24	973.31	1778.24	N/A	1778.24	2556.00	2272.00	2130.00	2698.00
21		43235	Diagnostic Examination Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope	I/OP	2130.00	1917.00	1778.24	973.31	1778.24	N/A	1778.24	1917.00	1704.00	1597.50	2023.50
22		72110	X-Ray, Lower Back, Minimum Four Views	I/OP	384.00	345.60	230.24	126.02	230.24	N/A	230.24	345.60	307.20	288.00	364.80
23		64483	Injections Of Anesthetic And/Or Steroid Drug Into Lower Or Sacral Spine Nerve Root Using Imaging	I/OP	1159.00	1043.10	1835.68	1004.75	1835.68	N/A	1835.68	1043.10	927.20	869.25	1101.05
24		45385	Removal Of Polyps Or Growths Of Large Bowel Using An Endoscope	I/OP	2840.00	2556.00	2332.70	1276.79	2332.70	N/A	2332.70	2556.00	2272.00	2130.00	2698.00
25		77066	Mammography Of Both Breasts	I/OP	515.00	463.50	197.14	154.50	197.14	N/A	197.14	463.50	412.00	386.25	489.25
26		45380	Biopsy Of Large Bowel Using An Endoscope	OP	2840.00	2556.00	2332.70	1276.79	2332.70	N/A	2332.70	2556.00	2272.00	2130.00	2698.00
27		49505	Repair Of Groin Hernia Patient Age 5 Years Or Older	OP	8560.00	7704.00	7629.70	4176.08	7629.70	N/A	7629.70	7704.00	6848.00	6420.00	8132.00
28		97110	Physical Therapy, Therapeutic Exercise	I/OP	157.00	141.30	60.10	47.10	60.10	N/A	60.10	141.30	125.60	117.75	149.15
29		70553	Mri Scan Of Brain Before And After Contrast	I/OP	9544.00	8589.60	793.63	434.39	793.63	N/A	793.63	8589.60	7635.20	7158.00	9066.80
30		81002	Automated Urinalysis Test	I/OP	22.00	19.80	8.42	6.60	8.42	N/A	8.42	19.80	17.60	16.50	20.90
31		66821	Removal Of Recurring Cataract In Lens Capsule Using Laser	OP	2149.00	1934.10	1143.34	625.80	1143.34	N/A	1143.34	1934.10	1719.20	1611.75	2041.55
32		72148	Mri Scan Of Lower Spinal Canal	I/OP	1376.00	1238.40	503.03	275.33	503.03	N/A	503.03	1238.40	1100.80	1032.00	1307.20
33		90832	Psychotherapy, 30 Min	OP	509.00	458.10	313.86	171.79	313.86	N/A	313.86	458.10	407.20	381.75	483.55
34		55700	Biopsy Of Prostate Gland	OP	6817.00	6135.30	3995.61	2186.98	3995.61	N/A	3995.61	6135.30	5453.60	5112.75	6476.15
35		45391	Ultrasound Examination Of Lower Large Bowel Using An Endoscope	OP	2910.00	2619.00	2332.70	1276.79	2332.70	N/A	2332.70	2619.00	2328.00	2182.50	2764.50
36		77065	Mammography Of One Breast	I/OP	463.00	416.70	177.24	138.90	177.24	N/A	177.24	416.70	370.40	347.25	439.85
37		19120	Removal Of 1 Or More Breast Growth, Open Procedure	OP	12005.00	10804.50	7405.38	4053.30	7405.38	N/A	7405.38	10804.50	9604.00	9003.75	11404.75
38		90834	Psychotherapy, 45 Min	OP	509.00	458.10	313.86	171.79	313.86	N/A	313.86	458.10	407.20	381.75	483.55
39		90837	Psychotherapy, 60 Min	OP	509.00	458.10	313.86	171.79	313.86	N/A	313.86	458.10	407.20	381.75	483.55
40		85025	Complete Blood Cell Count, With Differential White Blood Cells, Automated	I/OP	42.00	37.80	16.08	12.60	16.08	N/A	16.08	37.80	33.60	31.50	39.90
41		84443	Blood Test, Thyroid Stimulating Hormone (Tsh)	I/OP	153.00	137.70	58.57	45.90	58.57	N/A	58.57	137.70	122.40	114.75	145.35
42		90853	Group Psychotherapy	OP	306.00	275.40	163.39	89.43	163.39	N/A	163.39	275.40	244.80	229.50	290.70
43		45378	Diagnostic Examination Of Large Bowel Using An Endoscope	I/OP	2840.00	2556.00	1790.15	979.83	1790.15	N/A	1790.15	2556.00	2272.00	2130.00	2698.00
44	N/A	90846	Family Psychotherapy, Not Including Patient, 50 Min	OP	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
45	N/A	90847	Family Psychotherapy, Including Patient, 50 Min	OP	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
46	N/A	99203	New Patient Office Or Other Outpatient Visit, Typically 30 Min	OP	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
47	N/A	99204	New Patient Office Of Other Outpatient Visit, Typically 45 Min	OP	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
48	N/A	99205	New Patient Office Of Other Outpatient Visit, Typically 60 Min	OP	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
49	N/A	99243	Patient Office Consultation, Typically 40 Min	OP	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
50	N/A	42820	Removal Of Tonsils And Adenoid Glands Patient Younger Than Age 12	OP	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
51	N/A	47562	Removal Of Gallbladder Using An Endoscope	OP	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
52	N/A	55866	Surgical Removal Of Prostate And Surrounding Lymph Nodes Using An Endoscope	OP	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
53	N/A	59510	Routine Obstetric Care For Cesarean Delivery, Including Pre-And Post-Delivery Care	I/OP	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
54	N/A	59610	Routine Obstetric Care For Vaginal Delivery After Prior Cesarean Delivery Including Pre-And Post-D	I/OP	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
55	N/A	66984	Removal Of Cataract With Insertion Of Lens	OP	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
56	DRG - 460		Spinal Fusion Except Cervical Without Major Comorbid Conditions Or Complications (Mcc)	IP	N/A	N/A	147150.73	55782.82	64947.23	39871.84	68778.81	N/A	N/A	Contact UH	N/A
57	DRG - 470		Major Joint Replacement Or Reattachment Of Lower Extremity Without Major Comorbid Conditions (C	IP	N/A	N/A	72520.25	33452.06	32007.92	19650.03	33896.24	N/A	N/A	Contact UH	N/A
58	DRG - 473		Cervical Spinal Fusion Without Comorbid Conditions (Cc) Or Major Comorbid Conditions Or Complic I	IP	N/A	N/A	86482.71	404957.87	38170.47	23433.28	40422.35	N/A	N/A	Contact UH	N/A
59	DRG - 743		Uterine And Adnexa Procedures For Non-Malignancy Without Comorbid Conditions (Cc) Or Major Cx I	IP	N/A	N/A	40659.16	24523.85	17945.54	11016.97	19004.25	N/A	N/A	Contact UH	N/A
60	N/A	29826	Shaving Of Shoulder Bone Using An Endoscope	OP	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
61	N/A	29881	Removal Of One Knee Cartilage Using An Endoscope	OP	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
62	N/A	99244	Patient Office Consultation, Typically 60 Min	OP	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
63	N/A	99385	Initial New Patient Preventive Medicine Evaluation (18-39 Years)	OP	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
64	N/A	99386	Initial New Patient Preventive Medicine Evaluation (40-64 Years)	OP	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
65	N/A	80055	Obstetric Blood Test Panel	OP	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
66	N/A	80069	Kidney Function Panel Test	OP	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
67	DRG - 216		Cardiac Valve And Other Major Cardiothoracic Procedures With Cardiac Catheterization With Major	IP	N/A	N/A	357932.52	127756.50	157979.00	96985.10	167299.03	N/A	N/A	78485.00	N/A
68	N/A	93000	Electrocardiogram, Routine, With Interpretation And Report	OP	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
69	N/A	95810	Sleep Study	OP	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

Notes:
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The gross charges for the DRG based billing codes are average charge per case.
Discounted prices that are not currently available are noted as T.B.D.
Prices not directly translated on a contract or service group are noted as Contact UH.

Shoppable	N/A			Location		First Trenton	Horizon Plan:	Horizon Plan:	Horizon Plan:		Managed Care		Three Rivers Provider		
ID	Indicator	Billing Code	Description	Provided	Gross Charge	Indemnity	Indemnity	Medicare Blue	Managed	Horizon Plan: NJ Health	Horizon Plan: PPO	Incorporated	Multiplan, Inc	QualCare	Network
70		76805	Abdominal Ultrasound Of Pregnant Uterus (Greater Or Equal To 14 Weeks 0 Days) Single Or First F	IP/OP	487.00	438.30	230.24	126.02	230.24	N/A	230.24	438.30	389.60	365.25	462.65
71		86480	Tuberculosis Test	IP/OP	236.00	212.40	90.34	70.80	90.34	N/A	90.34	212.40	188.80	177.00	224.20
72		83735	Blood Test, Magnesium	IP/OP	47.00	42.30	17.99	14.10	17.99	N/A	17.99	42.30	37.60	35.25	44.65
73	DRG - 115		Extraocular Procedures Except Orbit	IP	N/A	N/A	49643.10	28721.18	21910.74	13451.25	23203.37	N/A	N/A	Contact UH	N/A
74	DRG - 117		Intraocular Procedures Without Complications	IP	N/A	N/A	36537.12	22382.42	16126.22	9900.07	17077.59	N/A	N/A	Contact UH	N/A
75	DRG - 788		Cesarean Section Without Sterilization Without Complications	IP	N/A	N/A	32826.91	20932.33	14488.66	6969.05	15343.42	N/A	N/A	Contact UH	N/A
76	DRG - 906		Hand Procedures For Injuries	IP	N/A	N/A	67177.27	31957.40	29649.72	18202.30	31398.91	N/A	N/A	Contact UH	N/A
77	DRG - 482		Hipand Femur Procedures Except Major Joint Without Complications	IP	N/A	N/A	60664.37	30250.76	26775.15	16437.57	28354.76	N/A	N/A	Contact UH	N/A
78	DRG - 494		Lower Extremity And Humerus Procedures Except Hip, Foot And Femur Without Complications	IP	N/A	N/A	63922.64	33173.84	28213.24	17320.43	29877.69	N/A	N/A	Contact UH	N/A
79	DRG - 502		Soft Tissue Procedures Without Complications	IP	N/A	N/A	47055.43	26979.62	20768.63	12750.10	21993.89	N/A	N/A	Contact UH	N/A
80	DRG - 505		Foot Procedures W/O Co/Mcc	IP	N/A	N/A	57577.39	31704.47	25412.66	15601.12	26911.89	N/A	N/A	Contact UH	N/A
81	DRG - 512		Shoulder, Elbow Or Forearm Procedures, Except Major Joint Procedures Without Complications	IP	N/A	N/A	55474.46	29773.82	24484.50	15031.31	25928.97	N/A	N/A	Contact UH	N/A
82	DRG - 660		Kidney And Ureter Procedures For Non-Neoplasm With Complications	IP	N/A	N/A	52759.23	27421.63	23286.09	14295.60	24659.87	N/A	N/A	Contact UH	N/A
83	DRG - 142		Major Head And Neck Procedures Without Complications	IP	N/A	N/A	N/A	30920.41	N/A	N/A	N/A	N/A	N/A	Contact UH	N/A
84	DRG - 247		Percutaneous Cardiovascular Procedures With Coronary Artery Stent	IP	N/A	N/A	75701.99	33423.15	33412.23	20512.15	35383.40	N/A	N/A	31313.00	N/A
85	DRG - 329		Major Small And Large Bowel Procedures With Major Comp	IP	N/A	N/A	181963.94	66108.13	80312.57	49304.80	85050.64	N/A	N/A	Contact UH	N/A
86	DRG - 355		Hernia Procedures Except Inguinal And Femoral Without Complications	IP	N/A	N/A	49377.04	26953.12	21793.31	13379.16	23079.02	N/A	N/A	Contact UH	N/A
87	DRG - 419		Laparoscopic Cholecystectomy Without C.D.E. Without Complications	IP	N/A	N/A	47532.87	26142.56	20979.36	12879.47	22217.05	N/A	N/A	Contact UH	N/A
88	DRG - 479		Biopsies Of Musculoskeletal System And Connective Tissue Without Complications	IP	N/A	N/A	65529.91	31723.74	28922.63	17755.93	30628.93	N/A	N/A	Contact UH	N/A
89	72131		Ct Scan, Lumbar Spine	IP/OP	273.00	245.70	230.24	126.02	230.24	N/A	230.24	245.70	218.40	204.75	259.35
