

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	Aetna Health Plan:		Aetna Health Plan:		Aetna Health Plan:		Devon Health		Amerihealth: HMO and		Amerihealth:		Consumer Health		Correctional Medical		Coventry Health Care	
ID	Indicator	Billing Code	Description		Provided	Gross Charge	Better Health	Commercial	Medicare	Americare)	Amerigroup	PPO	Medicare	Network: PPO	Services, In.	(FKA CCN and	FirstHealth)						
1		85027	Complete Blood Count, Automated		IP/OP	32.00	8.31	12.16	6.47	24.00	8.89	Contact UH	6.47	30.40	25.60	22.40							
2		80053	Blood Test, Comprehensive Group Of Blood Chemicals		IP/OP	51.00	13.24	19.38	10.56	38.25	14.17	Contact UH	10.56	48.45	40.80	35.70							
3		80061	Blood Test, Lipids (Cholesterol And Triglycerides)		IP/OP	119.00	30.90	45.22	13.39	89.25	33.06	Contact UH	13.39	113.05	95.20	83.30							
4		84153	Psa (Prostate Specific Antigen)		IP/OP	156.00	40.51	59.28	18.39	117.00	43.34	Contact UH	18.39	148.20	124.80	109.20							
5		80076	Liver Function Blood Test Panel		IP/OP	66.00	17.14	25.08	8.17	49.50	18.33	Contact UH	8.17	62.70	52.80	46.20							
6		70450	Ct Scan, Head Or Brain, Without Contrast		IP/OP	2425.00	629.77	184.41	131.72	1818.75	673.67	Contact UH	131.72	2303.75	1940.00	1697.50							
7		74177	Ct Scan Of Abdomen And Pelvis With Contrast		IP/OP	1500.00	389.55	623.77	445.55	1125.00	416.70	Contact UH	445.55	1425.00	1200.00	1050.00							
8		81001	Manual Urinalysis Test With Examination Using Microscope		IP/OP	34.00	8.83	12.92	3.17	25.50	9.45	Contact UH	3.17	32.30	27.20	23.80							
9		76830	Ultrasound Pelvis Through Vagina		IP/OP	462.00	119.98	184.41	131.72	346.50	128.34	Contact UH	131.72	438.90	369.60	323.40							
10		62323	Injection Of Substance Into Spinal Canal Of Lower Back Or Sacrum Using Imaging Guidance		IP/OP	2311.00	600.17	1075.61	768.29	1733.25	642.00	Contact UH	768.29	2195.45	1848.80	1617.70							
11		85610	Blood Test, Clotting Time		IP/OP	41.00	10.65	15.58	4.29	30.75	11.39	Contact UH	4.29	38.95	32.80	28.70							
12		85730	Coagulation Assessment Blood Test		IP/OP	49.00	12.73	18.62	6.01	36.75	13.61	Contact UH	6.01	46.55	39.20	34.30							
13		80048	Basic Metabolic Panel		IP/OP	63.00	16.36	23.94	8.46	47.25	17.50	Contact UH	8.46	59.85	50.40	44.10							
14		72193	Ct Scan, Pelvis, With Contrast		IP/OP	1621.00	420.97	302.57	216.12	1215.75	450.31	Contact UH	216.12	1539.95	1296.80	1134.70							
15		93452	Insertion Of Catheter Into Left Heart For Diagnosis		OP	13574.00	3525.17	4911.83	3508.45	10180.50	3770.86	Contact UH	3508.45	12895.30	10859.20	9501.80							
16		76700	Ultrasound Of Abdomen		IP/OP	473.00	122.84	184.41	131.72	354.75	131.40	Contact UH	131.72	449.35	378.40	331.10							
17		73721	Mri Scan Of Leg Joint		IP/OP	1736.00	450.84	389.76	278.40	1302.00	482.26	Contact UH	278.40	1649.20	1388.80	1215.20							
18		59400	Routine Obstetric Care For Vaginal Delivery, Including Pre-And Post-Delivery Care		IP/OP	7827.00	2032.67	2974.26	2410.72	5870.25	2174.34	Contact UH	N/A	7435.65	6261.60	5478.90							
19		77067	Mammography, Screening, Bilateral		IP/OP	472.00	122.58	179.36	145.38	354.00	131.12	Contact UH	N/A	448.40	377.60	330.40							
20		43239	Biopsy Of The Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope		IP/OP	2757.00	715.99	1370.61	979.01	2067.75	765.89	Contact UH	979.01	2619.15	2205.60	1929.90							
21		43235	Diagnostic Examination Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope		IP/OP	2067.00	536.80	1370.61	979.01	1550.25	574.21	Contact UH	979.01	1963.65	1653.60	1446.90							
22		72110	X-Ray, Lower Back, Minimum Four Views		IP/OP	372.00	96.61	184.41	131.72	279.00	103.34	Contact UH	131.72	353.40	297.60	260.40							
23		64483	Injections Of Anesthetic And/Or Steroid Drug Into Lower Or Sacral Spine Nerve Root Using Imaging		IP/OP	1125.00	292.16	1394.40	996.00	843.75	312.53	Contact UH	996.00	1068.75	900.00	787.50							
24		45385	Removal Of Polyps Or Growths Of Large Bowel Using An Endoscope		IP/OP	2757.00	715.99	1756.51	1254.65	2067.75	765.89	Contact UH	1254.65	2619.15	2205.60	1929.90							
25		77066	Mammography Of Both Breasts		IP/OP	500.00	129.85	190.00	154.00	375.00	138.90	Contact UH	N/A	475.00	400.00	350.00							
26		45380	Biopsy Of Large Bowel Using An Endoscope		OP	2757.00	715.99	1756.51	1254.65	2067.75	765.89	Contact UH	1254.65	2619.15	2205.60	1929.90							
27		49505	Repair Of Groin Hernia Patient Age 5 Years Or Older		OP	8310.00	2158.11	5389.22	3849.44	6232.50	2308.52	Contact UH	3849.44	7894.50	6648.00	5817.00							
28		97110	Physical Therapy, Therapeutic Exercise		IP/OP	152.00	39.47	57.76	46.82	114.00	42.23	Contact UH	N/A	144.40	121.60	106.40							
29		70553	Mri Scan Of Brain Before And After Contrast		IP/OP	9266.00	2406.38	623.77	2853.93	6949.50	2574.09	Contact UH	445.55	8802.70	7412.80	6486.20							
30		81002	Automated Urinalysis Test		IP/OP	21.00	5.45	7.98	6.47	15.75	5.83	Contact UH	3.48	19.95	16.80	14.70							
31		66821	Removal Of Recurring Cataract In Lens Capsule Using Laser		OP	2086.00	541.73	852.46	608.90	1564.50	579.49	Contact UH	608.90	1981.70	1668.80	1460.20							
32		72148	Mri Scan Of Lower Spinal Canal		IP/OP	1335.00	346.70	389.76	411.18	1001.25	370.86	Contact UH	278.40	1268.25	1068.00	934.50							
33		90832	Psychotherapy, 30 Min		OP	494.00	128.29	226.65	152.15	370.50	137.23	Contact UH	161.89	469.30	395.20	345.80							
34		55700	Biopsy Of Prostate Gland		OP	6618.00	1718.69	3032.92	2038.34	4963.50	1838.48	Contact UH	2166.37	6287.10	5294.40	4632.60							
35		45391	Ultrasound Examination Of Lower Large Bowel Using An Endoscope		OP	2825.00	733.65	1756.51	1254.65	2118.75	784.79	Contact UH	1254.65	2683.75	2260.00	1977.50							
36		77065	Mammography Of One Breast		IP/OP	449.00	116.61	170.62	138.29	336.75	124.73	Contact UH	N/A	426.55	359.20	314.30							
37		19120	Removal Of 1 Or More Breast Growth, Open Procedure		OP	11655.00	3026.80	5348.83	3820.59	8741.25	3237.76	Contact UH	3820.59	11072.25	9324.00	8158.50							
38		90834	Psychotherapy, 45 Min		OP	494.00	128.29	226.65	161.89	370.50	137.23	Contact UH	161.89	469.30	395.20	345.80							
39		90837	Psychotherapy, 60 Min		OP	494.00	128.29	226.65	152.15	370.50	137.23	Contact UH	161.89	469.30	395.20	345.80							
40		85025	Complete Blood Cell Count, With Differential White Blood Cells, Automated		IP/OP	40.00	10.39	15.20	7.77	30.00	11.11	Contact UH	7.77	38.00	32.00	28.00							
41		84443	Blood Test, Thyroid Stimulating Hormone (Tsh)		IP/OP	148.00	38.44	56.24	16.80	111.00	41.11	Contact UH	16.80	140.60	118.40	103.60							
42		90853	Group Psychotherapy		OP	297.00	77.13	126.74	90.53	222.75	82.51	Contact UH	90.53	282.15	237.60	207.90							
43		45378	Diagnostic Examination Of Large Bowel Using An Endoscope		IP/OP	2757.00	715.99	1344.22	960.16	2067.75	765.89	Contact UH	960.16	2619.15	2205.60	1929.90							
44	N/A	90846	Family Psychotherapy, Not Including Patient, 50 Min		OP	N/A	N/A	N/A	N/A	N/A	N/A	Contact UH	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	Contact UH	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	Contact UH	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	Contact UH	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	Contact UH	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	Contact UH	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	Contact UH	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	Contact UH	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	Contact UH	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		IP/OP	N/A	N/A	N/A	N/A	N/A	N/A	Contact UH	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		IP/OP	N/A	N/A	N/A	N/A	N/A	N/A	Contact UH	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	Contact UH	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	61932.11	56236.07	N/A	N/A	46427.54	56236.07	N/A	N/A	N/A	N/A						
57	DRG - 470		Major Joint Replacement Or Reattachment Of Lower Extremity Without Major Comorbid Conditions (I		P	N/A	N/A	29941.13	32690.93	N/A	N/A	22445.43	32690.93	N/A	N/A	N/A	N/A						
58	DRG - 473		Cervical Spinal Fusion Without Comorbid Conditions (Cc) Or Major Comorbid Conditions Or Complic		IP	N/A	N/A	40004.48	40097.49	N/A	N/A	29989.45	40097.49	N/A	N/A	N/A	N/A						
59	DRG - 743		Uterine And Adnexa Procedures For Non-Malignancy Without Comorbid Conditions (Cc) Or Major Cx		IP	N/A	N/A	17848.40	23790.77	N/A	N/A	13380.09	23790.77	N/A	N/A	N/A	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	Contact UH	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	Contact UH	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	Contact UH	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	Contact UH	N/A	N/A	N/A	N/A	N/A						
64	N/A	99386	Initial New Patient Preventive Medicine Evaluation (40 Evaluation (																				

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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)		
70		76805	Abdominal Ultrasound Of Pregnant Uterus (Greater Or Equal To 14 Weeks 0 Days) Single Or First F	IP/OP	472.00	122.58	184.41	145.38	354.00	131.12	Contact UH	131.72	448.40	377.60	330.40		
71		86480	Tuberculosis Test	IP/OP	229.00	59.47	87.02	61.98	171.75	63.62	Contact UH	61.98	217.55	183.20	160.30		
72		83735	Blood Test, Magnesium	IP/OP	45.00	11.69	17.10	13.86	33.75	12.50	Contact UH	6.70	42.75	36.00	31.50		
73		DRG - 115	Extraocular Procedures Except Orbit	IP	N/A	N/A	22950.19	27545.65	N/A	N/A	17204.66	27545.65	N/A	N/A	N/A		
74		DRG - 117	Intraocular Procedures Without Complications	IP	N/A	N/A	16405.15	22728.55	N/A	N/A	12298.15	22728.55	N/A	N/A	N/A		
75		DRG - 788	Cesarean Section Without Sterilization Without Complications	IP	N/A	N/A	13981.87	20945.04	N/A	N/A	N/A	20945.04	N/A	N/A	N/A		
76		DRG - 906	Hand Procedures For Injuries	IP	N/A	N/A	28420.67	31571.89	N/A	N/A	21305.62	31571.89	N/A	N/A	N/A		
77		DRG - 482	Hip And Femur Procedures Except Major Joint Without Complications	IP	N/A	N/A	25931.22	29739.67	N/A	N/A	19439.40	29739.67	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	29175.39	32127.35	N/A	N/A	21871.39	32127.35	N/A	N/A	N/A		
79		DRG - 502	Soft Tissue Procedures Without Complications	IP	N/A	N/A	20999.60	26110.03	N/A	N/A	15742.39	26110.03	N/A	N/A	N/A		
80		DRG - 505	Foot Procedures W/O Cc/Mcc	IP	N/A	N/A	27966.90	31237.92	N/A	N/A	20965.45	31237.92	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	24492.70	28680.93	N/A	N/A	18361.01	28680.93	N/A	N/A	N/A		
82		DRG - 660	Kidney And Ureter Procedures For Non-Neoplasm With Complications	IP	N/A	N/A	22737.48	27389.10	N/A	N/A	17045.20	27389.10	N/A	N/A	N/A		
83		DRG - 142	Major Head And Neck Procedures Without Complications	IP	N/A	N/A	25289.96	29267.70	N/A	N/A	18958.67	29267.70	N/A	N/A	N/A		
84		DRG - 247	Percutaneous Cardiovascular Procedures With Coronary Artery Stent	IP	N/A	N/A	31089.74	33536.30	N/A	N/A	23306.49	33536.30	N/A	N/A	N/A		
85		DRG - 329	Major Small And Large Bowel Procedures With Major Comp	IP	N/A	N/A	76986.97	67316.34	N/A	N/A	57713.45	67316.34	N/A	N/A	N/A		
86		DRG - 355	Hernia Procedures Except Inguinal And Femoral Without Complications	IP	N/A	N/A	21431.31	26427.77	N/A	N/A	16066.03	26427.77	N/A	N/A	N/A		
87		DRG - 419	Laparoscopic Cholecystectomy Without C.D.E. Without Complications	IP	N/A	N/A	20723.87	25907.10	N/A	N/A	15535.69	25907.10	N/A	N/A	N/A		
88		DRG - 479	Biopsies Of Musculoskeletal System And Connective Tissue Without Complications	IP	N/A	N/A	28510.48	31637.99	N/A	N/A	21372.95	31637.99	N/A	N/A	N/A		
89		72131	Ct Scan, Lumbar Spine	IP/OP	265.00	68.82	184.41	131.72	198.75	73.62	Contact UH	131.72	251.75	212.00	185.50		
90		87491	Infectious Agent Detection, Chlamydia Trachomatis	IP/OP	155.00	40.25	58.90	35.09	116.25	43.06	Contact UH	35.09	147.25	124.00	108.50		
91		73700	Ct Scan, Lower Extremities	IP/OP	265.00	68.82	184.41	131.72	198.75	73.62	Contact UH	131.72	251.75	212.00	185.50		
92		73630	X-Ray, Foot	IP/OP	568.00	147.51	137.02	97.87	426.00	157.79	Contact UH	97.87	539.60	454.40	397.60		
93		73560	X-Ray, Knee	IP/OP	590.00	153.22	137.02	181.72	442.50	163.90	Contact UH	97.87	560.50	472.00	413.00		
94		72190	X-Ray, Pelvis, 3 Views	IP/OP	232.00	60.25	184.41	131.72	174.00	64.45	Contact UH	131.72	220.40	185.60	162.40		
95		92557	Comprehensive Audiometry Threshold Evaluation And Speech Recognition	IP/OP	866.00	224.90	236.49	168.92	649.50	240.57	Contact UH	168.92	822.70	692.80	606.20		
96		76512	Ophthalmic Ultrasound, Diagnostic, B-Scan With And Without Quant. A	IP/OP	472.00	122.58	184.41	131.72	354.00	131.12	Contact UH	131.72	448.40	377.60	330.40		
97		70355	X-Ray, Jaws, Panoramic	IP/OP	299.00	77.65	137.02	97.87	224.25	83.06	Contact UH	97.87	284.05	239.20	209.30		
98		96415	Chemotherapy Administration, Intravenous Infusion Technique	IP/OP	192.00	49.86	105.01	75.01	144.00	53.34	Contact UH	75.01	182.40	153.60	134.40		
99		96367	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis; Additional Sequential Infusion Of A N	IP/OP	192.00	49.86	105.01	75.01	144.00	53.34	Contact UH	75.01	182.40	153.60	134.40		
100		70498	Ct Scan, Neck	IP/OP	2319.00	602.24	302.57	216.12	1739.25	644.22	Contact UH	216.12	2203.05	1855.20	1623.30		
101		76376	3D Rendering With Interpretation And Post Process Supervision	IP/OP	265.00	68.82	100.70	81.62	198.75	73.62	Contact UH	N/A	251.75	212.00	185.50		
102		92567	Tympanometry	OP	196.00	50.90	57.33	40.95	147.00	54.45	Contact UH	40.95	186.20	156.80	137.20		
103		92235	Fluorescein Angiography	OP	903.00	234.51	448.29	320.21	677.25	250.85	Contact UH	320.21	857.85	722.40	632.10		
104		76815	Abdominal Ultrasound Of Pregnant Uterus	IP/OP	403.00	104.66	184.41	131.72	302.25	111.95	Contact UH	131.72	382.85	322.40	282.10		
105		96368	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis; Concurrent Infusion	IP/OP	135.00	35.06	51.30	41.58	101.25	37.50	Contact UH	N/A	128.25	108.00	94.50		
106		90472	Immunization Administration	IP/OP	133.00	34.54	50.54	40.96	99.75	36.95	Contact UH	N/A	126.35	106.40	93.10		
107		92603	Diagnostic Analysis Of Cochlear Implant, Age 7 Years Or Older; With Programming	OP	797.00	206.98	236.49	168.92	597.75	221.41	Contact UH	168.92	757.15	637.60	557.90		
108		92250	Fundus Photography With Interpretation And Report	OP	376.00	97.65	191.00	136.43	282.00	104.45	Contact UH	136.43	357.20	300.80	263.20		
109		96523	Irrigation Of Implanted Venous Access Device	IP/OP	232.00	60.25	94.29	67.35	174.00	64.45	Contact UH	67.35	220.40	185.60	162.40		
110		90746	Hepatitis B Vaccine (Hepb), Adult Dosage, 3 Dose Schedule, For Intramuscular Use	IP/OP	440.00	114.27	167.20	70.38	330.00	122.23	Contact UH	70.38	418.00	352.00	308.00		
111		89051	Cell Count, Miscellaneous Body Fluids	IP/OP	40.00	10.39	15.20	5.60	30.00	11.11	Contact UH	5.60	38.00	32.00	28.00		
112		73590	X-Ray, Lower Leg	IP/OP	568.00	147.51	137.02	97.87	426.00	157.79	Contact UH	97.87	539.60	454.40	397.60		
113		72170	X-Ray, Pelvis, 1-2 Views	IP/OP	238.00	61.81	184.41	73.30	178.50	66.12	Contact UH	131.72	226.10	190.40	166.60		
114		73070	X-Ray, Elbow	IP/OP	568.00	147.51	137.02	174.94	426.00	157.79	Contact UH	97.87	539.60	454.40	397.60		
115		72125	Ct Scan, Neck Spine Without Contrast	IP/OP	1240.00	322.03	184.41	131.72	930.00	344.47	Contact UH	131.72	1178.00	992.00	868.00		
116		73030	X-Ray, Shoulder	IP/OP	568.00	147.51	137.02	97.87	426.00	157.79	Contact UH	97.87	539.60	454.40	397.60		
117		73060	X-Ray, Humerus	IP/OP	568.00	147.51	137.02	97.87	426.00	157.79	Contact UH	97.87	539.60	454.40	397.60		
118		72100	X-Ray, Lumbar Spine, 2-3 Views	IP/OP	437.00	113.49	184.41	131.72	327.75	121.40	Contact UH	131.72	415.15	349.60	305.90		
119		73120	Hepatitis B Surface Antibody (Hbsab)	IP/OP	326.00	84.66	184.41	131.72	244.50	90.56	Contact UH	131.72	309.70	260.80	228.20		
120		73610	X-Ray, Ankle	IP/OP	222.00	57.65	137.02	97.87	166.50	61.67	Contact UH	97.87	210.90	177.60	155.40		
121		73110	X-Ray, Wrist	IP/OP	336.00	87.26	137.02	97.87	252.00	93.34	Contact UH	97.87	319.20	268.80	235.20		
122		73090	X-Ray, Forearm	IP/OP	568.00	147.51	137.02	97.87	426.00	157.79	Contact UH	97.87	539.60	454.40	397.60		
123		93312	Echocardiography, Transesophageal	IP/OP	2631.00	683.27	818.47	810.35	1973.25	730.89	Contact UH	584.62	2499.45	2104.80	1841.70		
124		97140	Manual Therapy Techniques, 1 Or More Regions, Each 15 Minutes	IP/OP	198.00	51.42	75.24	60.98	148.50	55.00	Contact UH	N/A	188.10	158.40	138.60		
125		92611	Motion Fluoroscopic Evaluation Of Swallowing Function By Cine Or Video Recording	IP/OP	940.00	244.12	357.20	289.52	705.00	261.13	Contact UH	N/A	893.00	752.00	658.00		
126		73562	X-Ray, Knee, 3 Views	IP/OP	238.00	61.81	137.02	97.87	178.50	66.12	Contact UH	97.87	226.10	190.40	166.60		
127		96374	Therapeutic, Prophylactic, Or Diagnostic Injection; Intravenous Push, Single Or Initial Substance/Dr	IP/OP	725.00	188.28	346.53	223.30	543.75	201.41	Contact UH	247.52	688.75	580.00	507.50		
128		92950	Cardiopulmonary Resuscitation	IP/OP	903.00	234.51	448.29	320.21	677.25	250.85	Contact UH	320.21	857.85	722.40	632.10		
129		77386	Intensity Modulated Radiation Therapy Delivery Complex	IP/OP	2248.00	583.81	919.03	656.45	1686.00	624.49	Contact UH	656.45	2135.60	1798.40	1573.60		
130		93990	Duplex Scan Of Hemodialysis Access	IP/OP	1979.00	513.95	184.41	131.72	1484.25	549.77	Contact UH	131.72	1880.05	1583.20	1385.30		
131		93926	Duplex Scan Of Lower Extremity Arteries Or Arterial Bypass Grafts; Unilateral Or Limited Study	IP/OP	449.00	116.61	184.41	131.72	336.75	124.73	Contact UH	131.72	426.55	359.20	314.30		
132		84703	Blood Test, Human Chorionic Gonadotropin (Hcg)	IP/OP	66.00	17.14	25.08	20.33	49.50	18.33	Contact UH	7.52	62.70	52.80	46.20		
133		93978	Duplex Scan Of Aorta, Inferior Vena Cava, Iliac Vasculature, Or Bypass Grafts; Complete Study	IP/OP	706.00	183.35	389.76	278.40	529.50	196.13	Contact UH	278.40	670.70	564.80	494.20		
134		93925	Duplex Scan Of Lower Extremity Arteries Or Arterial Bypass Grafts; Complete Bilateral Study	IP/OP	706.00	183.35	389.76	278.40	529.50	196.13	Contact UH	278.40	670.70	564.80	494.20		
135		90375	Rabies Immune Globulin (Rig)	IP/OP	1412.00	366.70	474.38	308.67	1059.00	392.25	Contact UH	308.67	1341.40	1129.60	988.40		
136		92587	Distortion Product Evoked Otoacoustic Emissions	IP/OP	961.00	249.57	448.29	295.99	720.75	266.97	Contact UH						