90	87491		Infectious Agent Detection, Chlamydia Trachomatis	IP/OP	160.00	144.00	61.25	48.00	61.25	N/A	61.25	144.00	128.00	120.00	152.00
91	73700		Ct Scan, Lower Extremities	IP/OP	273.00	245.70	230.24	126.02	230.24	N/A	230.24	245.70	218.40	204.75	259.35
92	73630		X-Ray, Foot	IP/OP	586.00	527.40	187.14	102.43	187.14	N/A	187.14	527.40	468.80	439.50	556.70
93	73560		X-Ray, Knee	IP/OP	608.00	547.20	187.14	102.43	187.14	N/A	187.14	547.20	486.40	456.00	577.60
94	72190		X-Ray, Pelvis, 3 Views	IP/OP	239.00	215.10	230.24	126.02	230.24	N/A	230.24	215.10	191.20	179.25	227.05
95	92557		Comprehensive Audiometry Threshold Evaluation And Speech Recognition	IP/OP	892.00	802.80	313.28	171.47	313.28	802.80	313.28	802.80	713.60	669.00	847.40
96	76512		Ophthalmic Ultrasound, Diagnostic, B-Scan With And Without Quant. A	IP/OP	487.00	438.30	230.24	126.02	230.24	N/A	230.24	438.30	389.60	365.25	462.65
97	70355		X-Ray, Jaws, Panoramic	IP/OP	308.00	277.20	187.14	102.43	187.14	N/A	187.14	277.20	246.40	231.00	292.60
98	96415		Chemotherapy Administration, Intravenous Infusion Technique	IP/OP	198.00	178.20	145.34	79.55	145.34	N/A	145.34	178.20	158.40	148.50	188.10
99	96367		Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis; Additional Sequential Infusion Of A N	IP/OP	198.00	178.20	145.34	79.55	145.34	N/A	145.34	178.20	158.40	148.50	188.10
100	70498		Ct Scan, Neck	IP/OP	2389.00	2150.10	388.48	212.63	388.48	N/A	388.48	2150.10	1911.20	1791.75	2269.55
101	76376		3D Rendering With Interpretation And Post Process Supervision	IP/OP	273.00	245.70	104.50	81.90	104.50	N/A	104.50	245.70	218.40	204.75	259.35
102	92567		Tympanometry	OP	202.00	181.80	73.15	40.04	73.15	N/A	73.15	181.80	161.60	151.50	191.90
103	92235		Fluorescein Angiography	OP	931.00	837.90	603.28	330.20	603.28	N/A	603.28	837.90	744.80	698.25	884.45
104	76815		Abdominal Ultrasound Of Pregnant Uterus	IP/OP	416.00	374.40	230.24	126.02	230.24	N/A	230.24	374.40	332.80	312.00	395.20
105	96368		Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis; Concurrent Infusion	IP/OP	140.00	126.00	53.59	42.00	53.59	N/A	53.59	126.00	112.00	105.00	133.00
106	90472		Immunization Administration	IP/OP	137.00	123.30	52.44	41.10	52.44	N/A	52.44	123.30	109.60	102.75	130.15
107	92603		Diagnostic Analysis Of Cochlear Implant, Age 7 Years Or Older; With Programming	OP	821.00	738.90	313.28	171.47	313.28	N/A	313.28	738.90	656.80	615.75	779.95
108	92250		Fundus Photography With Interpretation And Report	OP	388.00	349.20	250.12	136.90	250.12	N/A	250.12	349.20	310.40	291.00	368.60
109	96523		Irrigation Of Implanted Venous Access Device	IP/OP	239.00	215.10	123.82	67.77	123.82	N/A	123.82	215.10	191.20	179.25	227.05
110	90746		Hepatitis B Vaccine (Hepb), Adult Dosage, 3 Dose Schedule, For Intramuscular Use	IP/OP	453.00	407.70	173.41	135.90	173.41	N/A	173.41	407.70	362.40	339.75	430.35
111	89051		Cell Count, Miscellaneous Body Fluids	IP/OP	42.00	37.80	16.08	12.60	16.08	N/A	16.08	37.80	33.60	31.50	39.90
112	73590		X-Ray, Lower Leg	IP/OP	586.00	527.40	187.14	102.43	187.14	N/A	187.14	527.40	468.80	439.50	556.70
113	72170		X-Ray, Pelvis, 1-2 Views	IP/OP	246.00	221.40	230.24	126.02	230.24	N/A	230.24	221.40	196.80	184.50	233.70
114	73070		X-Ray, Elbow	IP/OP	586.00	527.40	187.14	102.43	187.14	N/A	187.14	527.40	468.80	439.50	556.70
115	72125		Ct Scan, Neck Spine Without Contrast	IP/OP	1278.00	1150.20	230.24	126.02	230.24	N/A	230.24	1150.20	1022.40	958.50	1214.10
116	73030		X-Ray, Shoulder	IP/OP	586.00	527.40	187.14	102.43	187.14	N/A	187.14	527.40	468.80	439.50	556.70
117	73060		X-Ray, Humerus	IP/OP	586.00	527.40	187.14	102.43	187.14	N/A	187.14	527.40	468.80	439.50	556.70
118	72100		X-Ray, Lumbar Spine, 2-3 Views	IP/OP	451.00	405.90	230.24	126.02	230.24	N/A	230.24	405.90	360.80	338.25	428.45
119	73120		Hepatitis B Surface Antibody (Hbsab)	IP/OP	336.00	302.40	230.24	126.02	230.24	N/A	230.24	302.40	268.80	252.00	319.20
120	73610		X-Ray, Ankle	IP/OP	229.00	206.10	187.14	102.43	187.14	N/A	187.14	206.10	183.20	171.75	217.55
121	73110		X-Ray, Wrist	IP/OP	347.00	312.30	187.14	102.43	187.14	N/A	187.14	312.30	277.60	260.25	329.65
122	73090		X-Ray, Forearm	IP/OP	586.00	527.40	187.14	102.43	187.14	N/A	187.14	527.40	468.80	439.50	556.70
123	93312		Echocardiography, Transesophageal	IP/OP	2710.00	2439.00	1083.79	593.21	1083.79	N/A	1083.79	2439.00	2168.00	2032.50	2574.50
124	97140		Manual Therapy Techniques, 1 Or More Regions, Each 15 Minutes	IP/OP	204.00	183.60	78.09	61.20	78.09	N/A	78.09	183.60	163.20	153.00	193.80
125	92611		Motion Fluoroscopic Evaluation Of Swallowing Function By Cine Or Video Recording	IP/OP	969.00	872.10	370.93	290.70	370.93	N/A	370.93	872.10	775.20	726.75	920.55
126	73562		X-Ray, Knee, 3 Views	IP/OP	246.00	221.40	187.14	102.43	187.14	N/A	187.14	221.40	196.80	184.50	233.70
127	96374		Therapeutic, Prophylactic, Or Diagnostic Injection; Intravenous Push, Single Or Initial Substance/Dr	IP/OP	747.00	672.30	444.97	243.55	444.97	N/A	444.97	672.30	597.60	560.25	709.65
128	92950		Cardiopulmonary Resuscitation	IP/OP	931.00	837.90	603.28	330.20	603.28	N/A	603.28	837.90	744.80	698.25	884.45
129	77386		Intensity Modulated Radiation Therapy Delivery Complex	IP/OP	2316.00	2084.40	1233.17	674.97	1233.17	N/A	1233.17	2084.40	1852.80	1737.00	2200.20
130	93990		Duplex Scan Of Hemodialysis Access	IP/OP	2039.00	1835.10	230.24	126.02	230.24	N/A	230.24	1835.10	1631.20	1529.25	1937.05
131	93926		Duplex Scan Of Lower Extremity Arteries Or Arterial Bypass Grafts; Unilateral Or Limited Study	IP/OP	463.00	416.70	230.24	126.02	230.24	N/A	230.24	416.70	370.40	347.25	439.85
132	84703		Blood Test, Human Chorionic Gonadotropin (Hcg)	IP/OP	68.00	61.20	26.03	20.40	26.03	N/A	26.03	61.20	54.40	51.00	64.60
133	93978		Duplex Scan Of Aorta, Inferior Vena Cava, Iliac Vasculature, Or Bypass Grafts; Complete Study	IP/OP	728.00	655.20	503.03	275.33	503.03	N/A	503.03	655.20	582.40	546.00	691.60
134	93925		Duplex Scan Of Lower Extremity Arteries Or Arterial Bypass Grafts; Complete Bilateral Study	IP/OP	728.00	655.20	503.03	275.33	503.03	N/A	503.03	655.20	582.40	546.00	

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Shoppable ID	N/A Indicator	Billing Code	Description	Location Provided	Gross Charge	First Trenton Indemnity	Horizon Plan: Indemnity	Horizon Plan: Medicare Blue	Horizon Plan: Managed	Horizon Plan: NJ Health	Horizon Plan: PPO	Managed Care Incorporated	Multiplan, Inc	QualCare	Three Rivers Provider Network
139		82805	Blood Gasses With O2 Saturation	IP/OP	480.00	432.00	183.74	144.00	183.74	N/A	183.74	432.00	384.00	360.00	456.00
140		94664	Demonstration And/Or Evaluation Of Patient Utilization Of An Aerosol Generator, Nebulizer, Metered	IP/OP	765.00	688.50	412.52	225.79	412.52	N/A	412.52	688.50	612.00	573.75	726.75
141		94667	Manipulation Chest Wall	IP/OP	388.00	349.20	250.12	136.90	250.12	N/A	250.12	349.20	310.40	291.00	368.60
142		94660	Continuous Positive Airway Pressure Ventilation (Cpap)	IP/OP	632.00	568.80	412.52	225.79	412.52	N/A	412.52	568.80	505.60	474.00	600.40
143		95816	Electroencephalogram (Eeg)	IP/OP	1007.00	906.30	603.28	330.20	603.28	N/A	603.28	906.30	805.60	755.25	956.65
144		96521	Refilling And Maintenance Of Portable Pump	IP/OP	732.00	658.80	444.97	243.55	444.97	N/A	444.97	658.80	585.60	549.00	695.40
145		97597	Debridement	IP/OP	683.00	614.70	388.99	212.91	388.99	N/A	388.99	614.70	546.40	512.25	648.85
146		90651	Hpv Vaccine	IP/OP	625.00	562.50	239.25	187.50	239.25	N/A	239.25	562.50	500.00	468.75	593.75
147		96413	Chemotherapy Administration, Intravenous Infusion Technique; Up To 1 Hour	IP/OP	1230.00	1107.00	716.49	392.17	716.49	N/A	716.49	1107.00	984.00	922.50	1168.50
148		92570	Acoustic Immittance Testing	OP	549.00	494.10	313.28	171.47	313.28	N/A	313.28	494.10	439.20	411.75	521.55
149		92133	Scanning Computerized Ophthalmic Diagnostic Imaging, Optic Nerve	OP	213.00	191.70	123.82	67.77	123.82	N/A	123.82	191.70	170.40	159.75	202.35
150		90675	Rabies Vaccine, For Intramuscular Use	IP/OP	983.00	884.70	710.83	389.07	710.83	N/A	710.83	884.70	786.40	737.25	933.85
151		96417	Chemotherapy Administration, Intravenous Infusion Technique	IP/OP	430.00	387.00	145.34	79.55	145.34	N/A	145.34	387.00	344.00	322.50	408.50
152		92083	Visual Field Examination	IP/OP	388.00	349.20	250.12	136.90	250.12	N/A	250.12	349.20	310.40	291.00	368.60
153		92136	Ophthalmic Biometry	OP	427.00	384.30	250.12	136.90	250.12	N/A	250.12	384.30	341.60	320.25	405.65
154		96401	Chemotherapy Administration, Subcutaneous Or Intramuscular; Non-Hormonal Anti-Neoplastic	IP/OP	1772.00	1594.80	145.34	79.55	145.34	N/A	145.34	1594.80	1417.60	1329.00	1683.40
155		96402	Chemotherapy Administration, Subcutaneous Or Intramuscular; Hormonal Anti-Neoplastic	OP	300.00	270.00	145.34	79.55	145.34	N/A	145.34	270.00	240.00	225.00	285.00
156		90734	Meningococcal Conjugate Vaccine	IP/OP	535.00	481.50	204.80	160.50	204.80	N/A	204.80	481.50	428.00	401.25	508.25
157		96365	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis; Initial, Up To 1 Hour	IP/OP	747.00	672.30	444.97	243.55	444.97	N/A	444.97	672.30	597.60	560.25	709.65
158		90396	Varicella-Zoster Immune Globulin, Human, For Intramuscular Use	OP	3088.00	2779.20	4862.51	2661.47	4862.51	N/A	4862.51	2779.20	2470.40	2316.00	2933.60
159		90670	Pneumococcal Conjugate Vaccine, 13 Valent (Pcv13), For Intramuscular Use	IP/OP	586.00	527.40	224.32	175.80	224.32	N/A	224.32	527.40	468.80	439.50	556.70
160		77336	Continuing Medical Physics Consultation	IP/OP	1419.00	1277.10	287.31	157.26	287.31	N/A	287.31	1277.10	1135.20	1064.25	1348.05
161		92602	Diagnostic Analysis Of Cochlear Implant, Patient Younger Than 7 Yrs Of Age; Subsequent Reprogr	OP	897.00	807.30	313.28	171.47	313.28	N/A	313.28	807.30	717.60	672.75	852.15
162		92025	Computerized Corneal Topography	OP	213.00	191.70	123.82	67.77	123.82	N/A	123.82	191.70	170.40	159.75	202.35
163		93923	Complete Bilateral Noninvasive Physiologic Studies Of Upper Or Lower Extremity Arteries, 3 Or Mon	IP/OP	1441.00	1296.90	313.28	171.47	313.28	N/A	313.28	1296.90	1152.80	1080.75	1368.95
164		82948	Glucose Test	IP/OP	42.00	37.80	16.08	12.60	16.08	N/A	16.08	37.80	33.60	31.50	39.90
165		94150	Vital Capacity, Total (Separate Procedure)	IP/OP	549.00	494.10	313.28	171.47	313.28	N/A	313.28	494.10	439.20	411.75	521.55
166		94060	Bronchodilation Responsiveness	IP/OP	636.00	572.40	603.28	330.20	603.28	N/A	603.28	572.40	508.80	477.00	604.20