Notes:
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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	466.00	121.02	177.08	143.53	349.50	129.45	Contact UH	78.77	442.70	372.80	326.20			
140		94664	Demonstration And/Or Evaluation Of Patient Utilization Of An Aerosol Generator, Nebulizer, Metered	IP/OP	742.00	192.70	318.39	228.54	556.50	206.13	Contact UH	227.42	704.90	593.60	519.40			
141		94667	Manipulation Chest Wall	IP/OP	376.00	97.65	191.00	136.43	282.00	104.45	Contact UH	136.43	357.20	300.80	263.20			
142		94660	Continuous Positive Airway Pressure Ventilation (Cpap)	IP/OP	613.00	159.20	318.39	227.42	459.75	170.29	Contact UH	227.42	582.35	490.40	429.10			
143		95816	Electroencephalogram (Eeg)	IP/OP	977.00	253.73	448.29	320.21	732.75	271.41	Contact UH	320.21	928.15	781.60	683.90			
144		96521	Refilling And Maintenance Of Portable Pump	IP/OP	710.00	184.39	346.53	247.52	532.50	197.24	Contact UH	247.52	674.50	568.00	497.00			
145		97597	Debridement	IP/OP	663.00	172.18	304.18	217.27	497.25	184.18	Contact UH	217.27	629.85	530.40	464.10			
146		90651	Hpv Vaccine	IP/OP	606.00	157.38	230.28	186.65	454.50	168.35	Contact UH	N/A	575.70	484.80	424.20			
147		96413	Chemotherapy Administration, Intravenous Infusion Technique; Up To 1 Hour	IP/OP	1194.00	310.08	540.09	385.78	895.50	331.69	Contact UH	385.78	1134.30	955.20	835.80			
148		92570	Acoustic Immittance Testing	OP	533.00	138.42	236.49	168.92	399.75	148.07	Contact UH	168.92	506.35	426.40	373.10			
149		92133	Scanning Computerized Ophthalmic Diagnostic Imaging, Optic Nerve	OP	206.00	53.50	94.29	63.45	154.50	57.23	Contact UH	67.35	195.70	164.80	144.20			
150		90675	Rabies Vaccine, For Intramuscular Use	IP/OP	954.00	247.75	483.95	341.95	715.50	265.02	Contact UH	341.95	906.30	763.20	667.80			
151		96417	Chemotherapy Administration, Intravenous Infusion Technique	IP/OP	417.00	108.29	105.01	75.01	312.75	115.84	Contact UH	75.01	396.15	333.60	291.90			
152		92083	Visual Field Examination	IP/OP	376.00	97.65	191.00	115.81	282.00	104.45	Contact UH	136.43	357.20	300.80	263.20			
153		92136	Ophthalmic Biometry	OP	414.00	107.52	191.00	136.43	310.50	115.01	Contact UH	136.43	393.30	331.20	289.80			
154		96401	Chemotherapy Administration, Subcutaneous Or Intramuscular; Non-Hormonal Anti-Neoplastic	IP/OP	1720.00	446.68	105.01	75.01	1290.00	477.82	Contact UH	75.01	1634.00	1376.00	1204.00			
155		96402	Chemotherapy Administration, Subcutaneous Or Intramuscular; Hormonal Anti-Neoplastic	OP	291.00	75.57	105.01	75.01	218.25	80.84	Contact UH	75.01	276.45	232.80	203.70			
156		90734	Meningococcal Conjugate Vaccine	IP/OP	519.00	134.78	197.22	159.85	389.25	144.18	Contact UH	N/A	493.05	415.20	363.30			
157		96365	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis; Initial, Up To 1 Hour	IP/OP	725.00	188.28	346.53	247.52	543.75	201.41	Contact UH	247.52	688.75	580.00	507.50			
158		90396	Varicella-Zoster Immune Globulin, Human, For Intramuscular Use	OP	2998.00	778.58	3438.40	2456.00	2248.50	832.84	Contact UH	2456.00	2848.10	2398.40	2098.60			
159		90670	Pneumococcal Conjugate Vaccine, 13 Valent (Pcv13), For Intramuscular Use	IP/OP	568.00	147.51	215.84	241.38	426.00	157.79	Contact UH	241.38	539.60	454.40	397.60			
160		77336	Continuing Medical Physics Consultation	IP/OP	1377.00	357.61	214.93	424.12	1032.75	382.53	Contact UH	153.52	1308.15	1101.60	963.90			
161		92602	Diagnostic Analysis Of Cochlear Implant, Patient Younger Than 7 Yrs Of Age; Subsequent Reprgn	OP	870.00	225.94	236.49	168.92	652.50	241.69	Contact UH	168.92	826.50	696.00	609.00			
162		92025	Computerized Corneal Topography	OP	206.00	53.50	94.29	67.35	154.50	57.23	Contact UH	67.35	195.70	164.80	144.20			
163		93923	Complete Bilateral Noninvasive Physiologic Studies Of Upper Or Lower Extremity Arteries, 3 Or More	IP/OP	1399.00	363.32	236.49	430.89	1049.25	388.64	Contact UH	168.92	1329.05	1119.20	979.30			
164		82948	Glucose Test	IP/OP	40.00	10.39	15.20	5.04	30.00	11.11	Contact UH	5.04	38.00	32.00	28.00			
165		94150	Vital Capacity, Total (Separate Procedure)	IP/OP	533.00	138.42	236.49	168.92	399.75	148.07	Contact UH	168.92	506.35	426.40	373.10			
166		94060	Bronchodilation Responsiveness	IP/OP	617.00	160.23	448.29	320.21	462.75	171.40	Contact UH	320.21	586.15	493.60	431.90			
167		90732	Pneumococcal Polysaccharide Vaccine	IP/OP	116.00	30.13	44.08	35.73	87.00	32.22	Contact UH	133.47	110.20	92.80	81.20			
168		92584	Electrocochleography	OP	877.00	227.76	236.49	168.92	657.75	243.63	Contact UH	168.92	833.15	701.60	613.90			
169		92550	Tympanometry And Reflex Threshold Measurements	OP	533.00	138.42	236.49	168.92	399.75	148.07	Contact UH	168.92	506.35	426.40	373.10			
170		92626	Evaluation Of Auditory Function, First Hour	OP	626.00	162.57	236.49	168.92	469.50	173.90	Contact UH	168.92	594.70	500.80	438.20			
171		92579	Visual Reinforcement Audiometry (Vra)	IP/OP	533.00	138.42	236.49	168.92	399.75	148.07	Contact UH	168.92	506.35	426.40	373.10			
172		92582	Conditioning Play Audiometry	OP	866.00	224.90	236.49	168.92	649.50	240.57	Contact UH	168.92	822.70	692.80	606.20			
173		90686	Influenza Virus Vaccine	IP/OP	78.00	20.26	29.64	24.02	58.50	21.67	Contact UH	20.53	74.10	62.40	54.60			
174		92604	Diagnostic Analysis Of Cochlear Implant, Age 7 Yrs Or Older	OP	569.00	147.77	236.49	168.92	426.75	158.07	Contact UH	168.92	540.55	455.20	398.30			
175		90715	Tetanus, Diphtheria Toxoids And Acellular Pertussis Vaccine (Tdap), 7 Years+	IP/OP	163.00	42.33	61.94	36.16	122.25	45.28	Contact UH	36.16	154.85	130.40	114.10			
176		86901	Blood Typing Rhd	IP/OP	133.00	34.54	57.33	2.99	99.75	36.95	Contact UH	2.99	126.35	106.40	93.10			
177		93922	Limited Bilateral Noninvasive Physiologic Studies Of Upper Or Lower Extremity Arteries	IP/OP	820.00	212.95	191.00	136.43	615.00	227.80	Contact UH	136.43	779.00	656.00	574.00			
178		36415	Routine Venipuncture	IP/OP	56.00	14.54	21.28	3.00	42.00	15.56	Contact UH	3.00	53.20	44.80	39.20			
179		92610	Evaluation Of Oral And Pharyngeal Swallowing Function	IP/OP	243.00	63.11	92.34	74.84	182.25	67.51	Contact UH	N/A	230.85	194.40	170.10			
180		92522	Evaluation Of Speech Sound Production	IP/OP	534.00	138.68	202.92	164.47	400.50	148.35	Contact UH	N/A	507.30	427.20	373.80			
181		93880	Duplex Scan Of Extracranial Arteries; Complete Bilateral Study	IP/OP	891.00	231.39	389.76	278.40	668.25	247.52	Contact UH	278.40	846.45	712.80	623.70			
182		97802	Medical Nutrition Therapy	OP	475.00	123.36	180.50	146.30	356.25	131.96	Contact UH	N/A	451.25	380.00	332.50			
183		86703	Antibody; Hiv-1 And Hiv-2, Single Result	IP/OP	52.00	13.50	19.76	13.71	39.00	14.45	Contact UH	13.71	49.40	41.60	36.40			
184		93970	Duplex Scan Of Extremity Veins; Complete Bilateral Study	IP/OP	2178.00	565.63	389.76	278.40	1633.50	605.05	Contact UH	278.40	2069.10	1742.40	1524.60			
185		96376	Therapeutic, Prophylactic, Or Diagnostic Injection Sequential Intravenous Push Of The Same Subst	IP/OP	199.00	51.68	75.62	61.29	149.25	55.28	Contact UH	N/A	189.05	159.20	139.30			
186		90744	Hepatitis B Vaccine (Hepb), Pediatric/Adolescent Dosage, 3 Dose Schedule	IP/OP	161.00	41.81	61.18	49.59	120.75	44.73	Contact UH	28.76	152.95	128.80	112.70			
187		93971	Duplex Scan Of Extremity Veins; Unilateral Or Limited Study	IP/OP	449.00	116.61	184.41	131.72	336.75	124.73	Contact UH	131.72	426.55	359.20	314.30			
188		90471	Immunization Administration	IP/OP	229.00	59.47	105.01	75.01	171.75	63.62	Contact UH	75.01	217.55	183.20	160.30			
189		90632	Hepatitis A Vaccine (Hepa), Adult Dosage, For Intramuscular Use	IP/OP	210.00	54.54	79.80	64.74	157.50	58.34	Contact UH	64.74	199.50	168.00	147.00			
190		99153	Mod Sedation Services Provided By The Same Physician	OP	245.00	63.63	93.10	75.46	183.75	68.06	Contact UH	N/A	232.75	196.00	171.50			
191		93303	Transthoracic Echocardiography	IP/OP	2631.00	683.27	818.47	584.62	1973.25	730.89	Contact UH	584.62	2499.45	2104.80	1841.70			
192		73552	X-Ray, Femur, 2 Views	IP/OP	261.00	67.78	137.02	97.87	195.75	72.51	Contact UH	97.87	247.95	208.80	182.70			
193		96372	Therapeutic, Prophylactic, Or Diagnostic Injection; Subcutaneous Or Intramuscular	IP/OP	176.00	45.71	105.01	75.01	132.00	48.89	Contact UH	75.01	167.20	140.80	123.20			
194		95851	Range Of Motion Measurements And Report	IP/OP	108.00	28.05	41.04	33.26	81.00	30.00	Contact UH	N/A	102.60	86.40	75.60			
195		77300	Basic Radiation Dosimetry Calculation	IP/OP	620.00	161.01	214.93	153.52	465.00	172.24	Contact UH	153.52	589.00	496.00	434.00			
196		96366	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis, Each Additional Hour	IP/OP	243.00	63.11	67.79	48.42	182.25	67.51	Contact UH	48.42	230.85	194.40	170.10			
197		94761	Noninvasive Ear Or Pulse Oximetry For Oxygen Saturation; Multiple Determinations	IP/OP	360.00	93.49	136.80	110.88	270.00	100.01	Contact UH	N/A	342.00	288.00	252.00			
198		94640	Inhalation Therapy	IP/OP	613.00	159.20	318.39	227.42	459.75	170.29	Contact UH	227.42	582.35	490.40	429.10			
199		77412	Radiation Therapy Delivery	IP/OP	860.00	223.34	409.44	292.46	645.00	238.91	Contact UH	292.46	817.00	688.00	602.00			
200		77063	Screening Digital Breast Tomosynthesis, Bilateral	IP/OP	500.00	129.85	190.00	154.00	375.00	138.90	Contact UH	N/A	475.00	400.00	350.00			
201		87591	Infectious Agent Detection, Neisseria Gonorrhoeae	IP/OP	155.00													