167		90732	Pneumococcal Polysaccharide Vaccine	IP/OP	120.00	108.00	45.94	36.00	45.94	N/A	45.94	108.00	96.00	90.00	114.00
168		92584	Electrocochleography	OP	904.00	813.60	313.28	171.47	313.28	N/A	313.28	813.60	723.20	678.00	858.80
169		92550	Tympanometry And Reflex Threshold Measurements	OP	549.00	494.10	313.28	171.47	313.28	N/A	313.28	494.10	439.20	411.75	521.55
170		92626	Evaluation Of Auditory Function, First Hour	OP	645.00	580.50	313.28	171.47	313.28	N/A	313.28	580.50	516.00	483.75	612.75
171		92579	Visual Reinforcement Audiometry (Vra)	IP/OP	549.00	494.10	313.28	171.47	313.28	N/A	313.28	494.10	439.20	411.75	521.55
172		92582	Conditioning Play Audiometry	OP	892.00	802.80	313.28	171.47	313.28	N/A	313.28	802.80	713.60	669.00	847.40
173		90686	Influenza Virus Vaccine	IP/OP	81.00	72.90	31.01	24.30	31.01	N/A	31.01	72.90	64.80	60.75	76.95
174		92604	Diagnostic Analysis Of Cochlear Implant, Age 7 Yrs Or Older	OP	587.00	528.30	313.28	171.47	313.28	N/A	313.28	528.30	469.60	440.25	557.65
175		90715	Tetanus, Diphtheria Toxoids And Acellular Pertussis Vaccine (Tdap), 7 Years+	IP/OP	168.00	151.20	64.31	50.40	64.31	N/A	64.31	151.20	134.40	126.00	159.60
176		86901	Blood Typing Rhd	IP/OP	137.00	123.30	73.15	40.04	73.15	N/A	73.15	123.30	109.60	102.75	130.15
177		93922	Limited Bilateral Noninvasive Physiologic Studies Of Upper Or Lower Extremity Arteries	IP/OP	845.00	760.50	250.12	136.90	250.12	N/A	250.12	760.50	676.00	633.75	802.75
178		36415	Routine Venipuncture	IP/OP	58.00	52.20	22.20	17.40	22.20	N/A	22.20	52.20	46.40	43.50	55.10
179		92610	Evaluation Of Oral And Pharyngeal Swallowing Function	IP/OP	251.00	225.90	96.08	75.30	96.08	N/A	96.08	225.90	200.80	188.25	238.45
180		92522	Evaluation Of Speech Sound Production	IP/OP	551.00	495.90	210.92	165.30	210.92	N/A	210.92	495.90	440.80	413.25	523.45
181		93880	Duplex Scan Of Extracranial Arteries; Complete Bilateral Study	IP/OP	918.00	826.20	503.03	275.33	503.03	N/A	503.03	826.20	734.40	688.50	872.10
182		97802	Medical Nutrition Therapy	OP	490.00	441.00	187.57	147.00	187.57	N/A	187.57	441.00	392.00	367.50	465.50
183		86703	Antibody; Hiv-1 And Hiv-2, Single Result	IP/OP	54.00	48.60	20.67	16.20	20.67	N/A	20.67	48.60	43.20	40.50	51.30
184		93970	Duplex Scan Of Extremity Veins; Complete Bilateral Study	IP/OP	2244.00	2019.60	503.03	275.33	503.03	N/A	503.03	2019.60	1795.20	1683.00	2131.80
185		96376	Therapeutic, Prophylactic, Or Diagnostic Injection Sequential Intravenous Push Of The Same Subst	IP/OP	205.00	184.50	78.47	61.50	78.47	N/A	78.47	184.50	164.00	153.75	194.75
186		90744	Hepatitis B Vaccine (Hepb), Pediatric/Adolescent Dosage, 3 Dose Schedule	IP/OP	166.00	149.40	63.54	49.80	63.54	N/A	63.54	149.40	132.80	124.50	157.70
187		93971	Duplex Scan Of Extremity Veins; Unilateral Or Limited Study	IP/OP	463.00	416.70	230.24	126.02	230.24	N/A	230.24	416.70	370.40	347.25	439.85
188		90471	Immunization Administration	IP/OP	236.00	212.40	145.34	79.55	145.34	N/A	145.34	212.40	188.80	177.00	224.20
189		90632	Hepatitis A Vaccine (Hepa), Adult Dosage, For Intramuscular Use	IP/OP	217.00	195.30	83.07	65.10	83.07	N/A	83.07	195.30	173.60	162.75	206.15
190		99153	Mod Sedation Services Provided By The Same Physician	OP	253.00	227.70	96.85	75.90	96.85	N/A	96.85	227.70	202.40	189.75	240.35
191		93303	Transthoracic Echocardiography	IP/OP	2710.00	2439.00	1083.79	593.21	1083.79	N/A	1083.79	2439.00	2168.00	2032.50	2574.50
192		73552	X-Ray, Femur, 2 Views	IP/OP	269.00	242.10	187.14	187.14	187.14	N/A	187.14	242.10	215.20	201.75	255.55
193		96372	Therapeutic, Prophylactic, Or Diagnostic Injection; Subcutaneous Or Intramuscular	IP/OP	182.00	163.80	145.34	79.55	145.34	N/A	145.34	163.80	145.60	136.50	172.90
194		95851	Range Of Motion Measurements And Report	IP/OP	112.00	100.80	42.87	33.60	42.87	N/A	42.87	100.80	89.60	84.00	106.40
195		77300	Basic Radiation Dosimetry Calculation	IP/OP	639.00	575.10	287.31	157.26	287.31	N/A	287.31	575.10	511.20	479.25	607.05
196		96366	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis, Each Additional Hour	IP/OP	251.00	225.90	91.28	49.96	91.28	N/A	91.28	225.90	200.80	188.25	238.45
197		94761	Noninvasive Ear Or Pulse Oximetry For Oxygen Saturation; Multiple Determinations	IP/OP	371.00	333.90	142.02	111.30	142.02	N/A	142.02	333.90	296.80	278.25	352.45
198		94640	Inhalation Therapy	IP/OP	632.00	568.80	412.52	225.79	412.52	N/A	412.52	568.80	505.60	474.00	600.40
199		77412	Radiation Therapy Delivery	IP/OP	886.00	797.40	566.37	310.00	566.37	N/A	566.37	797.40	708.80	664.50	841.70
200		77063	Screening Digital Breast Tomosynthesis, Bilateral	IP/OP	515.00	463.50	197.14	154.50	197.14	N/A	197.14	463.50	386.25	369.25	489.25
201		87591	Infectious Agent Detection, Neisseria Gonorrhoeae	IP/OP	160.00	144.00	61.25	48.00	61.25	N/A	61.25	144.00	128.00	120.00	152.00
202		97535	Self-Care/Home Management Training	IP/OP	204.00	183.60	78.09	61.20	78.09	N/A	78.09	183.60	163.20	153.00	193.80
203		70551	Mri, Brain Without Contrast	IP/OP	5904.00	5313.60	503.03	275.33	503.03	N/A	503.03	5313.60	4723.20	4428.00	5608.80
204		97162	Physical Therapy Evaluation, Complex, 30 Minutes	IP/OP	371.00	333.90	142.02	111.30	142.02	N/A	142.02	333.90	296.80	278.25	352.45
205		92507	Therapy Speech And/Or Auditory	IP/OP	184.00	165.60	70.44	55.20	70.44	N/A	70.44	165.60	147.20	138.00	174.80
206		92612	Flexible Endoscopic Evaluation Of Swallowing By Cine Or Video Recording	IP/OP	930.00	837.00	356.00	279.00	356.00	N/A	356.00	837.00	744.00	697.50	883.50
207		71250	Ct Scan, Thorax Without Contrast	IP/OP	1001.00	900.90	230.24	126.02	230.24	N/A	230.24	900.90	800.80	750.75	950.95

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Prices not directly translated on a contract or service group are noted as Contact UH.

Shoppable ID	N/A Indicator	Billing Code	Description	Location Provided	Gross Charge	First Trenton Indemnity	Horizon Plan: Indemnity	Horizon Plan: Medicare Blue	Horizon Plan: Managed	Horizon Plan: NJ Health	Horizon Plan: PPO	Managed Care Incorporated	Multiplan, Inc	QualCare	Three Rivers Provider Network
208		76705	Ultrasound Of Abdomen, Limited	IP/OP	762.00	685.80	230.24	126.02	230.24	N/A	230.24	685.80	609.60	571.50	723.90
209		95813	Electroencephalogram (Eeg) Extended Monitoring; 61-119 Minutes	IP/OP	795.00	715.50	603.28	330.20	603.28	N/A	603.28	715.50	636.00	596.25	755.25
210		93005	Electrocardiogram	IP/OP	232.00	208.80	123.82	67.77	123.82	N/A	123.82	208.80	185.60	174.00	220.40
211		95819	Electroencephalogram (Eeg)	IP/OP	1007.00	906.30	603.28	330.20	603.28	N/A	603.28	906.30	805.60	755.25	956.65
212		94727	Gas Dilution	IP/OP	549.00	494.10	313.28	171.47	313.28	N/A	313.28	494.10	439.20	411.75	521.55
213		94760	Noninvasive Ear Or Pulse Oximetry For Oxygen Saturation	IP/OP	132.00	118.80	50.53	39.60	50.53	N/A	118.80	105.60	99.00	125.40	
214		94644	Continuous Inhalation Therapy With Aerosol Medication For Acute Airway Obstruction; First Hour	IP/OP	388.00	349.20	250.12	136.90	250.12	N/A	250.12	349.20	310.40	291.00	368.60
215		94645	Continuous Inhalation Therapy With Aerosol Medication For Acute Airway Obstruction; Each Additional Hour	IP/OP	398.00	358.20	152.35	119.40	152.35	N/A	152.35	358.20	318.40	298.50	378.10
216		94003	Ventilation Assist And Management; Hospital Inpatient/Observation, Each Subsequent Day	IP/OP	969.00	872.10	1199.24	656.40	1199.24	N/A	1199.24	872.10	775.20	726.75	920.55
217		94002	Ventilation Assist And Management; Hospital Inpatient/Observation, Initial Day	IP/OP	1918.00	1726.20	1199.24	656.40	1199.24	N/A	1199.24	1726.20	1534.40	1438.50	1822.10
218		94681	Oxygen Uptake, Expired Gas Analysis	IP/OP	931.00	837.90	603.28	330.20	603.28	N/A	603.28	837.90	744.80	698.25	884.45
219		94010	Spirometry	IP/OP	549.00	494.10	313.28	171.47	313.28	N/A	313.28	494.10	439.20	411.75	521.55
220		93888	Transcranial Doppler Study Of The Intracranial Arteries; Limited Study	IP/OP	862.00	775.80	230.24	126.02	230.24	N/A	230.24	775.80	689.60	646.50	818.90
221		77417	Therapeutic Radiology Port Image(S)	IP/OP	371.00	333.90	142.02	111.30	142.02	N/A	142.02	333.90	296.80	278.25	352.45
222		94729	Diffusing Capacity	IP/OP	371.00	333.90	142.02	111.30	142.02	N/A	142.02	333.90	296.80	278.25	352.45
223		77085	Bone Density Study, Dual-Energy X-Ray Absorptiometry	IP/OP	424.00	381.60	230.24	126.02	230.24	N/A	230.24	381.60	339.20	318.00	402.80
224		77334	Therapy Devices, Design And Construction; Complex	IP/OP	1429.00	1286.10	772.73	422.95	772.73	N/A	772.73	1286.10	1143.20	1071.75	1357.55
225		94668	Manipulation Of Chest Wall	IP/OP	239.00	215.10	250.12	136.90	250.12	N/A	250.12	215.10	191.20	179.25	227.05
226		87536	Infectious Agent Detection; Hiv-1, Quant	IP/OP	867.00	780.30	331.89	260.10	331.89	N/A	331.89	780.30	693.60	650.25	823.65
227		95951	Eeg Monitoring, Video Recording	IP/OP	4272.00	3844.80	1635.32	1281.60	1635.32	N/A	1635.32	3844.80	3417.60	3204.00	4058.40
228		76642	Ultrasound Of Breast	IP/OP	422.00	379.80	187.14	102.43	187.14	N/A	187.14	379.80	337.60	316.50	400.90
229		96360	Intravenous Infusion, Hydration; Initial, 31 Minutes To 1 Hour	IP/OP	599.00	539.10	444.97	243.55	444.97	N/A	444.97	539.10	479.20	449.25	569.05
230		93458	Catheter Placement In Coronary Artery(S) For Coronary Angiography	IP/OP	13982.00	12583.80	6372.83	3488.14	6372.83	N/A	6372.83	12583.80	11185.60	10486.50	13282.90
231		76770	Ultrasound Of Retroperitoneal, Complete	IP/OP	468.00	439.20	230.24	126.02	230.24	N/A	230.24	439.20	390.40	366.00	463.60
232		93975	Vascular Study	IP/OP	871.00	783.90	503.03	275.33	503.03	N/A	503.03	783.90	696.80	653.25	827.45
233		76536	Ultrasound Of Head And Neck	IP/OP	762.00	685.80	230.24	126.02	230.24	N/A	230.24	685.80	609.60	571.50	723.90
234		76775	Ultrasound Of Retroperitoneal, Limited	IP/OP	488.00	439.20	230.24	126.02	230.24	N/A	230.24	439.20	390.40	366.00	463.60
235		74018	X-Ray, Abdomen	IP/OP	256.00	230.40	187.14	102.43	187.14	N/A	187.14	230.40	204.80	192.00	243.20
236		86900	Blood Typing Abo	IP/OP	250.00	225.00	250.12	136.90	250.12	N/A	250.12	225.00	200.00	187.50	237.50
237		87186	Susceptibility Studies, Antimicrobial Agent	IP/OP	368.00	331.20	140.87	110.40	140.87	N/A	140.87	331.20	294.40	276.00	349.60
238		96375	Therapeutic, Prophylactic, Or Diagnostic Injection; Sequential Intravenous Push Of A New Substance	IP/OP	212.00	190.80	91.28	49.96	91.28	N/A	91.28	190.80	169.60	159.00	201.40
239		86923	Compatibility Test Each Unit; Electronic	IP/OP	455.00	409.50	338.73	185.40	338.73	N/A	338.73	409.50	364.00	341.25	432.25