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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)	
208		76705	Ultrasound Of Abdomen, Limited	IP/OP	739.00	191.92	184.41	131.72	554.25	205.29	Contact UH	131.72	702.05	591.20	517.30	
209		95813	Electroencephalogram (Eeg) Extended Monitoring; 61-119 Minutes	IP/OP	771.00	200.23	448.29	320.21	578.25	214.18	Contact UH	320.21	732.45	616.80	539.70	
210		93005	Electrocardiogram	IP/OP	225.00	58.43	94.29	67.35	168.75	62.51	Contact UH	67.35	213.75	180.00	157.50	
211		95819	Electroencephalogram (Eeg)	IP/OP	977.00	253.73	448.29	300.92	732.75	271.41	Contact UH	320.21	928.15	781.60	683.90	
212		94727	Gas Dilution	IP/OP	533.00	138.42	236.49	168.92	399.75	148.07	Contact UH	168.92	506.35	426.40	373.10	
213		94760	Noninvasive Ear Or Pulse Oximetry For Oxygen Saturation	IP/OP	128.00	33.24	48.64	39.42	96.00	35.56	Contact UH	N/A	121.60	102.40	89.60	
214		94644	Continuous Inhalation Therapy With Aerosol Medication For Acute Airway Obstruction; First Hour	IP/OP	376.00	97.65	191.00	136.43	282.00	104.45	Contact UH	136.43	357.20	300.80	263.20	
215		94645	Continuous Inhalation Therapy With Aerosol Medication For Acute Airway Obstruction; Each Addition	IP/OP	386.00	100.24	146.68	118.89	289.50	107.23	Contact UH	N/A	366.70	308.80	270.20	
216		94003	Ventilation Assist And Management; Hospital Inpatient/Observation, Each Subsequent Day	IP/OP	940.00	244.12	825.20	289.52	705.00	261.13	Contact UH	589.43	893.00	752.00	658.00	
217		94002	Ventilation Assist And Management; Hospital Inpatient/Observation, Initial Day	IP/OP	1862.00	483.56	825.20	589.43	1396.50	517.26	Contact UH	589.43	1768.90	1489.60	1303.40	
218		94681	Oxygen Uptake, Expired Gas Analysis	IP/OP	903.00	234.51	448.29	320.21	677.25	250.85	Contact UH	320.21	857.85	722.40	632.10	
219		94010	Sprometry	IP/OP	533.00	138.42	236.49	168.92	399.75	148.07	Contact UH	168.92	506.35	426.40	373.10	
220		93888	Transcranial Doppler Study Of The Intracranial Arteries; Limited Study	IP/OP	836.00	217.11	184.41	257.49	627.00	232.24	Contact UH	131.72	794.20	668.80	585.20	
221		77417	Therapeutic Radiology Port Image(S)	IP/OP	360.00	93.49	136.80	110.88	270.00	100.01	Contact UH	N/A	342.00	288.00	252.00	
222		94729	Diffusing Capacity	IP/OP	360.00	93.49	136.80	110.88	270.00	100.01	Contact UH	N/A	342.00	288.00	252.00	
223		77085	Bone Density Study, Dual-Energy X-Ray Absorptiometry	IP/OP	411.00	106.74	184.41	131.72	308.25	114.18	Contact UH	131.72	390.45	328.80	287.70	
224		77334	Therapy Devices, Design And Construction; Complex	IP/OP	1387.00	360.20	573.61	409.72	1040.25	385.31	Contact UH	409.72	1317.65	1109.60	970.90	
225		94668	Manipulation Of Chest Wall	IP/OP	232.00	60.25	191.00	136.43	174.00	64.45	Contact UH	136.43	220.40	185.60	162.40	
226		87536	Infectious Agent Detection; Hiv-1, Quant	IP/OP	841.00	218.41	319.58	85.10	630.75	233.63	Contact UH	85.10	798.95	672.80	588.70	
227		95951	Eeg Monitoring, Video Recording	IP/OP	4147.00	1076.98	1575.86	1277.28	3110.25	1152.04	Contact UH	N/A	3939.65	3317.60	2902.90	
228		76642	Ultrasound Of Breast	IP/OP	409.00	106.22	137.02	125.97	306.75	113.62	Contact UH	97.87	388.55	327.20	286.30	
229		96360	Intravenous Infusion, Hydration; Initial, 31 Minutes To 1 Hour	IP/OP	581.00	150.89	346.53	247.52	435.75	161.40	Contact UH	247.52	551.95	464.80	406.70	
230		93458	Catheter Placement In Coronary Artery(S) For Coronary Angiography	IP/OP	13574.00	3525.17	4911.83	4180.79	10180.50	3770.86	Contact UH	3508.45	12895.30	10859.20	9501.80	
231		76770	Ultrasound Of Retroperitoneal, Complete	IP/OP	473.00	122.84	184.41	131.72	354.75	131.40	Contact UH	131.72	449.35	378.40	331.10	
232		93975	Vascular Study	IP/OP	845.00	219.45	389.76	278.40	633.75	234.74	Contact UH	278.40	802.75	676.00	591.50	
233		76536	Ultrasound Of Head And Neck	IP/OP	739.00	191.92	184.41	131.72	554.25	205.29	Contact UH	131.72	702.05	591.20	517.30	
234		76775	Ultrasound Of Retroperitoneal, Limited	IP/OP	473.00	122.84	184.41	131.72	354.75	131.40	Contact UH	131.72	449.35	378.40	331.10	
235		74018	X-Ray, Abdomen	IP/OP	248.00	64.41	137.02	76.38	186.00	68.89	Contact UH	97.87	235.60	198.40	173.60	
236		86900	Blood Typing Abo	IP/OP	242.00	62.85	191.00	2.99	181.50	67.23	Contact UH	2.99	229.90	193.60	169.40	
237		87186	Susceptibility Studies, Anitmicrobial Agent	IP/OP	357.00	92.71	135.66	8.65	267.75	99.17	Contact UH	8.65	339.15	285.60	249.90	
238		96375	Therapeutic, Prophylactic, Or Diagnostic Injection; Sequential Intravenous Push Of A New Substanc	IP/OP	205.00	53.24	67.79	63.14	153.75	56.95	Contact UH	48.42	194.75	164.00	143.50	
239		86923	Compatibility Test Each Unit; Electronic	IP/OP	441.00	114.53	252.63	180.45	330.75	122.51	Contact UH	180.45	418.95	352.80	308.70	
240		86920	Compatibility Test Each Unit; Immediate Spin Technique	IP/OP	424.00	110.11	252.63	180.45	318.00	117.79	Contact UH	180.45	402.80	339.20	296.80	
241		99152	Mod Sedation Services Provided By The Same Physician	OP	281.00	72.98	106.78	86.55	210.75	78.06	Contact UH	N/A	266.95	224.80	196.70	
242		97161	Physical Therapy Evaluation: Low Complexity 20 Minutes	IP/OP	198.00	51.42	75.24	60.98	148.50	55.00	Contact UH	N/A	188.10	158.40	138.60	
243		71046	C-Reactive Protein;	IP/OP	248.00	64.41	137.02	97.87	186.00	68.89	Contact UH	97.87	235.60	198.40	173.60	
244		87040	Culture, Bacterial, Blood	IP/OP	86.00	22.33	32.68	10.32	64.50	23.89	Contact UH	10.32	81.70	68.80	60.20	
245		97165	Occupational Therapy Evaluation, Low Complexity, 30 Minutes	IP/OP	198.00	51.42	75.24	60.98	148.50	55.00	Contact UH	N/A	188.10	158.40	138.60	
246		97166	Occupational Therapy Evaluation, Mod Complexity 45 Minutes	IP/OP	360.00	93.49	136.80	110.88	270.00	100.01	Contact UH	N/A	342.00	288.00	252.00	
247		73502	X-Ray, Hip, 2-3 Views	IP/OP	261.00	67.78	137.02	97.87	195.75	72.51	Contact UH	97.87	247.95	208.80	182.70	
248		86850	Antibody Screen, Rbc, Each Serum Technique	IP/OP	167.00	43.37	84.17	9.77	125.25	46.39	Contact UH	9.77	158.65	133.60	116.90	
249		72040	X-Ray, Neck, Spine, 2-3 Views	IP/OP	243.00	63.11	137.02	97.87	182.25	67.51	Contact UH	97.87	230.85	194.40	170.10	
250		80307	Drug Tests	IP/OP	91.00	23.63	34.58	62.14	68.25	25.28	Contact UH	62.14	86.45	72.80	63.70	
251		83690	Blood Test, Lipase	IP/OP	55.00	14.28	20.90	6.89	41.25	15.28	Contact UH	6.89	52.25	44.00	38.50	
252		82550	Blood Test, Creatine Kinase (Ck)	IP/OP	45.00	11.69	17.10	6.51	33.75	12.50	Contact UH	6.51	42.75	36.00	31.50	
253		93306	Echocardiography, With Doppler	IP/OP	1892.00	491.35	818.47	584.62	1419.00	525.60	Contact UH	584.62	1797.40	1513.60	1324.40	
254		97018	Application Of A Modality To 1 Or More Areas; Paraffin Bath	OP	108.00	28.05	41.04	33.26	81.00	30.00	Contact UH	N/A	102.60	86.40	75.60	
255		77002	X-Ray, Guidance Of Needle Placement	IP/OP	845.00	219.45	321.10	260.26	633.75	234.74	Contact UH	N/A	802.75	676.00	591.50	
256		96361	Intravenous Infusion, Hydration; Each Additional Hour	IP/OP	298.00	77.39	67.79	48.42	223.50	82.78	Contact UH	48.42	283.10	238.40	208.60	
257		71045	X-Ray, Chest, 1 View	IP/OP	248.00	64.41	137.02	97.87	186.00	68.89	Contact UH	97.87	235.60	198.40	173.60	
258		92526	Therapy Swallowing Dysfunction And/Or Oral Function For Feeding	IP/OP	178.00	46.23	67.64	54.82	133.50	49.45	Contact UH	N/A	169.10	142.40	124.60	
259		97129	Therapeutic Interventions, 15 Minutes	IP/OP	178.00	46.23	67.64	54.82	133.50	49.45	Contact UH	N/A	169.10	142.40	124.60	
260		82248	Bilirubin; Direct	IP/OP	46.00	11.95	17.48	5.02	34.50	12.78	Contact UH	5.02	43.70	36.80	32.20	
261		86706	Hepatitis B Surface Antibody	IP/OP	91.00	23.63	34.58	10.74	68.25	25.28	Contact UH	10.74	86.45	72.80	63.70	
262		83036	Hemoglobin; Glycosylated (A1C)	IP/OP	57.00	14.80	21.66	9.71	42.75	15.83	Contact UH	9.71	54.15	45.60	39.90	
263		97164	Re-Evaluation Of Physical Therapy Established Plan Of Care	IP/OP	198.00	51.42	75.24	60.98	148.50	55.00	Contact UH	N/A	188.10	158.40	138.60	
264		97150	Therapeutic Procedure, Group	IP/OP	198.00	51.42	75.24	60.98	148.50	55.00	Contact UH	N/A	188.10	158.40	138.60	
265		97112	Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes	IP/OP	144.00	37.40	54.72	44.35	108.00	40.00	Contact UH	N/A	136.80	115.20	100.80	
266		97760	Orthotic(S) Management And Training	IP/OP	152.00	39.47	57.76	46.82	114.00	42.23	Contact UH	N/A	144.40	121.60	106.40	
267		93454	Catheter Placement In Coronary Artery(S) For Coronary Angiography	IP/OP	13574.00	3525.17	4911.83	3508.45	10180.50	3770.86	Contact UH	3508.45	12895.30	10859.20	9501.80	
268		84702	Gonadotropin, Chorionic (Hcg); Quantitative	IP/OP	52.00	13.50	19.76	15.05	39.00	14.45	Contact UH	15.05	49.40	41.60	36.40	
269		97163	Physical Therapy Evaluation: High Complexity	IP/OP	706.00	183.35	268.28	217.45	529.50	196.13	Contact UH	N/A	670.70	564.80	494.20	
270		97530	Therapeutic Activities	IP/OP	198.00	51.42	75.24	60.98	148.50	55.00	Contact UH	N/A	188.10	158.40	138.60	
271		97168	Re-Evaluation Of Occupational Therapy Established Plan Of Care	IP/OP	198.00	51.42	75.24	60.98	148.50	55.00	Contact UH	N/A	188.10	158.40	138.60	
272		87086	Culture, Bacterial, Urine	IP/OP	80.00	2										

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	Description	Gross Charge	Aetna Health Plan:		Aetna Health Plan:		Aetna Health Plan:		Devon Health		Amerigroup	Amerihealth: HMO and		Amerihealth:		Consumer Health		Correctional Medical		Coventry Health Care	
ID	Indicator	Billing Code					Better Health	Commercial	Medicare	Americare)						PPO	Medicare	Network: PPO	Services, In.	(FKA CCN and FirstHealth)					
277		93350	Echocardiography, Transthoracic	IP/OP		1892.00	491.35	818.47	584.62	1419.00			525.60	Contact UH	584.62		1797.40		1513.60		1324.40				
278		97116	Therapeutic Procedure, Gait Training	IP/OP		294.00	76.35	111.72	90.55	220.50			81.67	Contact UH	N/A		279.30		235.20		205.80				
279		92523	Evaluation Of Speech Sound Production	IP/OP		534.00	138.68	202.92	164.47	400.50			148.35	Contact UH	N/A		507.30		427.20		373.80				
280		83540	Blood Test, Iron	IP/OP		38.00	9.87	14.44	6.47	28.50			10.56	Contact UH	6.47		36.10		30.40		26.60				
281		84439	Blood Test, Free T4	IP/OP		78.00	20.26	29.64	24.02	58.50			21.67	Contact UH	9.02		74.10		62.40		54.60				
282		82728	Blood Test, Ferritin	IP/OP		115.00	29.87	43.70	13.63	86.25			31.95	Contact UH	13.63		109.25		92.00		80.50				
283		93308	Echocardiography, Transthoracic, Follow-Up Or Limited Study	IP/OP		1113.00	289.05	389.76	342.80	834.75			309.19	Contact UH	278.40		1057.35		890.40		779.10				
284		86592	Syphilis Test	IP/OP		44.00	11.43	16.72	13.55	33.00			12.22	Contact UH	4.27		41.80		35.20		30.80				
285		83605	Blood Test, Lactic Acid	IP/OP		49.00	12.73	18.62	11.57	36.75			13.61	Contact UH	11.57		46.55		39.20		34.30				
286		84100	Blood Test, Phosphorus	IP/OP		45.00	11.69	17.10	4.74	33.75			12.50	Contact UH	4.74		42.75		36.00		31.50				
287		93017	Cardiovascular Stress Test	IP/OP		1082.00	281.00	448.29	320.21	811.50			300.58	Contact UH	320.21		1027.90		865.60		757.40				
288		76856	Ultrasound Of Pelvis	IP/OP		462.00	119.98	184.41	131.72	346.50			128.34	Contact UH	131.72		438.90		369.60		323.40				
289		70496	Ct Scan, Head Or Brain	IP/OP		2319.00	602.24	302.57	216.12	1739.25			644.22	Contact UH	216.12		2203.05		1855.20		1623.30				
290		74170	Ct Scan, Abdomen With And Without Contrast	IP/OP		4344.00	1128.14	302.57	216.12	3258.00			1206.76	Contact UH	216.12		4126.80		3475.20		3040.80				
291		70486	Ct Scan, Maxillofacial Without Contrast	IP/OP		1093.00	283.85	184.41	131.72	819.75			303.64	Contact UH	131.72		1038.35		874.40		765.10				
292		71260	Ct Scan, Thorax With Contrast	IP/OP		1500.00	389.55	302.57	216.12	1125.00			416.70	Contact UH	216.12		1425.00		1200.00		1050.00				
293		88341	Immunohistochemistry Or Immunocytochemistry, Per Specimen	IP/OP		152.00	39.47	57.76	46.82	114.00			42.23	Contact UH	N/A		144.40		121.60		106.40				
294		87077	Culture, Bacterial; Aerobic Isolate	IP/OP		73.00	18.96	27.74	8.08	54.75			20.28	Contact UH	8.08		69.35		58.40		51.10				
295		76937	Ultrasound Guided Vascular Access	IP/OP		558.00	144.91	212.04	171.86	418.50			155.01	Contact UH	N/A		530.10		446.40		390.60				
296		77001	Fluoroscopic Guidance For Vein Dvc	IP/OP		454.00	117.90	172.52	139.83	340.50			126.12	Contact UH	N/A		431.30		363.20		317.80				
297		83615	Lactate Dehydrogenase (Ld), (Ldh)	IP/OP		55.00	14.28	20.90	6.04	41.25			15.28	Contact UH	6.04		52.25		44.00		38.50				
298		85652	Sedimentation Rate, Erythrocyte, Automated	IP/OP		23.00	5.97	8.74	2.70	17.25			6.39	Contact UH	2.70		21.85		18.40		16.10				
299		82306	Gonadotropin, Chorionic (Hcg), Quantitative	IP/OP		166.00	43.11	63.08	29.60	124.50			46.11	Contact UH	29.60		157.70		132.80		116.20				
300		86803	Hepatitis C Antibody	IP/OP		118.00	30.64	44.84	14.27	88.50			32.78	Contact UH	14.27		112.10		94.40		82.60				
301		80202	Blood Test, Vancomycin	IP/OP		97.00	25.19	36.86	13.54	72.75			26.95	Contact UH	13.54		92.15		77.60		67.90				
302		86704	Hepatitis B Core Antibody (Hbcab); Total	IP/OP		106.00	27.53	40.28	12.05	79.50			29.45	Contact UH	12.05		100.70		84.80		74.20				
303		84484	Blood Test, Troponin	IP/OP		76.00	19.74	28.88	12.47	57.00			21.11	Contact UH	12.47		72.20		60.80		53.20				
304		84145	Procalcitonin (Pct)	IP/OP		549.00	142.58	208.62	169.09	411.75			152.51	Contact UH	27.22		521.55		439.20		384.30				
305		86140	C-Reactive Protein	IP/OP		34.00	8.83	12.92	10.47	25.50			9.45	Contact UH	5.18		32.30		27.20		23.80				
306		87340	Infectious Agent Antigen Detection, Hep B	IP/OP		90.00	23.37	34.20	10.33	67.50			25.00	Contact UH	10.33		85.50		72.00		63.00				
307		84132	Blood Test, Potassium	IP/OP		26.00	6.75	9.88	4.76	19.50			7.22	Contact UH	4.76		24.70		20.80		18.20				
308		88305	Level Iv - Surgical Pathology, Gross And Microscopic Examination	IP/OP		105.00	27.27	84.17	60.12	78.75			29.17	Contact UH	60.12		99.75		84.00		73.50				
309		83550	Iron Binding Capacity	IP/OP		27.00	7.01	10.26	8.32	20.25			7.50	Contact UH	8.74		25.65		21.60		18.90				
310		87389	Infectious Agent Antigen Detection, With Hiv	IP/OP		99.00	25.71	37.62	30.49	74.25			27.50	Contact UH	24.08		94.05		79.20		69.30				
311		84295	Blood Test, Sodium	IP/OP		27.00	7.01	10.26	4.81	20.25			7.50	Contact UH	4.81		25.65		21.60		18.90				
312		83880	Blood Test, B-Type Natriuretic Peptide (Bnp)	IP/OP		152.00	39.47	57.76	46.82	114.00			42.23	Contact UH	39.26		144.40		121.60		106.40				
313		82570	Blood Test, Creatine Urine	IP/OP		51.00	13.24	19.38	5.18	38.25			14.17	Contact UH	5.18		48.45		40.80		35.70				
314		82247	Bilirubin; Total	IP/OP		46.00	11.95	17.48	5.02	34.50			12.78	Contact UH	5.02		43.70		36.80		32.20				
315		88185	Flow Cytometry, Cell Surface, Cytoplasmic, Or Nuclear Marker, Technical Component Only	IP/OP		64.00	16.62	24.32	19.71	48.00			17.78	Contact UH	N/A		60.80		51.20		44.80				
316		87070	Culture, Bacterial; Any Other Source Except Urine, Blood, Stool Or Aerobic	IP/OP		152.00	39.47	57.76	8.62	114.00			42.23	Contact UH	8.62		144.40		121.60		106.40				
317		87205	Smear, Primary Source With Interpretation; Gram Or Giemsa Stain For Bacteria, Fungi, Or Cell Type	IP/OP		39.00	10.13	14.82	4.27	29.25			10.83	Contact UH	4.27		37.05		31.20		27.30				
318		85007	Blood Count	IP/OP		20.00	5.19	7.60	3.80	15.00			5.56	Contact UH	3.80		19.00		16.00		14.00				
319		87081	Culture, Presumptive, Pathogenic Organisms, Screening Only	IP/OP		83.00	21.56	31.54	6.63	62.25			23.06	Contact UH	6.63		78.85		66.40		58.10				
320		74176	Ct Scan, Abdomen And Pelvis Without Contrast	IP/OP		971.00	252.17	389.76	278.40	728.25			269.74	Contact UH	278.40		922.45		776.80		679.70				
321		82435	Blood Test, Chloride	IP/OP		26.00	6.75	9.88	8.01	19.50			7.22	Contact UH	4.60		24.70		20.80		18.20				

Notes:

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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	32.00	28.80	12.25	9.60	12.25	N/A	12.25	28.80	25.60	24.00	30.40
2		80053	Blood Test, Comprehensive Group Of Blood Chemicals	I/OP	51.00	45.90	19.52	15.30	19.52	N/A	19.52	45.90	40.80	38.25	48.45
3		80061	Blood Test, Lipids (Cholesterol And Triglycerides)	I/OP	119.00	107.10	45.55	35.70	45.55	N/A	45.55	107.10	95.20	89.25	113.05
4		84153	Psa (Prostate Specific Antigen)	I/OP	156.00	140.40	59.72	46.80	59.72	N/A	59.72	140.40	124.80	117.00	148.20
5		80076	Liver Function Blood Test Panel	I/OP	66.00	59.40	25.26	19.80	25.26	N/A	25.26	59.40	52.80	49.50	62.70
6		70450	Ct Scan, Head Or Brain, Without Contrast	I/OP	2425.00	2182.50	248.82	131.72	248.82	N/A	248.82	2182.50	1940.00	1818.75	2303.75
7		74177	Ct Scan Of Abdomen And Pelvis With Contrast	I/OP	1500.00	1350.00	841.64	445.55	841.64	N/A	841.64	1350.00	1200.00	1125.00	1425.00
8		81001	Manual Urinalysis Test With Examination Using Microscope	I/OP	34.00	30.60	13.02	10.20	13.02	N/A	13.02	30.60	27.20	25.50	32.30
9		76830	Ultrasound Pelvis Through Vagina	I/OP	462.00	415.80	248.82	131.72	248.82	N/A	248.82	415.80	369.60	346.50	438.90
10		62323	Injection Of Substance Into Spinal Canal Of Lower Back Or Sacrum Using Imaging Guidance	I/OP	2311.00	2079.90	1451.30	768.29	1451.30	N/A	1451.30	2079.90	1848.80	1733.25	2195.45
11		85610	Blood Test, Clotting Time	I/OP	41.00	36.90	15.69	12.30	15.69	N/A	15.69	36.90	32.80	30.75	38.95
12		85730	Coagulation Assessment Blood Test	I/OP	49.00	44.10	18.76	14.70	18.76	N/A	18.76	44.10	39.20	36.75	46.55
13		80048	Basic Metabolic Panel	I/OP	63.00	56.70	24.12	18.90	24.12	N/A	24.12	56.70	50.40	47.25	59.85
14		72193	Ct Scan, Pelvis, With Contrast	I/OP	1621.00	1458.90	408.25	216.12	408.25	N/A	408.25	1458.90	1296.80	1215.75	1539.95
15		93452	Insertion Of Catheter Into Left Heart For Diagnosis	OP	13574.00	12216.60	6627.46	3508.45	6627.46	N/A	6627.46	12216.60	10859.20	10180.50	12895.30
16		76700	Ultrasound Of Abdomen	I/OP	473.00	425.70	248.82	131.72	248.82	N/A	248.82	425.70	378.40	354.75	449.35
17		73721	Mri Scan Of Leg Joint	I/OP	1736.00	1562.40	525.90	278.40	525.90	N/A	525.90	1562.40	1388.80	1302.00	1649.20
18		59400	Routine Obstetric Care For Vaginal Delivery, Including Pre-And Post-Delivery Care	I/OP	7827.00	7044.30	2996.18	2348.10	2996.18	N/A	2996.18	7044.30	6261.60	5870.25	7435.65
19		77067	Mammography, Screening, Bilateral	I/OP	472.00	424.80	180.68	141.60	180.68	N/A	180.68	424.80	377.60	354.00	448.40
20		43239	Biopsy Of The Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope	I/OP	2757.00	2481.30	1849.35	979.01	1849.35	N/A	1849.35	2481.30	2205.60	2067.75	2619.15
21		43235	Diagnostic Examination Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope	I/OP	2067.00	1860.30	1849.35	979.01	1849.35	N/A	1849.35	1860.30	1653.60	1550.25	1963.65
22		72110	X-Ray, Lower Back, Minimum Four Views	I/OP	372.00	334.80	248.82	131.72	248.82	N/A	248.82	334.80	297.60	279.00	353.40
23		64483	Injections Of Anesthetic And/Or Steroid Drug Into Lower Or Sacral Spine Nerve Root Using Imaging	I/OP	1125.00	1012.50	1881.44	996.00	1881.44	N/A	1881.44	1012.50	900.00	843.75	1068.75
24		45385	Removal Of Polyps Or Growths Of Large Bowel Using An Endoscope	I/OP	2757.00	2481.30	2370.03	1254.65	2370.03	N/A	2370.03	2481.30	2205.60	2067.75	2619.15
25		77066	Mammography Of Both Breasts	I/OP	500.00	450.00	191.40	150.00	191.40	N/A	191.40	450.00	400.00	375.00	475.00
26		45380	Biopsy Of Large Bowel Using An Endoscope	OP	2757.00	2481.30	2370.03	1254.65	2370.03	N/A	2370.03	2481.30	2205.60	2067.75	2619.15
27		49505	Repair Of Groin Hernia Patient Age 5 Years Or Older	OP	8310.00	7479.00	7271.59	3849.44	7271.59	N/A	7271.59	7479.00	6648.00	6232.50	7894.50
28		97110	Physical Therapy, Therapeutic Exercise	I/OP	152.00	136.80	58.19	45.60	58.19	N/A	58.19	136.80	121.60	114.00	144.40
29		70553	Mri Scan Of Brain Before And After Contrast	I/OP	9266.00	8339.40	841.64	445.55	841.64	N/A	841.64	8339.40	7412.80	6949.50	8802.70
30		81002	Automated Urinalysis Test	I/OP	21.00	18.90	8.04	6.30	8.04	N/A	8.04	18.90	16.80	15.75	19.95
31		66821	Removal Of Recurring Cataract In Lens Capsule Using Laser	OP	2086.00	1877.40	1150.21	608.90	1150.21	N/A	1150.21	1877.40	1668.80	1564.50	1981.70
32		72148	Mri Scan Of Lower Spinal Canal	I/OP	1335.00	1201.50	525.90	278.40	525.90	N/A	525.90	1201.50	1068.00	1001.25	1268.25
33		90832	Psychotherapy, 30 Min	OP	494.00	444.60	305.81	161.89	305.81	N/A	305.81	444.60	395.20	370.50	469.30
34		55700	Biopsy Of Prostate Gland	OP	6618.00	5956.20	4092.27	2166.37	4092.27	N/A	4092.27	5956.20	5294.40	4963.50	6287.10
35		45391	Ultrasound Examination Of Lower Large Bowel Using An Endoscope	OP	2825.00	2542.50	2370.03	1254.65	2370.03	N/A	2370.03	2542.50	2260.00	2118.75	2683.75
36		77065	Mammography Of One Breast	I/OP	449.00	404.10	171.88	134.70	171.88	N/A	171.88	404.10	359.20	336.75	426.55
37		19120	Removal Of 1 Or More Breast Growth, Open Procedure	OP	11655.00	10489.50	7217.09	3820.59	7217.09	N/A	7217.09	10489.50	9324.00	8741.25	11072.25
38		90834	Psychotherapy, 45 Min	OP	494.00	444.60	305.81	161.89	305.81	N/A	305.81	444.60	395.20	370.50	469.30
39		90837	Psychotherapy, 60 Min	OP	494.00	444.60	305.81	161.89	305.81	N/A	305.81	444.60	395.20	370.50	469.30
40		85025	Complete Blood Cell Count, With Differential White Blood Cells, Automated	I/OP	40.00	36.00	15.31	12.00	15.31	N/A	15.31	36.00	32.00	30.00	38.00
41		84443	Blood Test, Thyroid Stimulating Hormone (Tsh)	I/OP	148.00	133.20	56.65	44.40	56.65	N/A	56.65	133.20	118.40	111.00	140.60
42		90853	Group Psychotherapy	OP	297.00	267.30	171.01	90.53	171.01	N/A	171.01	267.30	237.60	222.75	282.15
43		45378	Diagnostic Examination Of Large Bowel Using An Endoscope	I/OP	2757.00	2481.30	1813.74	960.16	1813.74	N/A	1813.74	2481.30	2205.60	2067.75	2619.15
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	142867.00	56236.07	63058.00	39871.84	66776.00	N/A	N/A	Contact UH	N/A
57	DRG - 470		Major Joint Replacement Or Reattachment Of Lower Extremity Without Major Comorbid Conditions	IP	N/A	N/A	70409.00	32690.93	31077.00	19650.03	32909.00	N/A	N/A	Contact UH	N/A
58	DRG - 473		Cervical Spinal Fusion Without Comorbid Conditions (Cc) Or Major Comorbid Conditions Or Complic	IP	N/A	N/A	83965.00	40097.49	37060.00	23433.28	39245.00	N/A	N/A	Contact UH	N/A
59	DRG - 743		Uterine And Adnexa Procedures For Non-Malignancy Without Comorbid Conditions (Cc) Or Major C	IP	N/A	N/A	39476.00	23790.77	17423.00	11016.97	18451.00	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	347513.00	127073.27	153383.00	96985.10	162428.00	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:
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		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	472.00	424.80	248.82	131.72	248.82	N/A	248.82	424.80	377.60	354.00	448.40
71		86480	Tuberculosis Test	IP/OP	229.00	206.10	87.66	68.70	87.66	N/A	87.66	206.10	183.20	171.75	217.55
72		83735	Blood Test, Magnesium	IP/OP	45.00	40.50	17.23	13.50	17.23	N/A	17.23	40.50	36.00	33.75	42.75
73		DRG - 115	Extraocular Procedures Except Orbit	IP	N/A	N/A	48198.00	27545.65	21273.00	13451.25	22528.00	N/A	N/A	Contact UH	N/A
74		DRG - 117	Intraocular Procedures Without Complications	IP	N/A	N/A	35473.00	22728.55	15657.00	9900.07	16580.00	N/A	N/A	Contact UH	N/A
75		DRG - 788	Cesarean Section Without Sterilization Without Complications	IP	N/A	N/A	31871.00	20945.04	14067.00	6969.05	14897.00	N/A	N/A	Contact UH	N/A
76		DRG - 906	Hand Procedures For Injuries	IP	N/A	N/A	65222.00	31571.89	28787.00	18202.30	30485.00	N/A	N/A	Contact UH	N/A
77		DRG - 482	Hipand Femur Procedures Except Major Joint Without Complications	IP	N/A	N/A	58898.00	29739.67	25996.00	16437.57	27529.00	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	62062.00	32127.35	27392.00	17320.43	29008.00	N/A	N/A	Contact UH	N/A
79		DRG - 502	Soft Tissue Procedures Without Complications	IP	N/A	N/A	45686.00	26110.03	20164.00	12750.10	21354.00	N/A	N/A	Contact UH	N/A
80		DRG - 505	Foot Procedures W/O Co/Mcc	IP	N/A	N/A	55901.00	31237.92	24673.00	15601.12	26128.00	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	53860.00	28680.93	23772.00	15031.31	25174.00	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	51223.00	27389.10	22609.00	14295.60	23942.00	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	29267.70	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	73498.00	33536.30	32440.00	20512.15	34353.00	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	176667.00	67316.34	77976.00	49304.80	82574.00	N/A	N/A	Contact UH	N/A
86		DRG - 355	Hernia Procedures Except Inguinal And Femoral Without Complications	IP	N/A	N/A	47940.00	26427.77	21159.00	13379.16	22407.00	N/A	N/A	Contact UH	N/A
87		DRG - 419	Laparoscopic Cholecystectomy Without C.D.E. Without Complications	IP	N/A	N/A	46149.00	25907.10	20369.00	12879.47	21570.00	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	63622.00	31637.99	28081.00	17755.93	29737.00	N/A	N/A	Contact UH	N/A
89		72131	Ct Scan, Lumbar Spine	IP/OP	265.00	238.50	248.82	131.72	248.82	N/A	248.82	238.50	212.00	198.75	251.75
90		87491	Infectious Agent Detection, Chlamydia Trachomatis	IP/OP	155.00	139.50	59.33	46.50	59.33	N/A	59.33	139.50	124.00	116.25	147.25
91		73700	Ct Scan, Lower Extremities	IP/OP	265.00	238.50	248.82	131.72	248.82	N/A	248.82	238.50	212.00	198.75	251.75
92		73630	X-Ray, Foot	IP/OP	568.00	511.20	184.88	97.87	184.88	N/A	184.88	511.20	454.40	426.00	539.60
93		73560	X-Ray, Knee	IP/OP	590.00	531.00	184.88	97.87	184.88	N/A	184.88	531.00	472.00	442.50	560.50
94		72190	X-Ray, Pelvis, 3 Views	IP/OP	232.00	208.80	248.82	131.72	248.82	N/A	248.82	208.80	185.60	174.00	220.40
95		92557	Comprehensive Audiometry Threshold Evaluation And Speech Recognition	IP/OP	866.00	779.40	319.09	168.92	319.09	N/A	319.09	779.40	692.80	649.50	822.70
96		76512	Ophthalmic Ultrasound, Diagnostic, B-Scan With And Without Quant. A	IP/OP	472.00	424.80	248.82	131.72	248.82	N/A	248.82	424.80	377.60	354.00	448.40
97		70355	X-Ray, Jaws, Panoramic	IP/OP	299.00	269.10	184.88	97.87	184.88	N/A	184.88	269.10	239.20	224.25	284.05
98		96415	Chemotherapy Administration, Intravenous Infusion Technique	IP/OP	192.00	172.80	141.69	75.01	141.69	N/A	141.69	172.80	153.60	144.00	182.40
99		96367	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis; Additional Sequential Infusion Of A N	IP/OP	192.00	172.80	141.69	75.01	141.69	N/A	141.69	172.80	153.60	144.00	182.40
100		70498	Ct Scan, Neck	IP/OP	2319.00	2087.10	408.25	216.12	408.25	N/A	408.25	2087.10	1855.20	1739.25	2203.05
101		76376	3D Rendering With Interpretation And Post Process Supervision	IP/OP	265.00	238.50	101.44	79.50	101.44	N/A	101.44	238.50	212.00	198.75	251.75
102		92567	Tympanometry	OP	196.00	176.40	77.35	40.95	77.35	N/A	77.35	176.40	156.80	147.00	186.20
103		92235	Fluorescein Angiography	OP	903.00	812.70	604.88	320.21	604.88	N/A	604.88	812.70	722.40	677.25	857.85
104		76815	Abdominal Ultrasound Of Pregnant Uterus	IP/OP	403.00	362.70	248.82	131.72	248.82	N/A	248.82	362.70	322.40	302.25	382.85
105		96368	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis; Concurrent Infusion	IP/OP	135.00	121.50	51.68	40.50	51.68	N/A	51.68	121.50	108.00	101.25	128.25
106		90472	Immunization Administration	IP/OP	133.00	119.70	50.91	39.90	50.91	N/A	50.91	119.70	106.40	99.75	126.35
107		92603	Diagnostic Analysis Of Cochlear Implant, Age 7 Years Or Older; With Programming	OP	797.00	717.30	319.09	168.92	319.09	N/A	319.09	717.30	637.60	597.75	757.15
108		92250	Fundus Photography With Interpretation And Report	OP	376.00	338.40	257.72	136.43	257.72	N/A	257.72	338.40	300.80	282.00	357.20
109		96523	Irrigation Of Implanted Venous Access Device	IP/OP	232.00	208.80	127.22	67.35	127.22	N/A	127.22	208.80	185.60	174.00	220.40
110		90746	Hepatitis B Vaccine (Hepb), Adult Dosage, 3 Dose Schedule, For Intramuscular Use	IP/OP	440.00	396.00	168.43	132.00	168.43	N/A	168.43	396.00	352.00	330.00	418.00
111		89051	Cell Count, Miscellaneous Body Fluids	IP/OP	40.00	36.00	15.31	12.00	15.31	N/A	15.31	36.00	32.00	30.00	38.00
112		73590	X-Ray, Lower Leg	IP/OP	568.00	511.20	184.88	97.87	184.88	N/A	184.88	511.20	454.40	426.00	539.60
113		72170	X-Ray, Pelvis, 1-2 Views	IP/OP	238.00	214.20	248.82	131.72	248.82	N/A	248.82	214.20	190.40	178.50	226.10
114		73070	X-Ray, Elbow	IP/OP	568.00	511.20	184.88	97.87	184.88	N/A	184.88	511.20	454.40	426.00	539.60
115		72125	Ct Scan, Neck Spine Without Contrast	IP/OP	1240.00	1116.00	248.82	131.72	248.82	N/A	248.82	1116.00	992.00	930.00	1178.00
116		73030	X-Ray, Shoulder	IP/OP	568.00	511.20	184.88	97.87	184.88	N/A	184.88	511.20	454.40	426.00	539.60
117		73060	X-Ray, Humerus	IP/OP	568.00	511.20	184.88	97.87	184.88	N/A	184.88	511.20	454.40	426.00	539.60
118		72100	X-Ray, Lumbar Spine, 2-3 Views	IP/OP	437.00	393.30	248.82	131.72	248.82	N/A	248.82	393.30	349.60	327.75	415.15
119		73120	Hepatitis B Surface Antibody (Hbsab)	IP/OP	326.00	293.40	248.82	131.72	248.82	N/A	248.82	293.40	260.80	244.50	309.70
120		73610	X-Ray, Ankle	IP/OP	222.00	199.80	184.88	97.87	184.88	N/A	184.88	199.80	177.60	166.50	210.90
121		73110	X-Ray, Wrist	IP/OP	336.00	302.40	184.88	97.87	184.88	N/A	184.88	302.40	268.80	252.00	319.20
122		73090	X-Ray, Forearm	IP/OP	568.00	511.20	184.88	97.87	184.88	N/A	184.88	511.20	454.40	426.00	539.60
123		93312	Echocardiography, Transesophageal	IP/OP	2631.00	2367.90	1104.35	584.62	1104.35	N/A	1104.35	2367.90	2104.80	1973.25	2499.45
124		97140	Manual Therapy Techniques, 1 Or More Regions, Each 15 Minutes	IP/OP	198.00	178.20	75.79	59.40	75.79	N/A	75.79	178.20	158.40	148.50	188.10
125		92611	Motion Fluoroscopic Evaluation Of Swallowing Function By Cine Or Video Recording	IP/OP	940.00	846.00	359.83	282.00	359.83	N/A	359.83	846.00	752.00	705.00	893.00
126		73562	X-Ray, Knee, 3 Views	IP/OP	238.00	214.20	184.88	97.87	184.88	N/A	184.88	214.20	190.40	178.50	226.10
127		96374	Therapeutic, Prophylactic, Or Diagnostic Injection; Intravenous Push, Single Or Initial Substance/D	IP/OP	725.00	652.50	467.57	247.52	467.57	N/A	467.57	652.50	580.00	543.75	688.75
128		92950	Cardiopulmonary Resuscitation	IP/OP	903.00	812.70	604.88	320.21	604.88	N/A	604.88	812.70	722.40	677.25	857.85
129		77386	Intensity Modulated Radiation Therapy Delivery Complex	IP/OP	2248.00	2023.20	1240.03	656.45	1240.03	N/A	1240.03	2023.20	1686.00	2135.60	
130		93990	Duplex Scan Of Hemodialysis Access	IP/OP	1979.00	1781.10	248.82	131.72	248.82	N/A	248.82	1781.10	1583.20	1484.25	1880.05
131		93926	Duplex Scan Of Lower Extremity Arteries Or Arterial Bypass Grafts; Unilateral Or Limited Study	IP/OP	449.00	404.10	248.82	131.72	248.82	N/A	248.82	404.10	359.20	336.75	426.55
132		84703	Blood Test, Human Chorionic Gonadotropin (Hcg)	IP/OP	66.00	59.40	25.26	19.80	25.26	N/A	25.26	59.40	52.80	49.50	62.70
133		93978	Duplex Scan Of Aorta, Inferior Vena Cava, Iliac Vasculature, Or Bypass Grafts; Complete Study	IP/OP	706.00	635.40	525.90	278.40	525.90	N/A	525.90	635.40	564.80	529.50	670.70
134		93925	Duplex Scan Of Lower Extremity Arteries Or Arterial Bypass Grafts; Complete Bilateral Study	IP/OP	706.00	635.40	525.90	278.40	525.90	N/A	525.90	635.40	564.80	529.50	670.70
135		90375	Rabies Immune Globulin (R												