240		86920	Compatibility Test Each Unit; Immediate Spin Technique	IP/OP	437.00	393.30	338.73	185.40	338.73	N/A	338.73	393.30	349.60	327.75	415.15
241		99152	Mod Sedation Services Provided By The Same Physician	OP	290.00	261.00	111.01	87.00	111.01	N/A	111.01	261.00	232.00	217.50	275.50
242		97161	Physical Therapy Evaluation: Low Complexity 20 Minutes	IP/OP	204.00	183.60	78.09	61.20	78.09	N/A	78.09	183.60	163.20	153.00	193.80
243		71046	C-Reactive Protein;	IP/OP	256.00	230.40	187.14	102.43	187.14	N/A	187.14	230.40	204.80	192.00	243.20
244		87040	Culture, Bacterial, Blood	IP/OP	89.00	80.10	34.07	26.70	34.07	N/A	34.07	80.10	71.20	66.75	84.55
245		97165	Occupational Therapy Evaluation, Low Complexity, 30 Minutes	IP/OP	204.00	183.60	78.09	61.20	78.09	N/A	78.09	183.60	163.20	153.00	193.80
246		97166	Occupational Therapy Evaluation, Mod Complexity 45 Minutes	IP/OP	371.00	333.90	142.02	111.30	142.02	N/A	142.02	333.90	296.80	278.25	352.45
247		73502	X-Ray, Hip, 2-3 Views	IP/OP	269.00	242.10	187.14	102.43	187.14	N/A	187.14	242.10	215.20	201.75	255.55
248		86850	Antibody Screen, Rbc, Each Serum Technique	IP/OP	173.00	155.70	108.01	59.12	108.01	N/A	108.01	155.70	138.40	129.75	164.35
249		72040	X-Ray, Neck, Spine, 2-3 Views	IP/OP	251.00	225.90	187.14	102.43	187.14	N/A	187.14	225.90	200.80	188.25	238.45
250		80307	Drug Tests	IP/OP	94.00	84.60	35.98	28.20	35.98	N/A	35.98	84.60	75.20	70.50	89.30
251		83690	Blood Test, Lipase	IP/OP	57.00	51.30	21.82	17.10	21.82	N/A	21.82	51.30	45.60	42.75	54.15
252		82550	Blood Test, Creatine Kinase (Ck)	IP/OP	47.00	42.30	17.99	14.10	17.99	N/A	17.99	42.30	37.60	35.25	44.65
253		93306	Echocardiography, With Doppler	IP/OP	1949.00	1754.10	1083.79	593.21	1083.79	N/A	1083.79	1754.10	1559.20	1461.75	1851.55
254		97018	Application Of A Modality To 1 Or More Areas; Paraffin Bath	OP	112.00	100.80	42.87	33.60	42.87	N/A	42.87	100.80	89.60	84.00	106.40
255		77002	X-Ray, Guidance Of Needle Placement	IP/OP	871.00	783.90	333.42	261.30	333.42	N/A	333.42	783.90	696.80	653.25	827.45
256		96361	Intravenous Infusion, Hydration; Each Additional Hour	IP/OP	307.00	276.30	91.28	49.96	91.28	N/A	91.28	276.30	245.60	230.25	291.65
257		71045	X-Ray, Chest, 1 View	IP/OP	256.00	230.40	187.14	102.43	187.14	N/A	187.14	230.40	204.80	192.00	243.20
258		92526	Therapy Swallowing Dysfunction And/Or Oral Function For Feeding	IP/OP	184.00	165.60	70.44	55.20	70.44	N/A	70.44	165.60	147.20	138.00	174.80
259		97129	Therapeutic Interventions, 15 Minutes	IP/OP	184.00	165.60	70.44	55.20	70.44	N/A	70.44	165.60	147.20	138.00	174.80
260		82248	Bilirubin; Direct	IP/OP	48.00	43.20	18.37	14.40	18.37	N/A	18.37	43.20	38.40	36.00	45.60
261		86706	Hepatitis B Surface Antibody	IP/OP	94.00	84.60	35.98	28.20	35.98	N/A	35.98	84.60	75.20	70.50	89.30
262		83036	Hemoglobin; Glycosylated (A1C)	IP/OP	59.00	53.10	22.59	17.70	22.59	N/A	22.59	53.10	47.20	44.25	56.05
263		97164	Re-Evaluation Of Physical Therapy Established Plan Of Care	IP/OP	204.00	183.60	78.09	61.20	78.09	N/A	78.09	183.60	163.20	153.00	193.80
264		97150	Therapeutic Procedure, Group	IP/OP	204.00	183.60	78.09	61.20	78.09	N/A	78.09	183.60	163.20	153.00	193.80
265		97112	Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes	IP/OP	149.00	134.10	57.04	44.70	57.04	N/A	57.04	134.10	119.20	111.75	141.55
266		97760	Orthotic(S) Management And Training	IP/OP	157.00	141.30	60.10	47.10	60.10	N/A	60.10	141.30	125.60	117.75	149.15
267		93454	Catheter Placement In Coronary Artery(S) For Coronary Angiography	IP/OP	13982.00	12583.80	6372.83	3488.14	6372.83	N/A	6372.83	12583.80	11185.60	10486.50	13282.90
268		84702	Gonadotropin, Chorionic (Hcg); Quantitative	IP/OP	54.00	48.60	20.67	16.20	20.67	N/A	20.67	48.60	43.20	40.50	51.30
269		97163	Physical Therapy Evaluation: High Complexity	IP/OP	728.00	655.20	278.68	218.40	278.68	N/A	278.68	655.20	582.40	546.00	691.60
270		97530	Therapeutic Activities	IP/OP	204.00	183.60	78.09	61.20	78.09	N/A	78.09	183.60	163.20	153.00	193.80
271		97168	Re-Evaluation Of Occupational Therapy Established Plan Of Care	IP/OP	204.00	183.60	78.09	61.20	78.09	N/A	78.09	183.60	163.20	153.00	193.80
272		87086	Culture, Bacterial, Urine	IP/OP	83.00	74.70	31.77	24.90	31.77	N/A	31.77	74.70	66.40	62.25	78.85
273		87150	Culture Typing, Dna/Rna Probe	IP/OP	2808.00	2527.20	1074.90	842.40	1074.90	N/A	1074.90	2527.20	2246.40	2106.00	2667.60
274		72070	X-Ray, Thoracic Spine, 2 Views	IP/OP	239.00	215.10	230.24	126.02	230.24	N/A	230.24	215.10	191.20	179.25	227.05
275		93798	Cardiac Rehabilitation With Ecg Monitor	IP/OP	396.00	356.40	258.65	141.57	258.65	N/A	258.65	356.40	316.80	297.00	376.20
276		73564	X-Ray, Knee, 4 Or More Views	IP/OP	230.00	207.00	230.24	126.02	230.24	N/A	230.24	207.00	184.00	172.50	218.50

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277		93350	Echocardiography, Transthoracic	IP/OP	1949.00	1754.10	1083.79	593.21	1083.79	N/A	1083.79	1754.10	1559.20	1461.75	1851.55
278		97116	Therapeutic Procedure, Gait Training	IP/OP	303.00	272.70	115.99	90.90	115.99	N/A	115.99	272.70	242.40	227.25	287.85
279		92523	Evaluation Of Speech Sound Production	IP/OP	551.00	495.90	210.92	165.30	210.92	N/A	210.92	495.90	440.80	413.25	523.45
280		83540	Blood Test, Iron	IP/OP	40.00	36.00	15.31	12.00	15.31	N/A	15.31	36.00	32.00	30.00	38.00
281		84439	Blood Test, Free T4	IP/OP	81.00	72.90	31.01	24.30	31.01	N/A	31.01	72.90	64.80	60.75	76.95
282		82728	Blood Test, Ferritin	IP/OP	119.00	107.10	45.55	35.70	45.55	N/A	45.55	107.10	95.20	89.25	113.05
283		93308	Echocardiography, Transthoracic, Follow-Up Or Limited Study	IP/OP	1147.00	1032.30	503.03	275.33	503.03	N/A	503.03	1032.30	917.60	860.25	1089.65
284		86592	Syphilis Test	IP/OP	46.00	41.40	17.61	13.80	17.61	N/A	17.61	41.40	36.80	34.50	43.70
285		83605	Blood Test, Lactic Acid	IP/OP	51.00	45.90	19.52	15.30	19.52	N/A	19.52	45.90	40.80	38.25	48.45
286		84100	Blood Test, Phosphorus	IP/OP	47.00	42.30	17.99	14.10	17.99	N/A	17.99	42.30	37.60	35.25	44.65
287		93017	Cardiovascular Stress Test	IP/OP	1115.00	1003.50	603.28	330.20	603.28	N/A	603.28	1003.50	892.00	836.25	1059.25
288		76856	Ultrasound Of Pelvis	IP/OP	476.00	428.40	230.24	126.02	230.24	N/A	230.24	428.40	380.80	357.00	452.20
289		70496	Ct Scan, Head Or Brain	IP/OP	2389.00	2150.10	388.48	212.63	388.48	N/A	388.48	2150.10	1911.20	1791.75	2269.55
290		74170	Ct Scan, Abdomen With And Without Contrast	IP/OP	4475.00	4027.50	388.48	212.63	388.48	N/A	388.48	4027.50	3580.00	3356.25	4251.25
291		70486	Ct Scan, Maxillofacial Without Contrast	IP/OP	1126.00	1013.40	230.24	126.02	230.24	N/A	230.24	1013.40	900.80	844.50	1069.70
292		71260	Ct Scan, Thorax With Contrast	IP/OP	1545.00	1390.50	388.48	212.63	388.48	N/A	388.48	1390.50	1236.00	1158.75	1467.75
293		88341	Immunohistochemistry Or Immunocytochemistry, Per Specimen	IP/OP	157.00	141.30	60.10	47.10	60.10	N/A	60.10	141.30	125.60	117.75	149.15
294		87077	Culture, Bacterial; Aerobic Isolate	IP/OP	76.00	68.40	29.09	22.80	29.09	N/A	29.09	68.40	60.80	57.00	72.20
295		76937	Ultrasound Guided Vascular Access	IP/OP	575.00	517.50	220.11	172.50	220.11	N/A	220.11	517.50	460.00	431.25	546.25
296		77001	Fluoroscopic Guidance For Vein Dvc	IP/OP	468.00	421.20	179.15	140.40	179.15	N/A	179.15	421.20	374.40	351.00	444.60
297		83615	Lactate Dehydrogenase (Ld), (Ldh)	IP/OP	57.00	51.30	21.82	17.10	21.82	N/A	21.82	51.30	45.60	42.75	54.15
298		85652	Sedimentation Rate, Erythrocyte, Automated	IP/OP	24.00	21.60	9.19	7.20	9.19	N/A	9.19	21.60	19.20	18.00	22.80
299		82306	Gonadotropin, Chorionic (Hcg); Quantitative	IP/OP	171.00	153.90	65.46	51.30	65.46	N/A	65.46	153.90	136.80	128.25	162.45
300		86803	Hepatitis C Antibody	IP/OP	122.00	109.80	46.70	36.60	46.70	N/A	46.70	109.80	97.60	91.50	115.90
301		80202	Blood Test, Vancomycin	IP/OP	100.00	90.00	38.28	30.00	38.28	N/A	38.28	90.00	80.00	75.00	95.00
302		86704	Hepatitis B Core Antibody (Hbcab); Total	IP/OP	110.00	99.00	42.11	33.00	42.11	N/A	42.11	99.00	88.00	82.50	104.50
303		84484	Blood Test, Troponin	IP/OP	79.00	71.10	30.24	23.70	30.24	N/A	30.24	71.10	63.20	59.25	75.05
304		84145	Procalcitonin (Pct)	IP/OP	566.00	509.40	216.66	169.80	216.66	N/A	216.66	509.40	452.80	424.50	537.70
305		86140	C-Reactive Protein	IP/OP	36.00	32.40	13.78	10.80	13.78	N/A	13.78	32.40	28.80	27.00	34.20
306		87340	Infectious Agent Antigen Detection, Hep B	IP/OP	93.00	83.70	35.60	27.90	35.60	N/A	35.60	83.70	74.40	69.75	88.35
307		84132	Blood Test, Potassium	IP/OP	27.00	24.30	10.34	8.10	10.34	N/A	10.34	24.30	21.60	20.25	25.65
308		88305	Level Iv - Surgical Pathology, Gross And Microscopic Examination	IP/OP	109.00	98.10	108.01	59.12	108.01	N/A	108.01	98.10	87.20	81.75	103.55
309		83550	Iron Binding Capacity	IP/OP	28.00	25.20	10.72	8.40	10.72	N/A	10.72	25.20	22.40	21.00	26.60
310		87389	Infectious Agent Antigen Detection, With Hiv	IP/OP	102.00	91.80	39.05	30.60	39.05	N/A	39.05	91.80	81.60	76.50	96.90
311		84295	Blood Test, Sodium	IP/OP	28.00	25.20	10.72	8.40	10.72	N/A	10.72	25.20	22.40	21.00	26.60
312		83880	Blood Test, B-Type Natriuretic Peptide (Bnp)	IP/OP	157.00	141.30	60.10	47.10	60.10	N/A	60.10	141.30	125.60	117.75	149.15
313		82570	Blood Test, Creatine Urine	IP/OP	53.00	47.70	20.29	15.90	20.29	N/A	20.29	47.70	42.40	39.75	50.35
314		82247	Bilirubin; Total	IP/OP	48.00	43.20	18.37	14.40	18.37	N/A	18.37	43.20	38.40	36.00	45.60
315		88185	Flow Cytometry, Cell Surface, Cytoplasmic, Or Nuclear Marker, Technical Component Only	IP/OP	66.00	59.40	25.26	19.80	25.26	N/A	25.26	59.40	52.80	49.50	62.70
316		87070	Culture, Bacterial; Any Other Source Except Urine, Blood, Stool Or Aerobic	IP/OP	157.00	141.30	60.10	47.10	60.10	N/A	60.10	141.30	125.60	117.75	149.15
317		87205	Smear, Primary Source With Interpretation; Gram Or Giemsa Stain For Bacteria, Fungi, Or Cell Type	IP/OP	41.00	36.90	15.69	12.30	15.69	N/A	15.69	36.90	32.80	30.75	38.95
318		85007	Blood Count	IP/OP	21.00	18.90	8.04	6.30	8.04	N/A	8.04	18.90	16.80	15.75	19.95
319		87081	Culture, Presumptive, Pathogenic Organisms, Screening Only	IP/OP	86.00	77.40	32.92	25.80	32.92	N/A	32.92	77.40	68.80	64.50	81.70
320		74176	Ct Scan, Abdomen And Pelvis Without Contrast	IP/OP	1001.00	900.90	503.03	275.33	503.03	N/A	503.03	900.90	800.80	750.75	950.95
321		82435	Blood Test, Chloride	IP/OP	27.00	24.30	10.34	8.10	10.34	N/A	10.34	24.30	21.60	20.25	25.65

Notes:
Inpatient charges are not separately billable and are included in the DRG rate.