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 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	466.00	419.40	178.38	139.80	178.38	N/A	178.38	419.40	372.80	349.50	442.70
140		94664	Demonstration And/Or Evaluation Of Patient Utilization Of An Aerosol Generator, Nebulizer, Metered	IP/OP	742.00	667.80	429.60	227.42	429.60	N/A	429.60	667.80	593.60	556.50	704.90
141		94667	Manipulation Chest Wall	IP/OP	376.00	338.40	257.72	136.43	257.72	N/A	257.72	338.40	300.80	282.00	357.20
142		94660	Continuous Positive Airway Pressure Ventilation (Cpap)	IP/OP	613.00	551.70	429.60	227.42	429.60	N/A	429.60	551.70	490.40	459.75	582.35
143		95816	Electroencephalogram (Eeg)	IP/OP	977.00	879.30	604.88	320.21	604.88	N/A	604.88	879.30	781.60	732.75	928.15
144		96521	Refilling And Maintenance Of Portable Pump	IP/OP	710.00	639.00	467.57	247.52	467.57	N/A	467.57	639.00	568.00	532.50	674.50
145		97597	Debridement	IP/OP	663.00	596.70	410.42	217.27	410.42	N/A	410.42	596.70	530.40	497.25	629.85
146		90651	Hpv Vaccine	IP/OP	606.00	545.40	231.98	181.80	231.98	N/A	231.98	545.40	484.80	454.50	575.70
147		96413	Chemotherapy Administration, Intravenous Infusion Technique; Up To 1 Hour	IP/OP	1194.00	1074.60	728.74	385.78	728.74	N/A	728.74	1074.60	955.20	895.50	1134.30
148		92570	Acoustic Immittance Testing	OP	533.00	479.70	319.09	168.92	319.09	N/A	319.09	479.70	426.40	399.75	506.35
149		92133	Scanning Computerized Ophthalmic Diagnostic Imaging, Optic Nerve	OP	206.00	185.40	127.22	67.35	127.22	N/A	127.22	185.40	164.80	154.50	195.70
150		90675	Rabies Vaccine, For Intramuscular Use	IP/OP	954.00	858.60	652.99	345.68	652.99	N/A	652.99	858.60	763.20	715.50	906.30
151		96417	Chemotherapy Administration, Intravenous Infusion Technique	IP/OP	417.00	375.30	141.69	75.01	141.69	N/A	141.69	375.30	333.60	312.75	396.15
152		92083	Visual Field Examination	IP/OP	376.00	338.40	257.72	136.43	257.72	N/A	257.72	338.40	300.80	282.00	357.20
153		92136	Ophthalmic Biometry	OP	414.00	372.60	257.72	136.43	257.72	N/A	257.72	372.60	331.20	310.50	393.30
154		96401	Chemotherapy Administration, Subcutaneous Or Intramuscular; Non-Hormonal Anti-Neoplastic	IP/OP	1720.00	1548.00	141.69	75.01	141.69	N/A	141.69	1548.00	1376.00	1290.00	1634.00
155		96402	Chemotherapy Administration, Subcutaneous Or Intramuscular; Hormonal Anti-Neoplastic	OP	291.00	261.90	141.69	75.01	141.69	N/A	141.69	261.90	232.80	218.25	276.45
156		90734	Meningococcal Conjugate Vaccine	IP/OP	519.00	467.10	198.67	155.70	198.67	N/A	198.67	467.10	415.20	389.25	493.05
157		96365	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis; Initial, Up To 1 Hour	IP/OP	725.00	652.50	467.57	247.52	467.57	N/A	467.57	652.50	580.00	543.75	688.75
158		90396	Varicella-Zoster Immune Globulin, Human, For Intramuscular Use	OP	2998.00	2698.20	4639.38	2456.00	4639.38	N/A	4639.38	2698.20	2398.40	2248.50	2848.10
159		90670	Pneumococcal Conjugate Vaccine, 13 Valent (Pcv13), For Intramuscular Use	IP/OP	568.00	511.20	217.43	170.40	217.43	N/A	217.43	511.20	454.40	426.00	539.60
160		77336	Continuing Medical Physics Consultation	IP/OP	1377.00	1239.30	290.00	153.52	290.00	N/A	290.00	1239.30	1101.60	1032.75	1308.15
161		92602	Diagnostic Analysis Of Cochlear Implant, Patient Younger Than 7 Yrs Of Age; Subsequent Reprogr	OP	870.00	783.00	319.09	168.92	319.09	N/A	319.09	783.00	696.00	652.50	826.50
162		92025	Computerized Corneal Topography	OP	206.00	185.40	127.22	67.35	127.22	N/A	127.22	185.40	164.80	154.50	195.70
163		93923	Complete Bilateral Noninvasive Physiologic Studies Of Upper Or Lower Extremity Arteries, 3 Or Mon	IP/OP	1399.00	1259.10	319.09	168.92	319.09	N/A	319.09	1259.10	1119.20	1049.25	1329.05
164		82948	Glucose Test	IP/OP	40.00	36.00	15.31	12.00	15.31	N/A	15.31	36.00	32.00	30.00	38.00
165		94150	Vital Capacity, Total (Separate Procedure)	IP/OP	533.00	479.70	319.09	168.92	319.09	N/A	319.09	479.70	426.40	399.75	506.35
166		94060	Bronchodilation Responsiveness	IP/OP	617.00	555.30	604.88	320.21	604.88	N/A	604.88	555.30	493.60	462.75	586.15
167		90732	Pneumococcal Polysaccharide Vaccine	IP/OP	116.00	104.40	44.40	34.80	44.40	N/A	44.40	104.40	92.80	87.00	110.20
168		92584	Electrocochleography	OP	877.00	789.30	319.09	168.92	319.09	N/A	319.09	789.30	701.60	657.75	833.15
169		92550	Tympanometry And Reflex Threshold Measurements	OP	533.00	479.70	319.09	168.92	319.09	N/A	319.09	479.70	426.40	399.75	506.35
170		92626	Evaluation Of Auditory Function, First Hour	OP	626.00	563.40	319.09	168.92	319.09	N/A	319.09	563.40	500.80	469.50	594.70
171		92579	Visual Reinforcement Audiometry (Vra)	IP/OP	533.00	479.70	319.09	168.92	319.09	N/A	319.09	479.70	426.40	399.75	506.35
172		92582	Conditioning Play Audiometry	OP	866.00	779.40	319.09	168.92	319.09	N/A	319.09	779.40	692.80	649.50	822.70
173		90686	Influenza Virus Vaccine	IP/OP	78.00	70.20	29.86	23.40	29.86	N/A	29.86	70.20	62.40	58.50	74.10
174		92604	Diagnostic Analysis Of Cochlear Implant, Age 7 Yrs Or Older	OP	569.00	512.10	319.09	168.92	319.09	N/A	319.09	512.10	455.20	426.75	540.55
175		90715	Tetanus, Diphtheria Toxoids And Acellular Pertussis Vaccine (Tdap), 7 Years+	IP/OP	163.00	146.70	62.40	48.90	62.40	N/A	62.40	146.70	130.40	122.25	154.85
176		86901	Blood Typing Rhd	IP/OP	133.00	119.70	77.35	40.95	77.35	N/A	77.35	119.70	106.40	99.75	126.35
177		93922	Limited Bilateral Noninvasive Physiologic Studies Of Upper Or Lower Extremity Arteries	IP/OP	820.00	738.00	257.72	136.43	257.72	N/A	257.72	738.00	656.00	615.00	779.00
178		36415	Routine Venipuncture	IP/OP	56.00	50.40	21.44	16.80	21.44	N/A	21.44	50.40	44.80	42.00	53.20
179		92610	Evaluation Of Oral And Pharyngeal Swallowing Function	IP/OP	243.00	218.70	93.02	72.90	93.02	N/A	93.02	218.70	194.40	182.25	230.85
180		92522	Evaluation Of Speech Sound Production	IP/OP	534.00	480.60	204.42	160.20	204.42	N/A	204.42	480.60	427.20	400.50	507.30
181		93880	Duplex Scan Of Extracranial Arteries; Complete Bilateral Study	IP/OP	891.00	801.90	525.90	278.40	525.90	N/A	525.90	801.90	712.80	668.25	846.45
182		97802	Medical Nutrition Therapy	OP	475.00	427.50	181.83	142.50	181.83	N/A	181.83	427.50	380.00	356.25	451.25
183		86703	Antibody; Hiv-1 And Hiv-2, Single Result	IP/OP	52.00	46.80	19.91	15.60	19.91	N/A	19.91	46.80	41.60	39.00	49.40
184		93970	Duplex Scan Of Extremity Veins; Complete Bilateral Study	IP/OP	2178.00	1960.20	525.90	278.40	525.90	N/A	525.90	1960.20	1742.40	1633.50	2069.10
185		96376	Therapeutic, Prophylactic, Or Diagnostic Injection Sequential Intravenous Push Of The Same Subst	IP/OP	199.00	179.10	76.18	59.70	76.18	N/A	76.18	179.10	159.20	149.25	189.05
186		90744	Hepatitis B Vaccine (Hepb), Pediatric/Adolescent Dosage, 3 Dose Schedule	IP/OP	161.00	144.90	61.63	48.30	61.63	N/A	61.63	144.90	128.80	120.75	152.95
187		93971	Duplex Scan Of Extremity Veins; Unilateral Or Limited Study	IP/OP	449.00	404.10	248.82	131.72	248.82	N/A	248.82	404.10	359.20	336.75	426.55
188		90471	Immunization Administration	IP/OP	229.00	206.10	141.69	75.01	141.69	N/A	141.69	206.10	183.20	171.75	217.55
189		90632	Hepatitis A Vaccine (Hepa), Adult Dosage, For Intramuscular Use	IP/OP	210.00	189.00	80.39	63.00	80.39	N/A	80.39	189.00	168.00	157.50	199.50
190		99153	Mod Sedation Services Provided By The Same Physician	OP	245.00	220.50	93.79	73.50	93.79	N/A	93.79	220.50	196.00	183.75	232.75
191		93303	Transthoracic Echocardiography	IP/OP	2631.00	2367.90	1104.35	584.62	1104.35	N/A	1104.35	2367.90	2104.80	1973.25	2499.45
192		73552	X-Ray, Femur, 2 Views	IP/OP	261.00	234.90	184.88	97.87	184.88	N/A	184.88	234.90	208.80	195.75	247.95
193		96372	Therapeutic, Prophylactic, Or Diagnostic Injection; Subcutaneous Or Intramuscular	IP/OP	176.00	158.40	141.69	75.01	141.69	N/A	141.69	158.40	140.80	132.00	167.20
194		95851	Range Of Motion Measurements And Report	IP/OP	108.00	97.20	41.34	32.40	41.34	N/A	41.34	97.20	86.40	81.00	102.60
195		77300	Basic Radiation Dosimetry Calculation	IP/OP	620.00	558.00	290.00	153.52	290.00	N/A	290.00	558.00	496.00	465.00	589.00
196		96366	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis, Each Additional Hour	IP/OP	243.00	218.70	91.47	48.42	91.47	N/A	91.47	218.70	194.40	182.25	230.85
197		94761	Noninvasive Ear Or Pulse Oximetry For Oxygen Saturation; Multiple Determinations	IP/OP	360.00	324.00	137.81	108.00	137.81	N/A	137.81	324.00	288.00	270.00	342.00
198		94640	Inhalation Therapy	IP/OP	613.00	551.70	429.60	227.42	429.60	N/A	429.60	551.70	490.40	459.75	582.35
199		77412	Radiation Therapy Delivery	IP/OP	860.00	774.00	552.46	292.46	552.46	N/A	552.46	774.00	688.00	645.00	817.00
200		77063	Screening Digital Breast Tomosynthesis, Bilateral	IP/OP	500.00	450.00	191.40	150.00	191.40	N/A	191.40	450.00	400.00	375.00	475.00
201		87591	Infectious Agent Detection, Neisseria Gonorrhoeae	IP/OP	155.00	139.50	59.33	46.50	59.33	N/A	59.33	139.50	124.00	116.25	147.25
202		97535	Self-Care/Home Management Training	IP/OP	198.00	178.20	75.79	59.40	75.79	N/A	75.79	178.20	158.40	148.50	188.10
203		70551	Mri, Brain Without Contrast	IP/OP	5732.00	5158.80	525.90	278.40	525.90	N/A	525.90	5158.80	4585.60	4299.00	5445.40
204		97162	Physical Therapy Evaluation, Complex, 30 Minutes	IP/OP	360.00	324.00	137.81	108.00	137.81	N/A	137.81	324.00	288.00	270.00	342.00
205		92507	Therapy Speech And/Or Auditory	IP/OP	178.00	160.20	68.14	53.40	68.14	N/A	68.14	160.20	142.40	133.50	169.10
206		92612	Flexible Endoscopic Evaluation Of Swallowing By Cine Or Video Recording	IP/OP	902.00	811.80	345.29	270.60	345.29	N/A	345.29	811.80	721.60	676.50	856.90
207		71250	Ct Scan, Thorax Without Contrast	IP/OP	971.00	873.90	248.82	131.72	248.82	N/A	248.82	873.90	776.80	728.25	922.45