The gross charges for the DRG based billing codes are average charge per case.
Discounted prices that are not currently available are noted as T.B.D.
Prices not directly translated on a contract or service group are noted as Contact UH.

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Shoppable ID	N/A Indicator	Billing Code	Description	Location Provided	Gross Charge	United Healthcare	United Healthcare	United HealthCare:				Wellcare:	Minimum	Maximum	Discounted Cash
						Community Plan: Medicaid	Community Plan: Medicare	United HealthCare: Commercial	United HealthCare: Oxford	United HealthCare: PPO	Wellcare: Medicaid	Medicare	Negotiated Rate	Negotiated Rate	Price
70		76805	Abdominal Ultrasound Of Pregnant Uterus (Greater Or Equal To 14 Weeks 0 Days) Single Or First F	I/IO/P	487.00	151.51	126.02	Contact UH	Contact UH	Contact UH	151.51	126.02	126.02	462.65	144.92
71		86480	Tuberculosis Test	I/IO/P	236.00	49.58	61.98	Contact UH	Contact UH	Contact UH	49.58	61.98	49.58	224.20	71.28
72		83735	Blood Test, Magnesium	I/IO/P	47.00	14.62	6.70	Contact UH	Contact UH	Contact UH	14.62	6.70	6.70	44.65	7.71
73		DRG - 115	Extraocular Procedures Except Orbit	IP	N/A	N/A	28721.18	21875.04	21267.40	21267.180	N/A	28721.18	13451.25	49643.10	33029.35
74		DRG - 117	Intraocular Procedures Without Complications	IP	N/A	N/A	22382.42	14296.32	13899.20	14777.83	N/A	22382.42	9900.07	36537.12	25739.79
75		DRG - 788	Cesarean Section Without Sterilization Without Complications	IP	N/A	N/A	20932.33	N/A	N/A	N/A	N/A	20932.33	6969.05	32829.91	24072.18
76		DRG - 906	Hand Procedures For Injuries	IP	N/A	N/A	31957.40	25744.32	25029.20	26611.40	N/A	31957.40	18202.30	67177.27	36751.01
77		DRG - 482	Hip And Femur Procedures Except Major Joint Without Complications	IP	N/A	N/A	30250.76	23703.84	23045.40	25402.20	N/A	30250.76	16437.57	60664.37	34788.38
78		DRG - 494	Lower Extremity And Humerus Procedures Except Hip, Foot And Femur Without Complications	IP	N/A	N/A	33173.84	27198.72	26443.20	28114.79	N/A	33173.84	17320.43	63922.64	38149.92
79		DRG - 502	Soft Tissue Procedures Without Complications	IP	N/A	N/A	26979.62	19792.80	19243.00	20459.43	N/A	26979.62	12750.10	47055.43	31026.56
80		DRG - 505	Foot Procedures W/O Co/Mcc	IP	N/A	N/A	31704.47	25441.92	24735.20	26298.82	N/A	31704.47	15601.12	57577.39	36460.14
81		DRG - 512	Shoulder, Elbow Or Forearm Procedures, Except Major Joint Procedures Without Complications	IP	N/A	N/A	29773.82	23133.60	22491.00	23912.75	N/A	29773.82	15031.31	55474.46	34239.89
82		DRG - 660	Kidney And Ureter Procedures For Non-Neoplasm With Complications	IP	N/A	N/A	27421.63	20321.28	19756.80	21005.71	N/A	27421.63	14295.60	52759.23	31534.87
83		DRG - 142	Major Head And Neck Procedures Without Complications	IP	N/A	N/A	30920.41	24504.48	23823.80	25329.80	N/A	30920.41	20099.66	30920.41	35558.47
84		DRG - 247	Percutaneous Cardiovascular Procedures With Coronary Artery Stent	IP	N/A	N/A	33423.15	27496.80	26733.00	28422.91	N/A	33423.15	20512.15	75701.99	38436.62
85		DRG - 329	Major Small And Large Bowel Procedures With Major Comp	IP	N/A	N/A	61608.13	66575.52	64726.20	68817.82	N/A	61608.13	49304.80	181963.94	76024.35
86		DRG - 355	Hernia Procedures Except Inguinal And Femoral Without Complications	IP	N/A	N/A	26953.12	19761.12	19212.20	20426.69	N/A	26953.12	13379.16	49377.04	30996.09
87		DRG - 419	Laparoscopic Cholecystectomy Without C.D.E. Without Complications	IP	N/A	N/A	26142.56	18792.00	18270.00	19424.93	N/A	26142.56	12879.47	47532.87	30063.94
88		DRG - 479	Biopsies Of Musculoskeletal System And Connective Tissue Without Complications	IP	N/A	N/A	31723.74	25464.96	24757.60	26322.63	N/A	31723.74	17755.93	65529.91	36482.30
89		72131	Ct Scan, Lumbar Spine	I/IO/P	273.00	84.93	126.02	Contact UH	Contact UH	Contact UH	84.93	126.02	84.93	259.35	144.92
90		87491	Infectious Agent Detection, Chlamydia Trachomatis	I/IO/P	160.00	49.78	35.09	Contact UH	Contact UH	Contact UH	49.78	35.09	35.09	152.00	40.35
91		73700	Ct Scan, Lower Extremities	I/IO/P	273.00	84.93	126.02	Contact UH	Contact UH	Contact UH	84.93	126.02	84.93	259.35	144.92
92		73630	X-Ray, Foot	I/IO/P	586.00	182.30	102.43	Contact UH	Contact UH	Contact UH	182.30	102.43	102.43	556.70	117.79
93		73560	X-Ray, Knee	I/IO/P	608.00	189.15	102.43	Contact UH	Contact UH	Contact UH	189.15	102.43	102.43	577.60	117.79
94		72190	X-Ray, Pelvis, 3 Views	I/IO/P	239.00	74.35	126.02	Contact UH	Contact UH	Contact UH	74.35	126.02	74.35	230.24	144.92
95		92557	Comprehensive Audiometry Threshold Evaluation And Speech Recognition	I/IO/P	892.00	277.50	171.47	Contact UH	Contact UH	Contact UH	277.50	171.47	171.47	847.40	197.19
96		76512	Ophthalmic Ultrasound, Diagnostic, B-Scan With And Without Quant. A	I/IO/P	487.00	151.51	126.02	Contact UH	Contact UH	Contact UH	151.51	126.02	126.02	462.65	144.92
97		70355	X-Ray, Jaws, Panoramic	I/IO/P	308.00	95.82	102.43	Contact UH	Contact UH	Contact UH	95.82	102.43	95.82	292.60	117.79
98		96415	Chemotherapy Administration, Intravenous Infusion Technique	I/IO/P	198.00	61.60	79.55	Contact UH	Contact UH	Contact UH	61.60	79.55	61.60	188.10	91.48
99		96367	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis; Additional Sequential Infusion Of A N	I/IO/P	198.00	61.60	79.55	Contact UH	Contact UH	Contact UH	61.60	79.55	61.60	188.10	91.48
100		70498	Ct Scan, Neck	I/IO/P	2389.00	743.22	212.63	Contact UH	Contact UH	Contact UH	743.22	212.63	212.63	2269.55	244.52
101		76376	3D Rendering With Interpretation And Post Process Supervision	I/IO/P	273.00	84.93	N/A	Contact UH	Contact UH	Contact UH	84.93	N/A	81.90	259.35	T.B.D
102		92567	Tompanometry	OP	202.00	62.84	40.04	Contact UH	Contact UH	Contact UH	62.84	40.04	40.04	191.90	46.05
103		92235	Fluorescein Angiography	OP	931.00	289.63	330.20	Contact UH	Contact UH	Contact UH	289.63	330.20	286.75	884.45	379.73
104		76815	Abdominal Ultrasound Of Pregnant Uterus	I/IO/P	416.00	129.42	126.02	Contact UH	Contact UH	Contact UH	129.42	126.02	126.02	395.20	144.92
105		96368	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis; Concurrent Infusion	I/IO/P	140.00	43.55	N/A	Contact UH	Contact UH	Contact UH	43.55	N/A	42.00	133.00	T.B.D
106		90472	Immunization Administration	I/IO/P	137.00	42.62	N/A	Contact UH	Contact UH	Contact UH	42.62	N/A	41.10	130.15	T.B.D
107		92603	Diagnostic Analysis Of Cochlear Implant, Age 7 Years Or Older; With Programming	OP	821.00	255.41	171.47	Contact UH	Contact UH	Contact UH	255.41	171.47	171.47	779.95	197.19
108		92250	Fundus Photography With Interpretation And Report	OP	388.00	120.71	136.90	Contact UH	Contact UH	Contact UH	120.71	136.90	120.71	368.60	157.44
109		96523	Irrigation Of Implanted Venous Access Device	I/IO/P	239.00	74.35	67.77	Contact UH	Contact UH	Contact UH	74.35	67.77	67.77	227.05	77.94
110		90746	Hepatitis B Vaccine (Hepb), Adult Dosage, 3 Dose Schedule, For Intramuscular Use	I/IO/P	453.00	140.93	70.38	Contact UH	Contact UH	Contact UH	140.93	70.38	70.38	430.35	80.93
111		89051	Cell Count, Miscellaneous Body Fluids	I/IO/P	42.00	13.07	5.60	Contact UH	Contact UH	Contact UH	13.07	5.60	5.60	39.90	6.44
112		73590	X-Ray, Lower Leg	I/IO/P	586.00	182.30	102.43	Contact UH	Contact UH	Contact UH	182.30	102.43	102.43	556.70	117.79
113		72170	X-Ray, Pelvis, 1-2 Views	I/IO/P	246.00	76.53	126.02	Contact UH	Contact UH	Contact UH	76.53	126.02	76.53	233.70	144.92
114		73070	X-Ray, Elbow	I/IO/P	586.00	182.30	102.43	Contact UH	Contact UH	Contact UH	182.30	102.43	102.43	556.70	117.79
115		72125	Ct Scan, Neck Spine Without Contrast	I/IO/P	1278.00	397.59	126.02	Contact UH	Contact UH	Contact UH	397.59	126.02	126.02	1214.10	144.92
116		73030	X-Ray, Shoulder	I/IO/P	586.00	182.30	102.43	Contact UH	Contact UH	Contact UH	182.30	102.43	102.43	556.70	117.79
117		73060	X-Ray, Humerus	I/IO/P	586.00	182.30	102.43	Contact UH	Contact UH	Contact UH	182.30	102.43	102.43	556.70	117.79
118		72100	X-Ray, Lumbar Spine, 2-3 Views	I/IO/P	451.00	140.31	126.02	Contact UH	Contact UH	Contact UH	140.31	126.02	126.02	428.45	144.92
119		73120	Hepatitis B Surface Antibody (Hbsab)	I/IO/P	336.00	104.53	126.02	Contact UH	Contact UH	Contact UH	104.53	126.02	104.53	319.20	144.92
120		73610	X-Ray, Ankle	I/IO/P	229.00	71.24	102.43	Contact UH	Contact UH	Contact UH	71.24	102.43	71.24	217.55	117.79
121		73110	X-Ray, Wrist	I/IO/P	347.00	107.95	102.43	Contact UH	Contact UH	Contact UH	107.95	102.43	102.43	329.65	117.79
122		73090	X-Ray, Forearm	I/IO/P	586.00	182.30	102.43	Contact UH	Contact UH	Contact UH	182.30	102.43	102.43	556.70	117.79
123		93312	Echocardiography, Transesophageal	I/IO/P	2710.00	843.08	593.21	Contact UH	Contact UH	Contact UH	843.08	593.21	593.21	2574.50	682.19
124		97140	Manual Therapy Techniques, 1 Or More Regions, Each 15 Minutes	I/IO/P	204.00	63.46	N/A	Contact UH	Contact UH	Contact UH	63.46	N/A	61.20	193.80	T.B.D
125		92611	Motion Fluoroscopic Evaluation Of Swallowing Function By Cine Or Video Recording	I/IO/P	969.00	301.46	N/A	Contact UH	Contact UH	Contact UH	301.46	N/A	290.70	920.55	T.B.D
126		73562	X-Ray, Knee, 3 Views	I/IO/P	246.00	76.53	102.43	Contact UH	Contact UH	Contact UH	76.53	102.43	76.53	233.70	117.79
127		96374	Therapeutic, Prophylactic, Or Diagnostic Injection; Intravenous Push, Single Or Initial Substance/Dr	I/IO/P	747.00	232.39	243.55	Contact UH	Contact UH	Contact UH	232.39	243.55	232.39	709.65	280.08
128		92950	Cardiopulmonary Resuscitation	I/IO/P	931.00	289.63	330.20	Contact UH	Contact UH	Contact UH	289.63	330.20	286.75	884.45	379.73
129		77386	Intensity Modulated Radiation Therapy Delivery Complex	I/IO/P	2316.00	720.51	674.97	Contact UH	Contact UH	Contact UH	720.51	674.97	674.97	2200.20	776.22
130		93990	Duplex Scan Of Hemodialysis Access	I/IO/P	634.33	126.02	126.02	Contact UH	Contact UH	Contact UH	634.33	126.02	126.02	1937.05	144.92
131		93926	Duplex Scan Of Lower Extremity Arteries Or Arterial Bypass Grafts; Unilateral Or Limited Study	I/IO/P	463.00	144.04	126.02	Contact UH	Contact UH	Contact UH	144.04	126.02	126.02	439.85	144.92
132		84703	Blood Test, Human Chorionic Gonadotropin (Hcg)	I/IO/P	68.00	3.00	7.52	Contact UH	Contact UH	Contact UH	3.00	7.52	3.00	64.60	8.65
133		93978	Duplex Scan Of Aorta, Inferior Vena Cava, Iliac Vasculature, Or Bypass Grafts; Complete Study	I/IO/P	728.00	226.48	275.33	Contact UH	Contact UH	Contact UH	226.48	275.33	226.48	691.60	316.63
134		93925	Duplex Scan Of Lower Extremity Arteries Or Arterial Bypass Grafts; Complete Bilateral Study	I/IO/P	728.00	226.48	275.33	Contact UH	Contact UH	Contact UH	226.48	275.33	226.48	691.60	316.63
135		90375	Rabies Immune Globulin (Rig)	I/IO/P	1454.00	452.34	335.65	Contact UH	Contact UH	Contact UH	452.34	335.65	278.24	1381.30	386.00
136		92587	Distortion Product Evoked Otoacoustic Emissions	I/IO/P	990.00	307.99	330.20	Contact UH	Contact UH	Contact UH	307.99	330.20	304.92	940.50	379.73
137		92134	Scanning Computerized Ophthalmic Diagnostic Imaging, Posterior Segment; Retina	OP	213.00	66.26	67.77	Contact UH	Contact UH	Contact UH	66.26	67.77	65.60	202.35	77.94
138		96411	Chemotherapy Administration; Intravenous, Push Technique, Each Additional Substance/Drug	OP	393.00	122.26	79.55	Contact UH	Contact UH	Contact UH	122.26	79.55	79.55	373.35	91.48

Notes:
Inpatient charges are not separately billable and are included in the DRG rate.