Notes:
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The gross charges for the DRG based billing codes are average charge per case.
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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
208		76705	Ultrasound Of Abdomen, Limited	IP/OP	739.00	665.10	248.82	131.72	248.82	N/A	248.82	665.10	591.20	554.25	702.05
209		95813	Electroencephalogram (Eeg) Extended Monitoring; 61-119 Minutes	IP/OP	771.00	693.90	604.88	320.21	604.88	N/A	604.88	693.90	616.80	578.25	732.45
210		93005	Electrocardiogram	IP/OP	225.00	202.50	127.22	67.35	127.22	N/A	127.22	202.50	180.00	168.75	213.75
211		95819	Electroencephalogram (Eeg)	IP/OP	977.00	879.30	604.88	320.21	604.88	N/A	604.88	879.30	781.60	732.75	928.15
212		94727	Gas Dilution	IP/OP	533.00	479.70	319.09	168.92	319.09	N/A	319.09	479.70	426.40	399.75	506.35
213		94760	Noninvasive Ear Or Pulse Oximetry For Oxygen Saturation	IP/OP	128.00	115.20	49.00	38.40	49.00	N/A	49.00	115.20	102.40	96.00	121.60
214		94644	Continuous Inhalation Therapy With Aerosol Medication For Acute Airway Obstruction; First Hour	IP/OP	376.00	338.40	257.72	136.43	257.72	N/A	257.72	338.40	300.80	282.00	357.20
215		94645	Continuous Inhalation Therapy With Aerosol Medication For Acute Airway Obstruction; Each Additional Hour	IP/OP	386.00	347.40	147.76	115.80	147.76	N/A	147.76	347.40	308.80	289.50	366.70
216		94003	Ventilation Assist And Management; Hospital Inpatient/Observation, Each Subsequent Day	IP/OP	940.00	846.00	1113.43	589.43	1113.43	N/A	1113.43	846.00	752.00	705.00	893.00
217		94002	Ventilation Assist And Management; Hospital Inpatient/Observation, Initial Day	IP/OP	1862.00	1675.80	1113.43	589.43	1113.43	N/A	1113.43	1675.80	1489.60	1396.50	1768.90
218		94681	Oxygen Uptake, Expired Gas Analysis	IP/OP	903.00	812.70	604.88	320.21	604.88	N/A	604.88	812.70	722.40	677.25	857.85
219		94010	Spirometry	IP/OP	533.00	479.70	319.09	168.92	319.09	N/A	319.09	479.70	426.40	399.75	506.35
220		93888	Transcranial Doppler Study Of The Intracranial Arteries; Limited Study	IP/OP	836.00	752.40	248.82	131.72	248.82	N/A	248.82	752.40	668.80	627.00	794.20
221		77417	Therapeutic Radiology Port Image(S)	IP/OP	360.00	324.00	137.81	108.00	137.81	N/A	137.81	324.00	288.00	270.00	342.00
222		94729	Diffusing Capacity	IP/OP	360.00	324.00	137.81	108.00	137.81	N/A	137.81	324.00	288.00	270.00	342.00
223		77085	Bone Density Study, Dual-Energy X-Ray Absorptiometry	IP/OP	411.00	369.90	248.82	131.72	248.82	N/A	248.82	369.90	328.80	308.25	390.45
224		77334	Therapy Devices, Design And Construction; Complex	IP/OP	1387.00	1248.30	773.96	409.72	773.96	N/A	773.96	1248.30	1109.60	1040.25	1317.65
225		94668	Manipulation Of Chest Wall	IP/OP	232.00	208.80	257.72	136.43	257.72	N/A	257.72	208.80	185.60	174.00	220.40
226		87536	Infectious Agent Detection; Hiv-1, Quant	IP/OP	841.00	756.90	321.93	252.30	321.93	N/A	321.93	756.90	672.80	630.75	798.95
227		95951	Eeg Monitoring, Video Recording	IP/OP	4147.00	3732.30	1587.47	1244.10	1587.47	N/A	1587.47	3732.30	3317.60	3110.25	3939.65
228		76642	Ultrasound Of Breast	IP/OP	409.00	368.10	184.88	97.87	184.88	N/A	184.88	368.10	327.20	306.75	388.55
229		96360	Intravenous Infusion, Hydration; Initial, 31 Minutes To 1 Hour	IP/OP	581.00	522.90	467.57	247.52	467.57	N/A	467.57	522.90	464.80	435.75	551.95
230		93458	Catheter Placement In Coronary Artery(S) For Coronary Angiography	IP/OP	13574.00	12216.60	6627.46	3508.45	6627.46	N/A	6627.46	12216.60	10859.20	10180.50	12895.30
231		76770	Ultrasound Of Retroperitoneal, Complete	IP/OP	473.00	425.70	248.82	131.72	248.82	N/A	248.82	425.70	378.40	354.75	449.35
232		93975	Vascular Study	IP/OP	845.00	760.50	525.90	278.40	525.90	N/A	525.90	760.50	676.00	633.75	802.75
233		76536	Ultrasound Of Head And Neck	IP/OP	739.00	665.10	248.82	131.72	248.82	N/A	248.82	665.10	591.20	554.25	702.05
234		76775	Ultrasound Of Retroperitoneal, Limited	IP/OP	473.00	425.70	248.82	131.72	248.82	N/A	248.82	425.70	378.40	354.75	449.35
235		74018	X-Ray, Abdomen	IP/OP	248.00	223.20	184.88	97.87	184.88	N/A	184.88	223.20	198.40	186.00	235.60
236		86900	Blood Typing Abo	IP/OP	242.00	217.80	257.72	136.43	257.72	N/A	257.72	217.80	193.60	181.50	229.90
237		87186	Susceptibility Studies, Antimicrobial Agent	IP/OP	357.00	321.30	136.66	107.10	136.66	N/A	136.66	321.30	285.60	267.75	339.15
238		96375	Therapeutic, Prophylactic, Or Diagnostic Injection; Sequential Intravenous Push Of A New Substance	IP/OP	205.00	184.50	91.47	48.42	91.47	N/A	91.47	184.50	164.00	153.75	194.75
239		86923	Compatibility Test Each Unit; Electronic	IP/OP	441.00	396.90	340.87	180.45	340.87	N/A	340.87	396.90	352.80	330.75	418.95
240		86920	Compatibility Test Each Unit; Immediate Spin Technique	IP/OP	424.00	381.60	340.87	180.45	340.87	N/A	340.87	381.60	339.20	318.00	402.80
241		99152	Mod Sedation Services Provided By The Same Physician	OP	281.00	252.90	107.57	84.30	107.57	N/A	107.57	252.90	224.80	210.75	266.95
242		97161	Physical Therapy Evaluation: Low Complexity 20 Minutes	IP/OP	198.00	178.20	75.79	59.40	75.79	N/A	75.79	178.20	158.40	148.50	188.10
243		71046	C-Reactive Protein;	IP/OP	248.00	223.20	184.88	97.87	184.88	N/A	184.88	223.20	198.40	186.00	235.60
244		87040	Culture, Bacterial, Blood	IP/OP	86.00	77.40	32.92	25.80	32.92	N/A	32.92	77.40	68.80	64.50	81.70
245		97165	Occupational Therapy Evaluation, Low Complexity, 30 Minutes	IP/OP	198.00	178.20	75.79	59.40	75.79	N/A	75.79	178.20	158.40	148.50	188.10
246		97166	Occupational Therapy Evaluation, Mod Complexity 45 Minutes	IP/OP	360.00	324.00	137.81	108.00	137.81	N/A	137.81	324.00	288.00	270.00	342.00
247		73502	X-Ray, Hip, 2-3 Views	IP/OP	261.00	234.90	184.88	97.87	184.88	N/A	184.88	234.90	208.80	195.75	247.95
248		86850	Antibody Screen, Rbc, Each Serum Technique	IP/OP	167.00	150.30	113.57	60.12	113.57	N/A	113.57	150.30	133.60	125.25	158.65
249		72040	X-Ray, Neck, Spine, 2-3 Views	IP/OP	243.00	218.70	184.88	97.87	184.88	N/A	184.88	218.70	194.40	182.25	230.85
250		80307	Drug Tests	IP/OP	91.00	81.90	34.83	27.30	34.83	N/A	34.83	81.90	72.80	68.25	86.45
251		83690	Blood Test, Lipase	IP/OP	55.00	49.50	21.05	16.50	21.05	N/A	21.05	49.50	44.00	41.25	52.25
252		82550	Blood Test, Creatine Kinase (Ck)	IP/OP	45.00	40.50	17.23	13.50	17.23	N/A	17.23	40.50	36.00	33.75	42.75
253		93306	Echocardiography, With Doppler	IP/OP	1892.00	1702.80	1104.35	584.62	1104.35	N/A	1104.35	1702.80	1513.60	1419.00	1797.40
254		97018	Application Of A Modality To 1 Or More Areas; Paraffin Bath	OP	108.00	97.20	41.34	32.40	41.34	N/A	41.34	97.20	86.40	81.00	102.60
255		77002	X-Ray, Guidance Of Needle Placement	IP/OP	845.00	760.50	525.90	273.47	525.90	N/A	525.90	760.50	676.00	633.75	802.75
256		96361	Intravenous Infusion, Hydration; Each Additional Hour	IP/OP	298.00	268.20	91.47	48.42	91.47	N/A	91.47	268.20	238.40	223.50	283.10
257		71045	X-Ray, Chest, 1 View	IP/OP	248.00	223.20	184.88	97.87	184.88	N/A	184.88	223.20	198.40	186.00	235.60
258		92526	Therapy Swallowing Dysfunction And/Or Oral Function For Feeding	IP/OP	178.00	160.20	68.14	53.40	68.14	N/A	68.14	160.20	142.40	133.50	169.10
259		97129	Therapeutic Interventions, 15 Minutes	IP/OP	178.00	160.20	68.14	53.40	68.14	N/A	68.14	160.20	142.40	133.50	169.10
260		82248	Bilirubin; Direct	IP/OP	46.00	41.40	17.61	13.80	17.61	N/A	17.61	41.40	36.80	34.50	43.70
261		86706	Hepatitis B Surface Antibody	IP/OP	91.00	81.90	34.83	27.30	34.83	N/A	34.83	81.90	72.80	68.25	86.45
262		83036	Hemoglobin; Glycosylated (A1C)	IP/OP	57.00	51.30	21.82	17.10	21.82	N/A	21.82	51.30	45.60	42.75	54.15
263		97164	Re-Evaluation Of Physical Therapy Established Plan Of Care	IP/OP	198.00	178.20	75.79	59.40	75.79	N/A	75.79	178.20	158.40	148.50	188.10
264		97150	Therapeutic Procedure, Group	IP/OP	198.00	178.20	75.79	59.40	75.79	N/A	75.79	178.20	158.40	148.50	188.10
265		97112	Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes	IP/OP	144.00	129.60	55.12	43.20	55.12	N/A	55.12	129.60	115.20	108.00	136.80
266		97760	Orthotic(S) Management And Training	IP/OP	152.00	136.80	58.19	45.60	58.19	N/A	58.19	136.80	121.60	114.00	144.40
267		93454	Catheter Placement In Coronary Artery(S) For Coronary Angiography	IP/OP	13574.00	12216.60	6627.46	3508.45	6627.46	N/A	6627.46	12216.60	10859.20	10180.50	12895.30
268		84702	Gonadotropin, Chorionic (Hcg); Quantitative	IP/OP	52.00	46.80	19.91	15.60	19.91	N/A	19.91	46.80	41.60	39.00	49.40
269		97163	Physical Therapy Evaluation: High Complexity	IP/OP	706.00	635.40	270.26	211.80	270.26	N/A	270.26	635.40	564.80	529.50	670.70
270		97530	Therapeutic Activities	IP/OP	198.00	178.20	75.79	59.40	75.79	N/A	75.79	178.20	158.40	148.50	188.10
271		97168	Re-Evaluation Of												

Notes:

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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
277		93350	Echocardiography, Transthoracic	IP/OP	1892.00	1702.80	1104.35	584.62	1104.35	N/A	1104.35	1702.80	1513.60	1419.00	1797.40
278		97116	Therapeutic Procedure, Gait Training	IP/OP	294.00	264.60	112.54	88.20	112.54	N/A	112.54	264.60	235.20	220.50	279.30
279		92523	Evaluation Of Speech Sound Production	IP/OP	534.00	480.60	204.42	160.20	204.42	N/A	204.42	480.60	427.20	400.50	507.30
280		83540	Blood Test, Iron	IP/OP	38.00	34.20	14.55	11.40	14.55	N/A	14.55	34.20	30.40	28.50	36.10
281		84439	Blood Test, Free T4	IP/OP	78.00	70.20	29.86	23.40	29.86	N/A	29.86	70.20	62.40	58.50	74.10
282		82728	Blood Test, Ferritin	IP/OP	115.00	103.50	44.02	34.50	44.02	N/A	44.02	103.50	92.00	86.25	109.25
283		93308	Echocardiography, Transthoracic, Follow-Up Or Limited Study	IP/OP	1113.00	1001.70	525.90	278.40	525.90	N/A	525.90	1001.70	890.40	834.75	1057.35
284		86592	Syphilis Test	IP/OP	44.00	39.60	16.84	13.20	16.84	N/A	16.84	39.60	35.20	33.00	41.80
285		83605	Blood Test, Lactic Acid	IP/OP	49.00	44.10	18.76	14.70	18.76	N/A	18.76	44.10	39.20	36.75	46.55
286		84100	Blood Test, Phosphorus	IP/OP	45.00	40.50	17.23	13.50	17.23	N/A	17.23	40.50	36.00	33.75	42.75
287		93017	Cardiovascular Stress Test	IP/OP	1082.00	973.80	604.88	320.21	604.88	N/A	604.88	973.80	865.60	811.50	1027.90
288		76856	Ultrasound Of Pelvis	IP/OP	462.00	415.80	248.82	131.72	248.82	N/A	248.82	415.80	369.60	346.50	438.90
289		70496	Ct Scan, Head Or Brain	IP/OP	2319.00	2087.10	408.25	216.12	408.25	N/A	408.25	2087.10	1855.20	1739.25	2203.05
290		74170	Ct Scan, Abdomen With And Without Contrast	IP/OP	4344.00	3909.60	408.25	216.12	408.25	N/A	408.25	3909.60	3475.20	3258.00	4126.80
291		70486	Ct Scan, Maxillofacial Without Contrast	IP/OP	1093.00	983.70	248.82	131.72	248.82	N/A	248.82	983.70	874.40	819.75	1038.35
292		71260	Ct Scan, Thorax With Contrast	IP/OP	1500.00	1350.00	408.25	216.12	408.25	N/A	408.25	1350.00	1200.00	1125.00	1425.00
293		88341	Immunohistochemistry Or Immunocytochemistry, Per Specimen	IP/OP	152.00	136.80	58.19	45.60	58.19	N/A	58.19	136.80	121.60	114.00	144.40
294		87077	Culture, Bacterial; Aerobic Isolate	IP/OP	73.00	65.70	27.94	21.90	27.94	N/A	27.94	65.70	58.40	54.75	69.35
295		76937	Ultrasound Guided Vascular Access	IP/OP	558.00	502.20	213.60	167.40	213.60	N/A	213.60	502.20	446.40	418.50	530.10
296		77001	Fluoroscopic Guidance For Vein Dvc	IP/OP	454.00	408.60	173.79	136.20	173.79	N/A	173.79	408.60	363.20	340.50	431.30
297		83615	Lactate Dehydrogenase (Ld), (Ldh)	IP/OP	55.00	49.50	21.05	16.50	21.05	N/A	21.05	49.50	44.00	41.25	52.25
298		85652	Sedimentation Rate, Erythrocyte, Automated	IP/OP	23.00	20.70	8.80	6.90	8.80	N/A	8.80	20.70	18.40	17.25	21.85
299		82306	Gonadotropin, Chorionic (Hcg); Quantitative	IP/OP	166.00	149.40	63.54	49.80	63.54	N/A	63.54	149.40	132.80	124.50	157.70
300		86803	Hepatitis C Antibody	IP/OP	118.00	106.20	45.17	35.40	45.17	N/A	45.17	106.20	94.40	88.50	112.10
301		80202	Blood Test, Vancomycin	IP/OP	97.00	87.30	37.13	29.10	37.13	N/A	37.13	87.30	77.60	72.75	92.15
302		86704	Hepatitis B Core Antibody (Hbcab); Total	IP/OP	106.00	95.40	40.58	31.80	40.58	N/A	40.58	95.40	84.80	79.50	100.70
303		84484	Blood Test, Troponin	IP/OP	76.00	68.40	29.09	22.80	29.09	N/A	29.09	68.40	60.80	57.00	72.20
304		84145	Procalcitonin (Pct)	IP/OP	549.00	494.10	210.16	164.70	210.16	N/A	210.16	494.10	439.20	411.75	521.55
305		86140	C-Reactive Protein	IP/OP	34.00	30.60	13.02	10.20	13.02	N/A	13.02	30.60	27.20	25.50	32.30
306		87340	Infectious Agent Antigen Detection, Hep B	IP/OP	90.00	81.00	34.45	27.00	34.45	N/A	34.45	81.00	72.00	67.50	85.50
307		84132	Blood Test, Potassium	IP/OP	26.00	23.40	9.95	7.80	9.95	N/A	9.95	23.40	20.80	19.50	24.70
308		88305	Level Iv - Surgical Pathology, Gross And Microscopic Examination	IP/OP	105.00	94.50	113.57	60.12	113.57	N/A	113.57	94.50	84.00	78.75	99.75
309		83550	Iron Binding Capacity	IP/OP	27.00	24.30	10.34	8.10	10.34	N/A	10.34	24.30	21.60	20.25	25.65
310		87389	Infectious Agent Antigen Detection, With Hiv	IP/OP	99.00	89.10	37.90	29.70	37.90	N/A	37.90	89.10	79.20	74.25	94.05
311		84295	Blood Test, Sodium	IP/OP	27.00	24.30	10.34	8.10	10.34	N/A	10.34	24.30	21.60	20.25	25.65
312		83880	Blood Test, B-Type Natriuretic Peptide (Bnp)	IP/OP	152.00	136.80	58.19	45.60	58.19	N/A	58.19	136.80	121.60	114.00	144.40
313		82570	Blood Test, Creatine Urine	IP/OP	51.00	45.90	19.52	15.30	19.52	N/A	19.52	45.90	40.80	38.25	48.45
314		82247	Bilirubin; Total	IP/OP	46.00	41.40	17.61	13.80	17.61	N/A	17.61	41.40	36.80	34.50	43.70
315		88185	Flow Cytometry, Cell Surface, Cytoplasmic, Or Nuclear Marker, Technical Component Only	IP/OP	64.00	57.60	24.50	19.20	24.50	N/A	24.50	57.60	51.20	48.00	60.80
316		87070	Culture, Bacterial; Any Other Source Except Urine, Blood, Stool Or Aerobic	IP/OP	152.00	136.80	58.19	45.60	58.19	N/A	58.19	136.80	121.60	114.00	144.40
317		87205	Smear, Primary Source With Interpretation; Gram Or Giemsa Stain For Bacteria, Fungi, Or Cell Type	IP/OP	39.00	35.10	14.93	11.70	14.93	N/A	14.93	35.10	31.20	29.25	37.05
318		85007	Blood Count	IP/OP	20.00	18.00	7.66	6.00	7.66	N/A	7.66	18.00	16.00	15.00	19.00
319		87081	Culture, Presumptive, Pathogenic Organisms, Screening Only	IP/OP	83.00	74.70	31.77	24.90	31.77	N/A	31.77	74.70	66.40	62.25	78.85
320		74176	Ct Scan, Abdomen And Pelvis Without Contrast	IP/OP	971.00	873.90	525.90	278.40	525.90	N/A	525.90	873.90	776.80	728.25	922.45
321		82435	Blood Test, Chloride	IP/OP	26.00	23.40	9.95	7.80	9.95	N/A	9.95	23.40	20.80	19.50	24.70

Notes:

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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:			Wellcare:			Minimum Negotiated Rate	Maximum Negotiated Rate	Discounted Cash Price
ID	Indicator	Billing Code					Community Plan: Medicaid	Community Plan: Medicare	United HealthCare: Commercial	United HealthCare: Oxford	United HealthCare: PPO	Wellcare: Medicaid	Wellcare: Medicare				
1		85027	Complete Blood Count, Automated	IP/OP		32.00		4.80				4.80	6.47		4.80	30.40	7.44
2		80053	Blood Test, Comprehensive Group Of Blood Chemicals	IP/OP		51.00		10.56	Contact UH	Contact UH	Contact UH	10.50	10.56	10.50	48.45	12.14	
3		80061	Blood Test, Lipids (Cholesterol And Triglycerides)	IP/OP		119.00		15.00	Contact UH	Contact UH	Contact UH	15.00	13.39	13.39	113.05	15.40	
4		84153	Psa (Prostate Specific Antigen)	IP/OP		156.00		24.50	Contact UH	Contact UH	Contact UH	24.50	18.39	18.39	148.20	21.15	
5		80076	Liver Function Blood Test Panel	IP/OP		66.00		7.00	Contact UH	Contact UH	Contact UH	7.00	8.17	7.00	62.70	9.40	
6		70450	Ct Scan, Head Or Brain, Without Contrast	IP/OP		2425.00	629.77	131.72	Contact UH	Contact UH	Contact UH	629.77	131.72	131.72	2303.75	151.48	
7		74177	Ct Scan Of Abdomen And Pelvis With Contrast	IP/OP		1500.00	389.55	445.55	Contact UH	Contact UH	Contact UH	389.55	445.55	389.55	1425.00	512.38	
8		81001	Manual Urinalysis Test With Examination Using Microscope	IP/OP		34.00		1.20	Contact UH	Contact UH	Contact UH	1.20	3.17	1.20	32.30	3.65	
9		76830	Ultrasound Pelvis Through Vagina	IP/OP		462.00	119.98	131.72	Contact UH	Contact UH	Contact UH	119.98	131.72	119.98	438.90	151.48	
10		62323	Injection Of Substance Into Spinal Canal Of Lower Back Or Sacrum Using Imaging Guidance	IP/OP		2311.00	600.17	768.29	Contact UH	Contact UH	Contact UH	600.17	768.29	600.17	2195.45	883.53	
11		85610	Blood Test, Clotting Time	IP/OP		41.00		3.00	Contact UH	Contact UH	Contact UH	3.00	4.29	3.00	38.95	4.93	
12		85730	Coagulation Assessment Blood Test	IP/OP		49.00		3.00	Contact UH	Contact UH	Contact UH	3.00	6.01	3.00	46.55	6.91	
13		80048	Basic Metabolic Panel	IP/OP		63.00		9.30	Contact UH	Contact UH	Contact UH	9.30	8.46	8.46	59.85	9.73	
14		72193	Ct Scan, Pelvis, With Contrast	IP/OP		1621.00	420.97	216.12	Contact UH	Contact UH	Contact UH	420.97	216.12	216.12	1539.95	248.54	
15		93452	Insertion Of Catheter Into Left Heart For Diagnosis	OP		13574.00	3525.17	3508.45	Contact UH	Contact UH	Contact UH	3525.17	3508.45	3508.45	12895.30	4034.72	
16		76700	Ultrasound Of Abdomen	IP/OP		473.00	122.84	131.72	Contact UH	Contact UH	Contact UH	122.84	131.72	122.84	449.35	151.48	
17		73721	Mri Scan Of Leg Joint	IP/OP		1736.00	450.84	278.40	Contact UH	Contact UH	Contact UH	450.84	278.40	278.40	1649.20	320.16	
18		59400	Routine Obstetric Care For Vaginal Delivery, Including Pre-And Post-Delivery Care	IP/OP		7827.00	2032.67	N/A	Contact UH	Contact UH	Contact UH	2032.67	N/A	2032.67	7435.65	T.B.D	
19		77067	Mammography, Screening, Bilateral	IP/OP		472.00	122.58	N/A	Contact UH	Contact UH	Contact UH	122.58	N/A	122.58	448.40	T.B.D	
20		43239	Biopsy Of The Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope	IP/OP		2757.00	715.99	979.01	Contact UH	Contact UH	Contact UH	715.99	979.01	715.99	2619.15	1125.86	
21		43235	Diagnostic Examination Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope	IP/OP		2067.00	536.80	979.01	Contact UH	Contact UH	Contact UH	536.80	979.01	536.80	1963.65	1125.86	
22		72110	X-Ray, Lower Back, Minimum Four Views	IP/OP		372.00	96.61	131.72	Contact UH	Contact UH	Contact UH	96.61	131.72	96.61	353.40	151.48	
23		64483	Injections Of Anesthetic And/Or Steroid Drug Into Lower Or Sacral Spine Nerve Root Using Imaging	IP/OP		1125.00	292.16	996.00	Contact UH	Contact UH	Contact UH	292.16	996.00	292.16	1881.44	1145.40	
24		45385	Removal Of Polyps Or Growths Of Large Bowel Using An Endoscope	IP/OP		2757.00	715.99	1254.65	Contact UH	Contact UH	Contact UH	715.99	1254.65	715.99	2619.15	1442.85	
25		77066	Mammography Of Both Breasts	IP/OP		500.00	129.85	N/A	Contact UH	Contact UH	Contact UH	129.85	N/A	129.85	475.00	T.B.D	
26		45380	Biopsy Of Large Bowel Using An Endoscope	OP		2757.00	715.99	1254.65	Contact UH	Contact UH	Contact UH	715.99	1254.65	715.99	2619.15	1442.85	
27		49505	Repair Of Groin Hernia Patient Age 5 Years Or Older	OP		8310.00	2158.11	3849.44	Contact UH	Contact UH	Contact UH	2158.11	3849.44	2158.11	7894.50	4426.86	
28		97110	Physical Therapy, Therapeutic Exercise	IP/OP		152.00	39.47	N/A	Contact UH	Contact UH	Contact UH	39.47	N/A	39.47	144.40	T.B.D	
29		70553	Mri Scan Of Brain Before And After Contrast	IP/OP		9266.00	2406.38	445.55	Contact UH	Contact UH	Contact UH	2406.38	445.55	445.55	8802.70	512.38	
30		81002	Automated Urinalysis Test	IP/OP		21.00	5.45	3.48	Contact UH	Contact UH	Contact UH	5.45	3.48	3.48	19.95	4.00	
31		66821	Removal Of Recurring Cataract In Lens Capsule Using Laser	OP		2086.00	541.73	608.90	Contact UH	Contact UH	Contact UH	541.73	608.90	541.73	1981.70	700.24	
32		72148	Mri Scan Of Lower Spinal Canal	IP/OP		1335.00	346.70	278.40	Contact UH	Contact UH	Contact UH	346.70	278.40	278.40	1268.25	320.16	
33		90832	Psychotherapy, 30 Min	OP		494.00	128.29	161.89	Contact UH	Contact UH	Contact UH	128.29	161.89	128.29	469.30	186.17	
34		55700	Biopsy Of Prostate Gland	OP		6618.00	1718.69	2166.37	Contact UH	Contact UH	Contact UH	1718.69	2166.37	1718.69	6287.10	2491.33	
35		45391	Ultrasound Examination Of Lower Large Bowel Using An Endoscope	OP		2825.00	733.65	1254.65	Contact UH	Contact UH	Contact UH	733.65	1254.65	733.65	2683.75	1442.85	
36		77065	Mammography Of One Breast	IP/OP		449.00	116.61	N/A	Contact UH	Contact UH	Contact UH	116.61	N/A	116.61	426.55	T.B.D	
37		19120	Removal Of 1 Or More Breast Growth, Open Procedure	OP		11655.00	3026.80	3820.59	Contact UH	Contact UH	Contact UH	3026.80	3820.59	3026.80	11072.25	4393.68	
38		90834	Psychotherapy, 45 Min	OP		494.00	128.29	161.89	Contact UH	Contact UH	Contact UH	128.29	161.89	128.29	469.30	186.17	
39		90837	Psychotherapy, 60 Min	OP		494.00	128.29	161.89	Contact UH	Contact UH	Contact UH	128.29	161.89	128.29	469.30	186.17	
40		85025	Complete Blood Cell Count, With Differential White Blood Cells, Automated	IP/OP		40.00	10.39	7.77	Contact UH	Contact UH	Contact UH	10.39	7.77	7.77	38.00	8.94	
41		84443	Blood Test, Thyroid Stimulating Hormone (Tsh)	IP/OP		148.00	23.00	16.80	Contact UH	Contact UH	Contact UH	23.00	16.80	16.80	140.60	19.32	
42		90853	Group Psychotherapy	OP		297.00	77.13	90.53	Contact UH	Contact UH	Contact UH	77.13	90.53	77.13	282.15	104.11	
43		45378	Diagnostic Examination Of Large Bowel Using An Endoscope	IP/OP		2757.00	715.99	960.16	Contact UH	Contact UH	Contact UH	715.99	960.16	715.99	2619.15	1104.18	
44	N/A	90846	Family Psychotherapy, Not Including Patient, 50 Min	OP		N/A	N/A	N/A	Contact UH	Contact UH	Contact UH	N/A	N/A	N/A	N/A	T.B.D	
45	N/A	90847	Family Psychotherapy, Including Patient, 50 Min	OP		N/A	N/A	N/A	Contact UH	Contact UH	Contact UH	N/A	N/A	N/A	N/A	T.B.D	
46	N/A	99203	New Patient Office Or Other Outpatient Visit, Typically 30 Min	OP		N/A	N/A	N/A	Contact UH	Contact UH	Contact UH	N/A	N/A	N/A	N/A	T.B.D	
47	N/A	99204	New Patient Office Or Other Outpatient Visit, Typically 45 Min	OP		N/A	N/A	N/A	Contact UH	Contact UH	Contact UH	N/A	N/A	N/A	N/A	T.B.D	
48	N/A	99205	New Patient Office Or Other Outpatient Visit, Typically 60 Min	OP		N/A	N/A	N/A	Contact UH	Contact UH	Contact UH	N/A	N/A	N/A	N/A	T.B.D	
49	N/A	99243	Patient Office Consultation, Typically 40 Min	OP		N/A	N/A	N/A	Contact UH	Contact UH	Contact UH	N/A	N/A	N/A	N/A	T.B.D	
50	N/A	42820	Removal Of Tonsils And Adenoid Glands Patient Younger Than Age 12	OP		N/A	N/A	N/A	Contact UH	Contact UH	Contact UH	N/A	N/A	N/A	N/A	T.B.D	
51	N/A	47562	Removal Of Gallbladder Using An Endoscope	OP		N/A	N/A	N/A	Contact UH	Contact UH	Contact UH	N/A	N/A	N/A	N/A	T.B.D	
52	N/A	55866	Surgical Removal Of Prostate And Surrounding Lymph Nodes Using An Endoscope	OP		N/A	N/A	N/A	Contact UH	Contact UH	Contact UH	N/A	N/A	N/A	N/A	T.B.D	
53	N/A	59510	Routine Obstetric Care For Cesarean Delivery, Including Pre-And Post-Delivery Care	IP/OP		N/A	N/A	N/A	Contact UH	Contact UH	Contact UH	N/A	N/A	N/A	N/A	T.B.D	
54	N/A	59610	Routine Obstetric Care For Vaginal Delivery After Prior Cesarean Delivery Including Pre-And Post-D	IP/OP		N/A	N/A	N/A	Contact UH	Contact UH	Contact UH	N/A	N/A	N/A	N/A	T.B.D	
55	N/A	66984	Removal Of Cataract With Insertion Of Lens	OP		N/A	N/A	N/A	Contact UH	Contact UH	Contact UH	N/A	N/A	N/A	N/A	T.B.D	
56	DRG - 460		Spinal Fusion Except Cervical Without Major Comorbid Conditions Or Complications (Mcc)	IP		N/A	N/A	56236.07	56602.08	55029.80	58508.47	N/A	56236.07	39871.84	142867.00	64671.48	
57	DRG - 470		Major Joint Replacement Or Reattachment Of Lower Extremity Without Major Comorbid Conditions (C	IP		N/A	N/A	32690.93	27364.32	26604.20	28285.97	N/A	32690.93	19650.03	70409.00	37594.57	
58	DRG - 473		Cervical Spinal Fusion Without Comorbid Conditions (Cc) Or Major Comorbid Conditions Or Complic	IP		N/A	N/A	40097.49	36561.60	35546.00	37793.02	N/A	40097.49	23433.28	83965.00	46112.12	
59	DRG - 743		Uterine And Adnexa Procedures For Non-Malignancy Without Comorbid Conditions (Cc) Or Major C	IP		N/A	N/A	23790.77	16312.32	15859.20	16861.73	N/A	23790.77	11016.97	39476.00	27359.38	
60	N/A	29826	Shaving Of Shoulder Bone Using An Endoscope	OP		N/A	N/A	N/A	Contact UH	Contact UH	Contact UH	N/A	N/A	N/A	N/A	T.B.D	
61	N/A	29881	Removal Of One Knee Cartilage Using An Endoscope	OP		N/A	N/A	N/A	Contact UH	Contact UH	Contact UH	N/A	N/A	N/A	N/A	T.B.D	
62	N/A	99244	Patient Office Consultation, Typically 60 Min	OP		N/A	N/A	N/A	Contact UH	Contact UH	Contact UH	N/A	N/A	N/A	N/A	T.B.D	
63	N/A	99385	Initial New Patient Preventive Medicine Evaluation (18-39 Years)	OP		N/A	N/A	N/A	Contact UH	Contact UH	Contact UH	N/A	N/A	N/A	N/A	T.B.D	
64	N/A	99386	Initial New Patient Preventive Medicine Evaluation (40-64 Years)	OP		N/A	N/A	N/A	Contact UH	Contact UH	Contact UH	N/A	N/A	N/A	N/A	T.B.D	
65	N/A	80055	Obstetric Blood Test Panel	OP		N/A	N/A	N/A	Contact UH	Contact UH	Contact UH	N/A	N/A	N/A	N/A	T.B.D	
66	N/A	80069	Kidney Function Panel Test	OP		N/A	N/A	N/A	Contact UH	Contact UH	Contact UH	N/A	N/A	N/A	N/A	T.B.D	
67	DRG - 216		Cardiac Valve And Other Major Cardiothoracic Procedures With Cardiac Catheterization With Major	IP		N/A	N/A	127073.27	144555.92	140550.20	149434.98	N/A	127073.27	78485.00	347513.00	146134.25	
68	N/A	93000	Electrocardiogram, Routine, With Interpretation And Report	OP		N/A	N/A	N/A	Contact UH	Contact UH	Contact UH	N/A	N/A	N/A	N/A	T.B.D	
69	N/A	95810	Sleep Study	OP		N/A	N/A	N/A	Contact UH	Contact UH	Contact UH	N/A	N/A	N/A	N/A	T.B.D	

Notes:
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Shoppable		N/A	Billing Code	Description	Location Provided	Gross Charge	Community Plan:		Community Plan:		United HealthCare:		United HealthCare:		United HealthCare:		Wellcare:		Minimum	Maximum	Discounted Cash
ID	Indicator						Medicaid	Medicare	Commercial	Oxford	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	IP/OP	472.00	122.58		131.72	Contact UH	Contact UH	Contact UH	122.58	131.72	122.58	448.40	151.48					
71		86480	Tuberculosis Test	IP/OP	229.00	49.58		61.98	Contact UH	Contact UH	Contact UH	49.58	61.98	49.58	217.55	71.28					
72		83735	Blood Test, Magnesium	IP/OP	45.00	11.69		6.70	Contact UH	Contact UH	Contact UH	11.69	6.70	6.70	42.75	7.71					
73		DRG - 115	Extraocular Procedures Except Orbit	IP	N/A	N/A		27545.65	20975.04	20392.40	21681.49	N/A	27545.65	13451.25	48198.00	31677.50					
74		DRG - 117	Intraocular Procedures Without Complications	IP	N/A	N/A		22728.55	14993.28	14576.80	15498.26	N/A	22728.55	9900.07	35473.00	26137.83					
75		DRG - 788	Cesarean Section Without Sterilization Without Complications	IP	N/A	N/A		20945.04	N/A	N/A	N/A	N/A	20945.04	6969.05	31871.00	24086.79					
76		DRG - 906	Hand Procedures For Injuries	IP	N/A	N/A		31571.89	25974.72	25253.20	26849.56	N/A	31571.89	18202.30	65222.00	36307.67					
77		DRG - 482	Hipand Femur Procedures Except Major Joint Without Complications	IP	N/A	N/A		29739.67	23699.52	23041.20	24497.73	N/A	29739.67	16437.57	58898.00	34200.63					
78		DRG - 494	Lower Extremity And Humerus Procedures Except Hip, Foot And Femur Without Complications	IP	N/A	N/A		32127.35	26664.48	25923.80	27562.55	N/A	32127.35	17320.43	62062.00	36946.46					
79		DRG - 502	Soft Tissue Procedures Without Complications	IP	N/A	N/A		26110.03	19192.32	18659.20	19838.73	N/A	26110.03	12750.10	45686.00	30026.54					
80		DRG - 505	Foot Procedures W/O Co/Mcc	IP	N/A	N/A		31237.92	25560.00	24850.00	26420.88	N/A	31237.92	15601.12	55901.00	35923.60					
81		DRG - 512	Shoulder, Elbow Or Forearm Procedures, Except Major Joint Procedures Without Complications	IP	N/A	N/A		28680.93	22384.80	21763.00	23138.73	N/A	28680.93	15031.31	53860.00	32983.07					
82		DRG - 660	Kidney And Ureter Procedures For Non-Neoplasm With Complications	IP	N/A	N/A		27389.10	20780.64	20203.40	21480.54	N/A	27389.10	14295.60	51223.00	31497.47					
83		DRG - 142	Major Head And Neck Procedures Without Complications	IP	N/A	N/A		29267.70	23113.44	22471.40	23891.91	N/A	29267.70	18958.67	29267.70	33657.86					
84		DRG - 247	Percutaneous Cardiovascular Procedures With Coronary Artery Stent	IP	N/A	N/A		33536.30	28414.08	27624.80	29371.08	N/A	33536.30	20512.15	73498.00	38566.75					
85		DRG - 329	Major Small And Large Bowel Procedures With Major Comp	IP	N/A	N/A		67316.34	70361.28	68406.80	72731.09	N/A	67316.34	49304.80	176667.00	77413.79					
86		DRG - 355	Hernia Procedures Except Inguinal And Femoral Without Complications	IP	N/A	N/A		26427.77	19586.88	19042.80	20246.58	N/A	26427.77	13379.16	47940.00	30391.93					
87		DRG - 419	Laparoscopic Cholecystectomy Without C.D.E. Without Complications	IP	N/A	N/A		25907.10	18940.32	18414.20	19578.24	N/A	25907.10	12879.47	46149.00	29793.16					
88		DRG - 479	Biopsies Of Musculoskeletal System And Connective Tissue Without Complications	IP	N/A	N/A		31637.99	26056.80	25333.00	26934.41	N/A	31637.99	17755.93	63622.00	36383.69					
89		72131	Ct Scan, Lumbar Spine	IP/OP	265.00	68.82		131.72	Contact UH	Contact UH	Contact UH	Contact UH	68.82	131.72	68.82	251.75	151.48				
90		87491	Infectious Agent Detection, Chlamydia Trachomatis	IP/OP	155.00	38.00		35.09	Contact UH	Contact UH	Contact UH	Contact UH	38.00	35.09	35.09	147.25	40.35				
91		73700	Ct Scan, Lower Extremities	IP/OP	265.00	68.82		131.72	Contact UH	Contact UH	Contact UH	Contact UH	68.82	131.72	68.82	251.75	151.48				
92		73630	X-Ray, Foot	IP/OP	568.00	147.51		97.87	Contact UH	Contact UH	Contact UH	Contact UH	147.51	97.87	97.87	539.60	112.55				
93		73560	X-Ray, Knee	IP/OP	590.00	153.22		97.87	Contact UH	Contact UH	Contact UH	Contact UH	153.22	97.87	97.87	560.50	112.55				
94		72190	X-Ray, Pelvis, 3 Views	IP/OP	232.00	60.25		131.72	Contact UH	Contact UH	Contact UH	Contact UH	60.25	131.72	60.25	248.82	151.48				
95		92557	Comprehensive Audiometry Threshold Evaluation And Speech Recognition	IP/OP	866.00	224.90		168.92	Contact UH	Contact UH	Contact UH	Contact UH	224.90	168.92	168.92	822.70	194.26				
96		76512	Ophthalmic Ultrasound, Diagnostic, B-Scan With And Without Quant. A	IP/OP	472.00	122.58		131.72	Contact UH	Contact UH	Contact UH	Contact UH	122.58	131.72	122.58	448.40	151.48				
97		70355	X-Ray, Jaws, Panoramic	IP/OP	299.00	77.65		97.87	Contact UH	Contact UH	Contact UH	Contact UH	77.65	97.87	77.65	284.05	112.55				
98		96415	Chemotherapy Administration, Intravenous Infusion Technique	IP/OP	192.00	49.86		75.01	Contact UH	Contact UH	Contact UH	Contact UH	49.86	75.01	49.86	182.40	86.26				
99		96367	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis; Additional Sequential Infusion Of A N	IP/OP	192.00	49.86		75.01	Contact UH	Contact UH	Contact UH	Contact UH	49.86	75.01	49.86	182.40	86.26				
100		70498	Ct Scan, Neck	IP/OP	2319.00	602.24		216.12	Contact UH	Contact UH	Contact UH	Contact UH	602.24	216.12	216.12	2203.05	248.54				
101		76376	3D Rendering With Interpretation And Post Process Supervision	IP/OP	265.00	68.82		N/A	Contact UH	Contact UH	Contact UH	Contact UH	68.82	N/A	68.82	251.75	T.B.D				
102		92567	Tympanometry	OP	196.00	50.90		40.95	Contact UH	Contact UH	Contact UH	Contact UH	50.90	40.95	40.95	186.20	47.09				
103		92235	Fluorescein Angiography	OP	903.00	234.51		320.21	Contact UH	Contact UH	Contact UH	Contact UH	234.51	320.21	234.51	857.85	368.24				
104		76815	Abdominal Ultrasound Of Pregnant Uterus	IP/OP	403.00	104.66		131.72	Contact UH	Contact UH	Contact UH	Contact UH	104.66	131.72	104.66	382.85	151.48				
105		96368	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis; Concurrent Infusion	IP/OP	135.00	35.06		N/A	Contact UH	Contact UH	Contact UH	Contact UH	35.06	N/A	35.06	128.25	T.B.D				
106		90472	Immunization Administration	IP/OP	133.00	34.54		N/A	Contact UH	Contact UH	Contact UH	Contact UH	34.54	N/A	34.54	126.35	T.B.D				
107		92603	Diagnostic Analysis Of Cochlear Implant, Age 7 Years Or Older; With Programming	OP	797.00	206.98		168.92	Contact UH	Contact UH	Contact UH	Contact UH	206.98	168.92	168.92	757.15	194.26				
108		92250	Fundus Photography With Interpretation And Report	OP	376.00	97.65		136.43	Contact UH	Contact UH	Contact UH	Contact UH	97.65	136.43	97.65	357.20	156.89				
109		96523	Irrigation Of Implanted Venous Access Device	IP/OP	232.00	60.25		67.35	Contact UH	Contact UH	Contact UH	Contact UH	60.25	67.35	60.25	220.40	77.45				
110		90746	Hepatitis B Vaccine (Hepb), Adult Dosage, 3 Dose Schedule, For Intramuscular Use	IP/OP	440.00	114.27		70.38	Contact UH	Contact UH	Contact UH	Contact UH	114.27	70.38	70.38	418.00	80.93				
111		89051	Cell Count, Miscellaneous Body Fluids	IP/OP	40.00	0.90		5.60	Contact UH	Contact UH	Contact UH	Contact UH	0.90	5.60	0.90	38.00	6.44				
112		73590	X-Ray, Lower Leg	IP/OP	568.00	147.51		97.87	Contact UH	Contact UH	Contact UH	Contact UH	147.51	97.87	97.87	539.60	112.55				
113		72170	X-Ray, Pelvis, 1-2 Views	IP/OP	238.00	61.81		131.72	Contact UH	Contact UH	Contact UH	Contact UH	61.81	131.72	61.81	248.82	151.48				
114		73070	X-Ray, Elbow	IP/OP	568.00	147.51		97.87	Contact UH	Contact UH	Contact UH	Contact UH	147.51	97.87	97.87	539.60	112.55				
115		72125	Ct Scan, Neck Spine Without Contrast	IP/OP	1240.00	322.03		131.72	Contact UH	Contact UH	Contact UH	Contact UH	322.03	131.72	131.72	1178.00	151.48				
116		73030	X-Ray, Shoulder	IP/OP	568.00	147.51		97.87	Contact UH	Contact UH	Contact UH	Contact UH	147.51	97.87	97.87	539.60	112.55				
117		73060	X-Ray, Humerus	IP/OP	568.00	147.51		97.87	Contact UH	Contact UH	Contact UH	Contact UH	147.51	97.87	97.87	539.60	112.55				
118		72100	X-Ray, Lumbar Spine, 2-3 Views	IP/OP	437.00	113.49		131.72	Contact UH	Contact UH	Contact UH	Contact UH	113.49	131.72	113.49	415.15	151.48				
119		73120	Hepatitis B Surface Antibody (Hbsab)	IP/OP	326.00	84.66		131.72	Contact UH	Contact UH	Contact UH	Contact UH	84.66	131.72	84.66	309.70	151.48				
120		73610	X-Ray, Ankle	IP/OP	222.00	57.65		97.87	Contact UH	Contact UH	Contact UH	Contact UH	57.65	97.87	57.65	210.90	112.55				
121		73110	X-Ray, Wrist	IP/OP	336.00	87.26		97.87	Contact UH	Contact UH	Contact UH	Contact UH	87.26	97.87	87.26	319.20	112.55				
122		73090	X-Ray, Forearm	IP/OP	568.00	147.51		97.87	Contact UH	Contact UH	Contact UH	Contact UH	147.51	97.87	97.87	539.60	112.55				
123		93312	Echocardiography, Transesophageal	IP/OP	2631.00	683.27		584.62	Contact UH	Contact UH	Contact UH	Contact UH	683.27	584.62	584.62	2499.45	672.31				
124		97140	Manual Therapy Techniques, 1 Or More Regions, Each 15 Minutes	IP/OP	198.00	51.42		N/A	Contact UH	Contact UH	Contact UH	Contact UH	51.42	N/A	51.42	188.10	T.B.D				
125		92611	Motion Fluoroscopic Evaluation Of Swallowing Function By Cine Or Video Recording	IP/OP	940.00	244.12		N/A	Contact UH	Contact UH	Contact UH	Contact UH	244.12	N/A	244.12						