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Discounted prices that are not currently available are noted as T.B.D.
Prices not directly translated on a contract or service group are noted as Contact UH.

Shoppable		N/A		Location Provided	Description	Gross Charge	United Healthcare	United Healthcare	United HealthCare: Commercial	United HealthCare: Oxford	United HealthCare: PPO	Wellcare: Medicaid	Wellcare:	Minimum Negotiated Rate	Maximum Negotiated Rate	Discounted Cash Price
ID	Indicator	Billing Code					Community Plan: Medicaid	Community Plan: Medicare					Medicare			
139		82805	Blood Gasses With O2 Saturation	I/OP		480.00	8.00	78.77	Contact UH	Contact UH	Contact UH	8.00	78.77	8.00	456.00	90.59
140		94664	Demonstration And/Or Evaluation Of Patient Utilization Of An Aerosol Generator, Nebulizer, Metered	I/OP		765.00	237.99	225.79	Contact UH	Contact UH	Contact UH	237.99	225.79	225.79	726.75	259.66
141		94667	Manipulation Chest Wall	I/OP		388.00	120.71	136.90	Contact UH	Contact UH	Contact UH	120.71	136.90	120.71	368.60	157.44
142		94660	Continuous Positive Airway Pressure Ventilation (Cpap)	I/OP		632.00	196.62	225.79	Contact UH	Contact UH	Contact UH	196.62	225.79	196.62	600.40	259.66
143		95816	Electroencephalogram (Eeg)	I/OP		1007.00	313.28	330.20	Contact UH	Contact UH	Contact UH	313.28	330.20	313.28	956.65	379.73
144		96521	Refilling And Maintenance Of Portable Pump	I/OP		732.00	227.73	243.55	Contact UH	Contact UH	Contact UH	227.73	243.55	227.73	695.40	280.08
145		97597	Debridement	I/OP		683.00	212.48	212.91	Contact UH	Contact UH	Contact UH	212.48	212.91	212.48	648.85	244.85
146		90651	Hpv Vaccine	I/OP		625.00	194.44	N/A	Contact UH	Contact UH	Contact UH	194.44	N/A	187.50	593.75	T.B.D
147		96413	Chemotherapy Administration, Intravenous Infusion Technique; Up To 1 Hour	I/OP		1230.00	382.65	392.17	Contact UH	Contact UH	Contact UH	382.65	392.17	382.65	1168.50	451.00
148		92570	Acoustic Immittance Testing	OP		549.00	170.79	171.47	Contact UH	Contact UH	Contact UH	170.79	171.47	170.79	521.55	197.19
149		92133	Scanning Computerized Ophthalmic Diagnostic Imaging, Optic Nerve	OP		213.00	66.26	67.77	Contact UH	Contact UH	Contact UH	66.26	67.77	66.26	202.35	77.94
150		90675	Rabies Vaccine, For Intramuscular Use	I/OP		983.00	305.81	389.07	Contact UH	Contact UH	Contact UH	305.81	389.07	302.76	933.85	447.43
151		96417	Chemotherapy Administration, Intravenous Infusion Technique	I/OP		430.00	133.77	79.55	Contact UH	Contact UH	Contact UH	133.77	79.55	79.55	408.50	91.48
152		92083	Visual Field Examination	I/OP		388.00	120.71	136.90	Contact UH	Contact UH	Contact UH	120.71	136.90	120.71	368.60	157.44
153		92136	Ophthalmic Biometry	OP		427.00	132.84	136.90	Contact UH	Contact UH	Contact UH	132.84	136.90	132.84	405.65	157.44
154		96401	Chemotherapy Administration, Subcutaneous Or Intramuscular; Non-Hormonal Anti-Neoplastic	I/OP		1772.00	551.27	79.55	Contact UH	Contact UH	Contact UH	551.27	79.55	79.55	1683.40	91.48
155		96402	Chemotherapy Administration, Subcutaneous Or Intramuscular; Hormonal Anti-Neoplastic	OP		300.00	93.33	79.55	Contact UH	Contact UH	Contact UH	93.33	79.55	79.55	285.00	91.48
156		90734	Meningococcal Conjugate Vaccine	I/OP		535.00	166.44	N/A	Contact UH	Contact UH	Contact UH	166.44	N/A	160.50	508.25	T.B.D
157		96365	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis; Initial, Up To 1 Hour	I/OP		747.00	232.39	243.55	Contact UH	Contact UH	Contact UH	232.39	243.55	230.08	709.65	280.08
158		90396	Varicella-Zoster Immune Globulin, Human, For Intramuscular Use	OP		3088.00	960.68	2661.47	Contact UH	Contact UH	Contact UH	960.68	2661.47	960.68	4862.51	3060.69
159		90670	Pneumococcal Conjugate Vaccine, 13 Valent (Pcv13), For Intramuscular Use	I/OP		586.00	182.30	257.99	Contact UH	Contact UH	Contact UH	182.30	257.99	175.80	556.70	296.69
160		77336	Continuing Medical Physics Consultation	I/OP		1419.00	441.45	157.26	Contact UH	Contact UH	Contact UH	441.45	157.26	157.26	1348.05	180.85
161		92602	Diagnostic Analysis Of Cochlear Implant, Patient Younger Than 7 Yrs Of Age; Subsequent Reprog	OP		897.00	279.06	171.47	Contact UH	Contact UH	Contact UH	279.06	171.47	171.47	852.15	197.19
162		92025	Computerized Corneal Topography	OP		213.00	66.26	67.77	Contact UH	Contact UH	Contact UH	66.26	67.77	66.26	202.35	77.94
163		93923	Complete Bilateral Noninvasive Physiologic Studies Of Upper Or Lower Extremity Arteries, 3 Or Mon	I/OP		1441.00	448.30	171.47	Contact UH	Contact UH	Contact UH	448.30	171.47	171.47	1368.95	197.19
164		82948	Glucose Test	I/OP		42.00	13.07	5.04	Contact UH	Contact UH	Contact UH	13.07	5.04	5.04	39.90	5.80
165		94150	Vital Capacity, Total (Separate Procedure)	I/OP		549.00	170.79	171.47	Contact UH	Contact UH	Contact UH	170.79	171.47	170.79	521.55	197.19
166		94060	Bronchodilation Responsiveness	I/OP		636.00	197.86	330.20	Contact UH	Contact UH	Contact UH	197.86	330.20	195.89	604.20	379.73
167		90732	Pneumococcal Polysaccharide Vaccine	I/OP		120.00	37.33	133.47	Contact UH	Contact UH	Contact UH	37.33	133.47	36.00	153.49	153.49
168		92584	Electrocochleography	OP		904.00	281.23	171.47	Contact UH	Contact UH	Contact UH	281.23	171.47	171.47	858.80	197.19
169		92550	Tympanometry And Reflex Threshold Measurements	OP		549.00	170.79	171.47	Contact UH	Contact UH	Contact UH	170.79	171.47	170.79	521.55	197.19
170		92626	Evaluation Of Auditory Function, First Hour	OP		645.00	200.66	171.47	Contact UH	Contact UH	Contact UH	200.66	171.47	171.47	612.75	197.19
171		92579	Visual Reinforcement Audiometry (Vra)	I/OP		549.00	170.79	171.47	Contact UH	Contact UH	Contact UH	170.79	171.47	170.79	521.55	197.19
172		92582	Conditioning Play Audiometry	OP		892.00	277.50	171.47	Contact UH	Contact UH	Contact UH	277.50	171.47	171.47	847.40	197.19
173		90686	Influenza Virus Vaccine	I/OP		81.00	25.20	21.52	Contact UH	Contact UH	Contact UH	25.20	21.52	21.52	76.95	24.75
174		92604	Diagnostic Analysis Of Cochlear Implant, Age 7 Yrs Or Older	OP		587.00	182.62	171.47	Contact UH	Contact UH	Contact UH	182.62	171.47	171.47	557.65	197.19
175		90715	Tetanus, Diphtheria Toxoids And Acellular Pertussis Vaccine (Tdap), 7 Years+	I/OP		168.00	52.26	37.50	Contact UH	Contact UH	Contact UH	52.26	37.50	37.50	159.60	43.12
176		86901	Blood Typing Rhd	I/OP		137.00	42.62	2.99	Contact UH	Contact UH	Contact UH	42.62	2.99	2.99	130.15	3.44
177		93922	Limited Bilateral Noninvasive Physiologic Studies Of Upper Or Lower Extremity Arteries	I/OP		845.00	262.88	136.90	Contact UH	Contact UH	Contact UH	262.88	136.90	136.90	802.75	157.44
178		36415	Routine Venipuncture	I/OP		58.00	1.80	8.57	Contact UH	Contact UH	Contact UH	1.80	8.57	1.80	55.10	9.86
179		92610	Evaluation Of Oral And Pharyngeal Swallowing Function	I/OP		251.00	78.09	N/A	Contact UH	Contact UH	Contact UH	78.09	N/A	75.30	238.45	T.B.D
180		92522	Evaluation Of Speech Sound Production	I/OP		551.00	171.42	N/A	Contact UH	Contact UH	Contact UH	171.42	N/A	165.30	523.45	T.B.D
181		93880	Duplex Scan Of Extracranial Arteries; Complete Bilateral Study	I/OP		918.00	285.59	275.33	Contact UH	Contact UH	Contact UH	285.59	275.33	275.33	872.10	316.63
182		97802	Medical Nutrition Therapy	OP		490.00	152.44	N/A	Contact UH	Contact UH	Contact UH	152.44	N/A	147.00	465.50	T.B.D
183		86703	Antibody; Hiv-1 And Hiv-2, Single Result	I/OP		54.00	18.00	13.71	Contact UH	Contact UH	Contact UH	18.00	13.71	13.71	51.30	15.77
184		93970	Duplex Scan Of Extremity Veins; Complete Bilateral Study	I/OP		2244.00	698.11	275.33	Contact UH	Contact UH	Contact UH	698.11	275.33	275.33	2131.80	316.63
185		96376	Therapeutic, Prophylactic, Or Diagnostic Injection Sequential Intravenous Push Of The Same Subst	I/OP		205.00	63.78	N/A	Contact UH	Contact UH	Contact UH	63.78	N/A	61.50	194.75	T.B.D
186		90744	Hepatitis B Vaccine (Hepb), Pediatric/Adolescent Dosage, 3 Dose Schedule	I/OP		166.00	51.64	29.90	Contact UH	Contact UH	Contact UH	51.64	29.90	29.90	157.70	34.38
187		93971	Duplex Scan Of Extremity Veins; Unilateral Or Limited Study	I/OP		463.00	144.04	126.02	Contact UH	Contact UH	Contact UH	144.04	126.02	126.02	439.85	144.92
188		90471	Immunization Administration	I/OP		236.00	73.42	79.55	Contact UH	Contact UH	Contact UH	73.42	79.55	73.42	224.20	91.48
189		90632	Hepatitis A Vaccine (Hepa), Adult Dosage, For Intramuscular Use	I/OP		217.00	67.51	70.17	Contact UH	Contact UH	Contact UH	67.51	70.17	65.10	206.15	80.69
190		99153	Mod Sedation Services Provided By The Same Physician	OP		253.00	78.71	N/A	Contact UH	Contact UH	Contact UH	78.71	N/A	75.90	240.35	T.B.D
191		93303	Trans thoracic Echocardiography	I/OP		2710.00	843.08	593.21	Contact UH	Contact UH	Contact UH	843.08	593.21	593.21	2574.50	682.19
192		73552	X-Ray, Femur, 2 Views	I/OP		269.00	83.69	102.43	Contact UH	Contact UH	Contact UH	83.69	102.43	83.69	255.55	117.79
193		96372	Therapeutic, Prophylactic, Or Diagnostic Injection; Subcutaneous Or Intramuscular	I/OP		182.00	56.62	79.55	Contact UH	Contact UH	Contact UH	56.62	79.55	56.62	172.90	91.48
194		95851	Range Of Motion Measurements And Report	I/OP		112.00	34.84	N/A	Contact UH	Contact UH	Contact UH	34.84	N/A	33.60	106.40	T.B.D
195		77300	Basic Radiation Dosimetry Calculation	I/OP		639.00	198.79	157.26	Contact UH	Contact UH	Contact UH	198.79	157.26	157.26	607.05	180.85
196		96366	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis, Each Additional Hour	I/OP		251.00	78.09	49.96	Contact UH	Contact UH	Contact UH	78.09	49.96	49.96	238.45	57.45
197		94761	Noninvasive Ear Or Pulse Oximetry For Oxygen Saturation; Multiple Determinations	I/OP		371.00	115.42	N/A	Contact UH	Contact UH	Contact UH	115.42	N/A	111.30	352.45	T.B.D
198		94640	Inhalation Therapy	I/OP		632.00	196.62	225.79	Contact UH	Contact UH	Contact UH	196.62	225.79	196.62	600.40	259.66
199		77412	Radiation Therapy Delivery	I/OP		886.00	275.63	310.00	Contact UH	Contact UH	Contact UH	275.63	310.00	275.63	841.70	356.50
200		77063	Screening Digital Breast Tomosynthesis, Bilateral	I/OP		515.00	160.22	N/A	Contact UH	Contact UH	Contact UH	160.22	N/A	154.50	489.25	T.B.D
201		87591	Infectious Agent Detection, Neisseria Gonorrhoeae	I/OP		160.00	38.00	35.09	Contact UH	Contact UH	Contact UH	38.00	35.09	35.09	152.00	40.35
202		97535	Self-Care/Home Management Training	I/OP		204.00	63.46	N/A	Contact UH	Contact UH	Contact UH	63.46	N/A	61.20	193.80	T.B.D
203		70551	Mri, Brain Without Contrast	I/OP		5904.00	1836.73	275.33	Contact UH	Contact UH	Contact UH	1836.73	275.33	275.33	5608.80	316.63
204		97162	Physical Therapy Evaluation, Complex, 30 Minutes	I/OP		371.00	115.42	N/A	Contact UH	Contact UH	Contact UH	115.42	N/A	111.30	352.45	T.B.D
205		92507	Therapy Speech And/Or Auditory	I/OP		184.00	57.24	N/A	Contact UH	Contact UH	Contact UH	57.24	N/A	55.20	174.80	T.B.D
206		92612	Flexible Endoscopic Evaluation Of Swallowing By Cine Or Video Recording	I/OP		930.00	289.32	N/A	Contact UH	Contact UH	Contact UH	289.32	N/A	279.00	883.50	T.B.D
207		71250	Ct Scan, Thorax Without Contrast	I/OP		1001.00	311.41	126.02	Contact UH	Contact UH	Contact UH	311.41	126.02	126.02	950.95	144.92

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Shoppable		N/A	Billing Code	Description	Location Provided	Gross Charge	United Healthcare	United Healthcare	United HealthCare: Commercial	United HealthCare: Oxford	United HealthCare: PPO	Wellcare: Medicaid	Wellcare:	Minimum Negotiated Rate	Maximum Negotiated Rate	Discounted Cash Price
ID	Indicator						Community Plan: Medicaid	Community Plan: Medicare					Medicare			
208		76705	Ultrasound Of Abdomen, Limited		I/IO/P	762.00	237.06	126.02	Contact UH	Contact UH	Contact UH	237.06	126.02	126.02	723.90	144.92
209		95813	Electroencephalogram (Eeg) Extended Monitoring; 61-119 Minutes		I/IO/P	795.00	247.32	330.20	Contact UH	Contact UH	Contact UH	247.32	330.20	244.86	755.25	379.73
210		93005	Electrocardiogram		I/IO/P	232.00	72.18	67.77	Contact UH	Contact UH	Contact UH	72.18	67.77	67.77	220.40	77.94
211		95819	Electroencephalogram (Eeg)		I/IO/P	1007.00	313.28	330.20	Contact UH	Contact UH	Contact UH	313.28	330.20	313.28	956.65	379.73
212		94727	Gas Dilution		I/IO/P	549.00	170.79	171.47	Contact UH	Contact UH	Contact UH	170.79	171.47	169.09	521.55	197.19
213		94760	Noninvasive Ear Or Pulse Oximetry For Oxygen Saturation		I/IO/P	132.00	41.07	N/A	Contact UH	Contact UH	Contact UH	41.07	N/A	39.60	125.40	T.B.D
214		94644	Continuous Inhalation Therapy With Aerosol Medication For Acute Airway Obstruction; First Hour		I/IO/P	388.00	120.71	136.90	Contact UH	Contact UH	Contact UH	120.71	136.90	120.71	368.60	157.44
215		94645	Continuous Inhalation Therapy With Aerosol Medication For Acute Airway Obstruction; Each Additional Hour		I/IO/P	398.00	123.82	N/A	Contact UH	Contact UH	Contact UH	123.82	N/A	119.40	378.10	T.B.D
216		94003	Ventilation Assist And Management; Hospital Inpatient/Observation, Each Subsequent Day		I/IO/P	969.00	301.46	656.40	Contact UH	Contact UH	Contact UH	301.46	656.40	301.46	1199.24	754.86
217		94002	Ventilation Assist And Management; Hospital Inpatient/Observation, Initial Day		I/IO/P	1918.00	596.69	656.40	Contact UH	Contact UH	Contact UH	596.69	656.40	596.69	1822.10	754.86
218		94681	Oxygen Uptake, Expired Gas Analysis		I/IO/P	931.00	289.63	330.20	Contact UH	Contact UH	Contact UH	289.63	330.20	289.63	884.45	379.73
219		94010	Spirometry		I/IO/P	549.00	170.79	171.47	Contact UH	Contact UH	Contact UH	170.79	171.47	170.79	521.55	197.19
220		93888	Transcranial Doppler Study Of The Intracranial Arteries; Limited Study		I/IO/P	862.00	268.17	126.02	Contact UH	Contact UH	Contact UH	268.17	126.02	126.02	818.90	144.92
221		77417	Therapeutic Radiology Port Image(S)		I/IO/P	371.00	115.42	N/A	Contact UH	Contact UH	Contact UH	115.42	N/A	111.30	352.45	T.B.D
222		94729	Diffusing Capacity		I/IO/P	371.00	115.42	N/A	Contact UH	Contact UH	Contact UH	115.42	N/A	111.30	352.45	T.B.D
223		77085	Bone Density Study, Dual-Energy X-Ray Absorptiometry		I/IO/P	424.00	131.91	126.02	Contact UH	Contact UH	Contact UH	131.91	126.02	126.02	402.80	144.92
224		77334	Therapy Devices, Design And Construction; Complex		I/IO/P	1429.00	444.56	422.95	Contact UH	Contact UH	Contact UH	444.56	422.95	422.95	1357.55	486.39
225		94668	Manipulation Of Chest Wall		I/IO/P	239.00	74.35	136.90	Contact UH	Contact UH	Contact UH	74.35	136.90	74.35	250.12	157.44
226		87536	Infectious Agent Detection; Hiv-1, Quant		I/IO/P	867.00	92.87	85.10	Contact UH	Contact UH	Contact UH	92.87	85.10	85.10	823.65	97.87
227		95951	Eeg Monitoring, Video Recording		I/IO/P	4272.00	1329.02	N/A	Contact UH	Contact UH	Contact UH	1329.02	N/A	1281.60	4058.40	T.B.D
228		76642	Ultrasound Of Breast		I/IO/P	422.00	131.28	102.43	Contact UH	Contact UH	Contact UH	131.28	102.43	102.43	400.90	117.79
229		96360	Intravenous Infusion, Hydration; Initial, 31 Minutes To 1 Hour		I/IO/P	599.00	186.35	243.55	Contact UH	Contact UH	Contact UH	186.35	243.55	186.35	569.05	280.08
230		93458	Catheter Placement In Coronary Artery(S) For Coronary Angiography		I/IO/P	13982.00	4349.80	3488.14	Contact UH	Contact UH	Contact UH	4349.80	3488.14	3488.14	13282.90	4011.36
231		76770	Ultrasound Of Retroperitoneal, Complete		I/IO/P	488.00	151.82	126.02	Contact UH	Contact UH	Contact UH	151.82	126.02	126.02	463.60	144.92
232		93975	Vascular Study		I/IO/P	871.00	270.97	275.33	Contact UH	Contact UH	Contact UH	270.97	275.33	270.97	827.45	316.63
233		76536	Ultrasound Of Head And Neck		I/IO/P	762.00	237.06	126.02	Contact UH	Contact UH	Contact UH	237.06	126.02	126.02	723.90	144.92
234		76775	Ultrasound Of Retroperitoneal, Limited		I/IO/P	488.00	151.82	126.02	Contact UH	Contact UH	Contact UH	151.82	126.02	126.02	463.60	144.92
235		74018	X-Ray, Abdomen		I/IO/P	256.00	79.64	102.43	Contact UH	Contact UH	Contact UH	79.64	102.43	78.85	243.20	117.79
236		86900	Blood Typing Abo		I/IO/P	250.00	77.78	2.99	Contact UH	Contact UH	Contact UH	77.78	2.99	2.99	250.12	3.44
237		87186	Susceptibility Studies, Antimicrobial Agent		I/IO/P	368.00	11.00	8.65	Contact UH	Contact UH	Contact UH	11.00	8.65	8.65	349.60	9.95
238		96375	Therapeutic, Prophylactic, Or Diagnostic Injection; Sequential Intravenous Push Of A New Substance		I/IO/P	212.00	65.95	49.96	Contact UH	Contact UH	Contact UH	65.95	49.96	49.96	201.40	57.45
239		86923	Compatibility Test Each Unit; Electronic		I/IO/P	455.00	12.00	185.40	Contact UH	Contact UH	Contact UH	12.00	185.40	12.00	432.25	213.21
240		86920	Compatibility Test Each Unit; Immediate Spin Technique		I/IO/P	437.00	135.95	185.40	Contact UH	Contact UH	Contact UH	135.95	185.40	135.95	415.15	213.21
241		99152	Mod Sedation Services Provided By The Same Physician		OP	290.00	90.22	N/A	Contact UH	Contact UH	Contact UH	90.22	N/A	87.00	275.50	T.B.D
242		97161	Physical Therapy Evaluation: Low Complexity 20 Minutes		I/IO/P	204.00	63.46	N/A	Contact UH	Contact UH	Contact UH	63.46	N/A	61.20	193.80	T.B.D
243		71046	C-Reactive Protein;		I/IO/P	256.00	79.64	102.43	Contact UH	Contact UH	Contact UH	79.64	102.43	79.64	243.20	117.79
244		87040	Culture, Bacterial, Blood		I/IO/P	89.00	27.69	10.32	Contact UH	Contact UH	Contact UH	27.69	10.32	10.32	84.55	11.87
245		97165	Occupational Therapy Evaluation, Low Complexity, 30 Minutes		I/IO/P	204.00	63.46	N/A	Contact UH	Contact UH	Contact UH	63.46	N/A	61.20	193.80	T.B.D
246		97166	Occupational Therapy Evaluation, Mod Complexity 45 Minutes		I/IO/P	371.00	115.42	N/A	Contact UH	Contact UH	Contact UH	115.42	N/A	111.30	352.45	T.B.D
247		73502	X-Ray, Hip, 2-3 Views		I/IO/P	269.00	83.69	102.43	Contact UH	Contact UH	Contact UH	83.69	102.43	83.69	255.55	117.79
248		86850	Antibody Screen, Rbc, Each Serum Technique		I/IO/P	173.00	53.82	9.77	Contact UH	Contact UH	Contact UH	53.82	9.77	9.77	164.35	11.24
249		72040	X-Ray, Neck, Spine, 2-3 Views		I/IO/P	251.00	78.09	102.43	Contact UH	Contact UH	Contact UH	78.09	102.43	77.31	238.45	117.79
250		80307	Drug Tests		I/IO/P	94.00	29.24	62.14	Contact UH	Contact UH	Contact UH	29.24	62.14	28.20	89.30	71.46
251		83690	Blood Test, Lipase		I/IO/P	57.00	4.50	6.89	Contact UH	Contact UH	Contact UH	4.50	6.89	4.50	54.15	7.92
252		82550	Blood Test, Creatine Kinase (Ck)		I/IO/P	47.00	4.80	6.51	Contact UH	Contact UH	Contact UH	4.80	6.51	4.80	44.65	7.49
253		93306	Echocardiography, With Doppler		I/IO/P	1949.00	606.33	593.21	Contact UH	Contact UH	Contact UH	606.33	593.21	593.21	1851.55	682.19
254		97018	Application Of A Modality To 1 Or More Areas; Paraffin Bath		OP	112.00	34.84	N/A	Contact UH	Contact UH	Contact UH	34.84	N/A	33.60	106.40	T.B.D
255		77002	X-Ray, Guidance Of Needle Placement		I/IO/P	871.00	270.97	N/A	Contact UH	Contact UH	Contact UH	270.97	N/A	261.30	827.45	T.B.D
256		96361	Intravenous Infusion, Hydration; Each Additional Hour		I/IO/P	307.00	95.51	49.96	Contact UH	Contact UH	Contact UH	95.51	49.96	49.96	291.65	57.45
257		71045	X-Ray, Chest, 1 View		I/IO/P	256.00	79.64	102.43	Contact UH	Contact UH	Contact UH	79.64	102.43	79.64	243.20	117.79
258		92526	Therapy Swallowing Dysfunction And/Or Oral Function For Feeding		I/IO/P	184.00	57.24	N/A	Contact UH	Contact UH	Contact UH	57.24	N/A	55.20	174.80	T.B.D
259		97129	Therapeutic Interventions, 15 Minutes		I/IO/P	184.00	57.24	N/A	Contact UH	Contact UH	Contact UH	57.24	N/A	55.20	174.80	T.B.D
260		82248	Bilirubin; Direct		I/IO/P	48.00	4.50	5.02	Contact UH	Contact UH	Contact UH	4.50	5.02	4.50	45.60	5.77
261		86706	Hepatitis B Surface Antibody		I/IO/P	94.00	12.00	10.74	Contact UH	Contact UH	Contact UH	12.00	10.74	10.74	89.30	12.35
262		83036	Hemoglobin; Glycosylated (A1C)		I/IO/P	59.00	6.60	9.71	Contact UH	Contact UH	Contact UH	6.60	9.71	6.60	56.05	11.17
263		97164	Re-Evaluation Of Physical Therapy Established Plan Of Care		I/IO/P	204.00	63.46	N/A	Contact UH	Contact UH	Contact UH	63.46	N/A	61.20	193.80	T.B.D
264		97150	Therapeutic Procedure, Group		I/IO/P	204.00	63.46	N/A	Contact UH	Contact UH	Contact UH	63.46	N/A	61.20	193.80	T.B.D
265		97112	Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes		I/IO/P	149.00	46.35	N/A	Contact UH	Contact UH	Contact UH	46.35	N/A	44.70	141.55	T.B.D
266		97760	Orthotic(S) Management And Training		I/IO/P	157.00	48.84	N/A	Contact UH	Contact UH	Contact UH	48.84	N/A	47.10	149.15	T.B.D
267		93454	Catheter Placement In Coronary Artery(S) For Coronary Angiography		I/IO/P	13982.00	4349.80	3488.14	Contact UH	Contact UH	Contact UH	4349.80	3488.14	3488.14	13282.90	4011.36
268		84702	Gonadotropin, Chorionic (Hcg); Quantitative		I/IO/P	54.00	11.39	15.05	Contact UH	Contact UH	Contact UH	11.39	15.05	11.39	51.30	17.31
269		97163	Physical Therapy Evaluation: High Complexity		I/IO/P	728.00	226.48	N/A	Contact UH	Contact UH	Contact UH	226.48	N/A	218.40	691.60	T.B.D
270		97530	Therapeutic Activities		I/IO/P	204.00	63.46	N/A	Contact UH	Contact UH	Contact UH	63.46	N/A	61.20	193.80	T.B.D
271		97168	Re-Evaluation Of Occupational Therapy Established Plan Of Care		I/IO/P	204.00	63.46	N/A	Contact UH	Contact UH	Contact UH	63.46	N/A	61.20	193.80	T.B.D
272		87086	Culture, Bacterial, Urine		I/IO/P	83.00	6.00	8.07	Contact UH	Contact UH	Contact UH	6.00	8.07	6.00	78.85	9.28
273		87150	Culture Typing, Dna/Rna Probe		I/IO/P	2808.00	873.57	35.09	Contact UH	Contact UH	Contact UH	873.57	35.09	35.09	2667.60	40.35
274		72070	X-Ray, Thoracic Spine, 2 Views		I/IO/P	239.00	74.35	126.02	Contact UH	Contact UH	Contact UH	74.35	126.02	74.35	230.24	144.92
275		93798	Cardiac Rehabilitation With Ecg Monitor		I/IO/P	396.00	123.20	141.57	Contact UH	Contact UH	Contact UH	123.20	141.57	121.97	376.20	162.81
276		73564	X-Ray, Knee, 4 Or More Views		I/IO/P	230.00	71.55	126.02	Contact UH	Contact UH	Contact UH	71.55	126.02	71.55	230.24	144.92

Notes:
Inpatient charges are not separately billable and are included in the DRG rate.
The gross charges for the DRG based billing codes are average charge per case.
Discounted prices that are not currently available are noted as T.B.D.
Prices not directly translated on a contract or service group are noted as Contact UH.

Shoppable		N/A				United Healthcare		United Healthcare																	
ID	Indicator	Billing Code	Description	Location Provided	Gross Charge	Community Plan: Medicaid	Community Plan: Medicare	Commercial	Oxford	PPO	Wellcare: Medicaid	Wellcare: Medicare	Minimum Negotiated Rate	Maximum Negotiated Rate	Discounted Cash Price										
277		93350	Echocardiography, Transthoracic	I/OP	1949.00	606.33	593.21	Contact UH	Contact UH	Contact UH	606.33	593.21	593.21	1851.55	682.19										
278		97116	Therapeutic Procedure, Gait Training	I/OP	303.00	94.26	N/A	Contact UH	Contact UH	Contact UH	94.26	N/A	90.90	287.85	T.B.D										
279		92523	Evaluation Of Speech Sound Production	I/OP	551.00	171.42	N/A	Contact UH	Contact UH	Contact UH	171.42	N/A	165.30	523.45	T.B.D										
280		83540	Blood Test, Iron	I/OP	40.00	4.50	6.47	Contact UH	Contact UH	Contact UH	4.50	6.47	4.50	38.00	7.44										
281		84439	Blood Test, Free T4	I/OP	81.00	10.00	9.02	Contact UH	Contact UH	Contact UH	10.00	9.02	9.02	76.95	10.37										
282		82728	Blood Test, Ferritin	I/OP	119.00	37.02	13.63	Contact UH	Contact UH	Contact UH	37.02	13.63	13.63	113.05	15.67										
283		93308	Echocardiography, Transthoracic, Follow-Up Or Limited Study	I/OP	1147.00	356.83	275.33	Contact UH	Contact UH	Contact UH	356.83	275.33	275.33	1089.65	316.63										
284		86592	Syphilis Test	I/OP	46.00	1.50	4.27	Contact UH	Contact UH	Contact UH	1.50	4.27	1.50	43.70	4.91										
285		83605	Blood Test, Lactic Acid	I/OP	51.00	13.50	11.57	Contact UH	Contact UH	Contact UH	13.50	11.57	11.57	48.45	13.31										
286		84100	Blood Test, Phosphorus	I/OP	47.00	14.62	4.74	Contact UH	Contact UH	Contact UH	14.62	4.74	4.74	44.65	5.45										
287		93017	Cardiovascular Stress Test	I/OP	1115.00	346.88	330.20	Contact UH	Contact UH	Contact UH	346.88	330.20	330.20	1059.25	379.73										
288		76856	Ultrasound Of Pelvis	I/OP	476.00	148.08	126.02	Contact UH	Contact UH	Contact UH	148.08	126.02	126.02	452.20	144.92										
289		70496	Ct Scan, Head Or Brain	I/OP	2389.00	743.22	212.63	Contact UH	Contact UH	Contact UH	743.22	212.63	212.63	2289.55	244.52										
290		74170	Ct Scan, Abdomen With And Without Contrast	I/OP	4475.00	1392.17	212.63	Contact UH	Contact UH	Contact UH	1392.17	212.63	212.63	4251.25	244.52										
291		70486	Ct Scan, Maxillofacial Without Contrast	I/OP	1126.00	350.30	126.02	Contact UH	Contact UH	Contact UH	350.30	126.02	126.02	1069.70	144.92										
292		71260	Ct Scan, Thorax With Contrast	I/OP	1545.00	480.65	212.63	Contact UH	Contact UH	Contact UH	480.65	212.63	212.63	1467.75	244.52										
293		88341	Immunohistochemistry Or Immunocytochemistry, Per Specimen	I/OP	157.00	76.14	N/A	Contact UH	Contact UH	Contact UH	76.14	N/A	47.10	149.15	T.B.D										
294		87077	Culture, Bacterial; Aerobic Isolate	I/OP	76.00	9.00	8.08	Contact UH	Contact UH	Contact UH	9.00	8.08	8.08	72.20	9.29										
295		76937	Ultrasound Guided Vascular Access	I/OP	575.00	178.88	N/A	Contact UH	Contact UH	Contact UH	178.88	N/A	172.50	546.25	T.B.D										
296		77001	Fluoroscopic Guidance For Vein Dvc	I/OP	468.00	145.59	N/A	Contact UH	Contact UH	Contact UH	145.59	N/A	140.40	444.60	T.B.D										
297		83615	Lactate Dehydrogenase (Ld), (Ldh)	I/OP	57.00	17.73	6.04	Contact UH	Contact UH	Contact UH	17.73	6.04	6.04	54.15	6.95										
298		85652	Sedimentation Rate, Erythrocyte, Automated	I/OP	24.00	7.47	2.70	Contact UH	Contact UH	Contact UH	7.47	2.70	2.70	22.80	3.11										
299		82306	Gonadotropin, Chorionic (Hcg); Quantitative	I/OP	171.00	30.00	29.60	Contact UH	Contact UH	Contact UH	30.00	29.60	29.60	162.45	34.04										
300		86803	Hepatitis C Antibody	I/OP	122.00	37.95	14.27	Contact UH	Contact UH	Contact UH	37.95	14.27	14.27	115.90	16.41										
301		80202	Blood Test, Vancomycin	I/OP	100.00	31.11	13.54	Contact UH	Contact UH	Contact UH	31.11	13.54	13.54	95.00	15.57										
302		86704	Hepatitis B Core Antibody (Hbcab); Total	I/OP	110.00	15.00	12.05	Contact UH	Contact UH	Contact UH	15.00	12.05	12.05	104.50	13.86										
303		84484	Blood Test, Troponin	I/OP	79.00	9.51	12.47	Contact UH	Contact UH	Contact UH	9.51	12.47	9.51	75.05	14.34										
304		84145	Procalcitonin (Pct)	I/OP	566.00	21.78	27.22	Contact UH	Contact UH	Contact UH	21.78	27.22	21.78	537.70	31.30										
305		86140	C-Reactive Protein	I/OP	36.00	11.20	5.18	Contact UH	Contact UH	Contact UH	11.20	5.18	5.18	34.20	5.96										
306		87340	Infectious Agent Antigen Detection, Hep B	I/OP	93.00	28.93	10.33	Contact UH	Contact UH	Contact UH	28.93	10.33	10.33	88.35	11.88										
307		84132	Blood Test, Potatssium	I/OP	27.00	8.40	4.76	Contact UH	Contact UH	Contact UH	8.40	4.76	4.76	25.65	5.47										
308		88305	Level Iv - Surgical Pathology, Gross And Microscopic Examination	I/OP	109.00	33.91	59.12	Contact UH	Contact UH	Contact UH	33.91	59.12	33.57	108.01	67.99										
309		83550	Iron Binding Capacity	I/OP	28.00	8.71	8.74	Contact UH	Contact UH	Contact UH	8.71	8.74	8.40	26.60	10.05										
310		87389	Infectious Agent Antigen Detection, With Hiv	I/OP	102.00	19.26	24.08	Contact UH	Contact UH	Contact UH	19.26	24.08	19.26	96.90	27.69										
311		84295	Blood Test, Sodium	I/OP	28.00	3.90	4.81	Contact UH	Contact UH	Contact UH	3.90	4.81	3.90	26.60	5.53										
312		83880	Blood Test, B-Type Natriuretic Peptide (Bnp)	I/OP	157.00	37.94	39.26	Contact UH	Contact UH	Contact UH	37.94	39.26	37.94	149.15	45.15										
313		82570	Blood Test, Creatine Urine	I/OP	53.00	3.00	5.18	Contact UH	Contact UH	Contact UH	3.00	5.18	3.00	50.35	5.96										
314		82247	Bilirubin; Total	I/OP	48.00	3.00	5.02	Contact UH	Contact UH	Contact UH	3.00	5.02	3.00	45.60	5.77										
315		88185	Flow Cytometry, Cell Surface, Cytoplasmic, Or Nuclear Marker, Technical Component Only	I/OP	66.00	19.25	N/A	Contact UH	Contact UH	Contact UH	19.25	N/A	19.25	62.70	T.B.D										
316		87070	Culture, Bacterial; Any Other Source Except Urine, Blood, Stool Or Aerobic	I/OP	157.00	9.00	8.62	Contact UH	Contact UH	Contact UH	9.00	8.62	8.62	149.15	9.91										
317		87205	Smear, Primary Source With Interpretation; Gram Or Giemsa Stain For Bacteria, Fungi, Or Cell Type	I/OP	41.00	4.20	4.27	Contact UH	Contact UH	Contact UH	4.20	4.27	4.20	38.95	4.91										
318		85007	Blood Count	I/OP	21.00	2.40	3.80	Contact UH	Contact UH	Contact UH	2.40	3.80	2.40	19.95	4.37										
319		87081	Culture, Presumptive, Pathogenic Organisms, Screening Only	I/OP	86.00	9.00	6.63	Contact UH	Contact UH	Contact UH	9.00	6.63	6.63	81.70	7.62										
320		74176	Ct Scan, Abdomen And Pelvis Without Contrast	I/OP	1001.00	311.41	275.33	Contact UH	Contact UH	Contact UH	311.41	275.33	275.33	950.95	316.63										
321		82435	Blood Test, Chloride	I/OP	27.00	8.40	4.60	Contact UH	Contact UH	Contact UH	8.40	4.60	4.60	25.65	5.29										