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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		466.00	121.02	78.77	Contact UH	Contact UH	Contact UH	121.02	78.77	78.77	442.70	90.59
140		94664	Demonstration And/Or Evaluation Of Patient Utilization Of An Aerosol Generator, Nebulizer, Metered	I/OP		742.00	192.70	227.42	Contact UH	Contact UH	Contact UH	192.70	227.42	192.70	704.90	261.53
141		94667	Manipulation Chest Wall	I/OP		376.00	97.65	136.43	Contact UH	Contact UH	Contact UH	97.65	136.43	97.65	357.20	156.89
142		94660	Continuous Positive Airway Pressure Ventilation (Cpap)	I/OP		613.00	159.20	227.42	Contact UH	Contact UH	Contact UH	159.20	227.42	159.20	582.35	261.53
143		95816	Electroencephalogram (Eeg)	I/OP		977.00	253.73	320.21	Contact UH	Contact UH	Contact UH	253.73	320.21	253.73	928.15	368.24
144		96521	Refilling And Maintenance Of Portable Pump	I/OP		710.00	184.39	247.52	Contact UH	Contact UH	Contact UH	184.39	247.52	184.39	674.50	284.65
145		97597	Debridement	I/OP		663.00	172.18	217.27	Contact UH	Contact UH	Contact UH	172.18	217.27	172.18	629.85	249.86
146		90651	Hpv Vaccine	I/OP		606.00	157.38	N/A	Contact UH	Contact UH	Contact UH	157.38	N/A	157.38	575.70	T.B.D
147		96413	Chemotherapy Administration, Intravenous Infusion Technique; Up To 1 Hour	I/OP		1194.00	310.08	385.78	Contact UH	Contact UH	Contact UH	310.08	385.78	310.08	1134.30	443.65
148		92570	Acoustic Immittance Testing	OP		533.00	138.42	168.92	Contact UH	Contact UH	Contact UH	138.42	168.92	138.42	506.35	194.26
149		92133	Scanning Computerized Ophthalmic Diagnostic Imaging, Optic Nerve	OP		206.00	53.50	67.35	Contact UH	Contact UH	Contact UH	53.50	67.35	53.50	195.70	77.45
150		90675	Rabies Vaccine, For Intramuscular Use	I/OP		954.00	247.75	341.95	Contact UH	Contact UH	Contact UH	247.75	341.95	247.75	906.30	393.24
151		96417	Chemotherapy Administration, Intravenous Infusion Technique	I/OP		417.00	108.29	75.01	Contact UH	Contact UH	Contact UH	108.29	75.01	75.01	396.15	86.26
152		92083	Visual Field Examination	I/OP		376.00	97.65	136.43	Contact UH	Contact UH	Contact UH	97.65	136.43	97.65	357.20	156.89
153		92136	Ophthalmic Biometry	OP		414.00	107.52	136.43	Contact UH	Contact UH	Contact UH	107.52	136.43	107.52	393.30	156.89
154		96401	Chemotherapy Administration, Subcutaneous Or Intramuscular; Non-Hormonal Anti-Neoplastic	I/OP		1720.00	446.68	75.01	Contact UH	Contact UH	Contact UH	446.68	75.01	75.01	1634.00	86.26
155		96402	Chemotherapy Administration, Subcutaneous Or Intramuscular; Hormonal Anti-Neoplastic	OP		291.00	75.57	75.01	Contact UH	Contact UH	Contact UH	75.57	75.01	75.01	276.45	86.26
156		90734	Meningococcal Conjugate Vaccine	I/OP		519.00	134.78	N/A	Contact UH	Contact UH	Contact UH	134.78	N/A	134.78	493.05	T.B.D
157		96365	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis; Initial, Up To 1 Hour	I/OP		725.00	188.28	247.52	Contact UH	Contact UH	Contact UH	188.28	247.52	188.28	688.75	284.65
158		90396	Varicella-Zoster Immune Globulin, Human, For Intramuscular Use	OP		2998.00	778.58	2456.00	Contact UH	Contact UH	Contact UH	778.58	2456.00	778.58	4639.38	2824.40
159		90670	Pneumococcal Conjugate Vaccine, 13 Valent (Pcv13), For Intramuscular Use	I/OP		568.00	147.51	241.38	Contact UH	Contact UH	Contact UH	147.51	241.38	147.51	539.60	277.59
160		77336	Continuing Medical Physics Consultation	I/OP		1377.00	357.61	153.52	Contact UH	Contact UH	Contact UH	357.61	153.52	153.52	1308.15	176.55
161		92602	Diagnostic Analysis Of Cochlear Implant, Patient Younger Than 7 Yrs Of Age; Subsequent Reprog	OP		870.00	225.94	168.92	Contact UH	Contact UH	Contact UH	225.94	168.92	168.92	826.50	194.26
162		92025	Computerized Corneal Topography	OP		206.00	53.50	67.35	Contact UH	Contact UH	Contact UH	53.50	67.35	53.50	195.70	77.45
163		93923	Complete Bilateral Noninvasive Physiologic Studies Of Upper Or Lower Extremity Arteries, 3 Or Mon	I/OP		1399.00	363.32	168.92	Contact UH	Contact UH	Contact UH	363.32	168.92	168.92	1329.05	194.26
164		82948	Glucose Test	I/OP		40.00	1.50	5.04	Contact UH	Contact UH	Contact UH	1.50	5.04	1.50	38.00	5.80
165		94150	Vital Capacity, Total (Separate Procedure)	I/OP		533.00	138.42	168.92	Contact UH	Contact UH	Contact UH	138.42	168.92	138.42	506.35	194.26
166		94060	Bronchodilation Responsiveness	I/OP		617.00	160.23	320.21	Contact UH	Contact UH	Contact UH	160.23	320.21	160.23	604.88	368.24
167		90732	Pneumococcal Polysaccharide Vaccine	I/OP		116.00	30.13	133.47	Contact UH	Contact UH	Contact UH	30.13	133.47	30.13	153.49	153.49
168		92584	Electrocochleography	OP		877.00	227.76	168.92	Contact UH	Contact UH	Contact UH	227.76	168.92	168.92	833.15	194.26
169		92550	Tympanometry And Reflex Threshold Measurements	OP		533.00	138.42	168.92	Contact UH	Contact UH	Contact UH	138.42	168.92	138.42	506.35	194.26
170		92626	Evaluation Of Auditory Function, First Hour	OP		626.00	162.57	168.92	Contact UH	Contact UH	Contact UH	162.57	168.92	162.57	594.70	194.26
171		92579	Visual Reinforcement Audiometry (Vra)	I/OP		533.00	138.42	168.92	Contact UH	Contact UH	Contact UH	138.42	168.92	138.42	506.35	194.26
172		92582	Conditioning Play Audiometry	OP		866.00	224.90	168.92	Contact UH	Contact UH	Contact UH	224.90	168.92	168.92	822.70	194.26
173		90686	Influenza Virus Vaccine	I/OP		78.00	20.26	20.53	Contact UH	Contact UH	Contact UH	20.26	20.53	20.26	74.10	23.60
174		92604	Diagnostic Analysis Of Cochlear Implant, Age 7 Yrs Or Older	OP		569.00	147.77	168.92	Contact UH	Contact UH	Contact UH	147.77	168.92	147.77	540.55	194.26
175		90715	Tetanus, Diphtheria Toxoids And Acellular Pertussis Vaccine (Tdap), 7 Years+	I/OP		163.00	42.33	36.16	Contact UH	Contact UH	Contact UH	42.33	36.16	36.16	154.85	41.59
176		86901	Blood Typing Rhd	I/OP		133.00	34.54	2.99	Contact UH	Contact UH	Contact UH	34.54	2.99	2.99	126.35	3.44
177		93922	Limited Bilateral Noninvasive Physiologic Studies Of Upper Or Lower Extremity Arteries	I/OP		820.00	212.95	136.43	Contact UH	Contact UH	Contact UH	212.95	136.43	136.43	779.00	156.89
178		36415	Routine Venipuncture	I/OP		56.00	1.80	3.00	Contact UH	Contact UH	Contact UH	1.80	3.00	1.80	53.20	3.45
179		92610	Evaluation Of Oral And Pharyngeal Swallowing Function	I/OP		243.00	63.11	N/A	Contact UH	Contact UH	Contact UH	63.11	N/A	63.11	230.85	T.B.D
180		92522	Evaluation Of Speech Sound Production	I/OP		534.00	138.68	N/A	Contact UH	Contact UH	Contact UH	138.68	N/A	138.68	507.30	T.B.D
181		93880	Duplex Scan Of Extracranial Arteries; Complete Bilateral Study	I/OP		891.00	231.39	278.40	Contact UH	Contact UH	Contact UH	231.39	278.40	231.39	846.45	320.16
182		97802	Medical Nutrition Therapy	OP		475.00	123.36	N/A	Contact UH	Contact UH	Contact UH	123.36	N/A	123.36	451.25	T.B.D
183		86703	Antibody; Hiv-1 And Hiv-2, Single Result	I/OP		52.00	18.00	13.71	Contact UH	Contact UH	Contact UH	18.00	13.71	13.50	49.40	15.77
184		93970	Duplex Scan Of Extremity Veins; Complete Bilateral Study	I/OP		2178.00	565.63	278.40	Contact UH	Contact UH	Contact UH	565.63	278.40	278.40	2069.10	320.16
185		96376	Therapeutic, Prophylactic, Or Diagnostic Injection Sequential Intravenous Push Of The Same Subst	I/OP		199.00	51.68	N/A	Contact UH	Contact UH	Contact UH	51.68	N/A	51.68	189.05	T.B.D
186		90744	Hepatitis B Vaccine (Hepb), Pediatric/Adolescent Dosage, 3 Dose Schedule	I/OP		161.00	41.81	28.76	Contact UH	Contact UH	Contact UH	41.81	28.76	28.76	152.95	33.07
187		93971	Duplex Scan Of Extremity Veins; Unilateral Or Limited Study	I/OP		449.00	116.61	131.72	Contact UH	Contact UH	Contact UH	116.61	131.72	116.61	426.55	151.48
188		90471	Immunization Administration	I/OP		229.00	59.47	75.01	Contact UH	Contact UH	Contact UH	59.47	75.01	59.47	217.55	86.26
189		90632	Hepatitis A Vaccine (Hepa), Adult Dosage, For Intramuscular Use	I/OP		210.00	54.54	64.74	Contact UH	Contact UH	Contact UH	54.54	64.74	54.54	199.50	74.45
190		99153	Mod Sedation Services Provided By The Same Physician	OP		245.00	63.63	N/A	Contact UH	Contact UH	Contact UH	63.63	N/A	63.63	232.75	T.B.D
191		93303	Trans thoracic Echocardiography	I/OP		2631.00	683.27	584.62	Contact UH	Contact UH	Contact UH	683.27	584.62	584.62	2499.45	672.31
192		73552	X-Ray, Femur, 2 Views	I/OP		261.00	67.78	97.87	Contact UH	Contact UH	Contact UH	67.78	97.87	67.78	247.95	112.55
193		96372	Therapeutic, Prophylactic, Or Diagnostic Injection; Subcutaneous Or Intramuscular	I/OP		176.00	45.71	75.01	Contact UH	Contact UH	Contact UH	45.71	75.01	45.71	167.20	86.26
194		95851	Range Of Motion Measurements And Report	I/OP		108.00	28.05	N/A	Contact UH	Contact UH	Contact UH	28.05	N/A	28.05	102.60	T.B.D
195		77300	Basic Radiation Dosimetry Calculation	I/OP		620.00	161.01	153.52	Contact UH	Contact UH	Contact UH	161.01	153.52	153.52	589.00	176.55
196		96366	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis, Each Additional Hour	I/OP		243.00	63.11	48.42	Contact UH	Contact UH	Contact UH	63.11	48.42	48.42	230.85	55.68
197		94761	Noninvasive Ear Or Pulse Oximetry For Oxygen Saturation; Multiple Determinations	I/OP		360.00	93.49	N/A	Contact UH	Contact UH	Contact UH	93.49	N/A	93.49	342.00	T.B.D
198		94640	Inhalation Therapy	I/OP		613.00	159.20	227.42	Contact UH	Contact UH	Contact UH	159.20	227.42	159.20	582.35	261.53
199		77412	Radiation Therapy Delivery	I/OP		860.00	223.34	292.46	Contact UH	Contact UH	Contact UH	223.34	292.46	223.34	817.00	336.33
200		77063	Screening Digital Breast Tomosynthesis, Bilateral	I/OP		500.00	129.85	N/A	Contact UH	Contact UH	Contact UH	129.85	N/A	129.85	475.00	T.B.D
201		87591	Infectious Agent Detection, Neisseria Gonorrhoeae	I/OP		155.00	38.00	35.09	Contact UH	Contact UH	Contact UH	38.00	35.09	35.09	147.25	40.35
202		97535	Self-Care/Home Management Training	I/OP		198.00	51.42	N/A	Contact UH	Contact UH	Contact UH	51.42	N/A	51.42	188.10	T.B.D
203		70551	Mri, Brain Without Contrast	I/OP		5732.00	1488.60	278.40	Contact UH	Contact UH	Contact UH	1488.60	278.40	278.40	5445.40	320.16
204		97162	Physical Therapy Evaluation, Complex, 30 Minutes	I/OP		360.00	93.49	N/A	Contact UH	Contact UH	Contact UH	93.49	N/A	93.49	342.00	T.B.D
205		92507	Therapy Speech And/Or Auditory	I/OP		178.00	46.23	N/A	Contact UH	Contact UH	Contact UH	46.23	N/A	46.23	169.10	T.B.D
206		92612	Flexible Endoscopic Evaluation Of Swallowing By Cine Or Video Recording	I/OP		902.00	234.25	N/A	Contact UH	Contact UH	Contact UH	234.25	N/A	234.25	856.90	T.B.D
207		71250	Ct Scan, Thorax Without Contrast	I/OP		971.00	252.17	131.72	Contact UH	Contact UH	Contact UH	252.17	131.72	131.72	922.45	151.48

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Shoppable ID	N/A Indicator	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
						Community Plan: Medicaid	Community Plan: Medicare					Medicare			
208		76705	Ultrasound Of Abdomen, Limited	I/IO/P	739.00	191.92	131.72	Contact UH	Contact UH	Contact UH	191.92	131.72	131.72	702.05	151.48
209		95813	Electroencephalogram (Eeg) Extended Monitoring; 61-119 Minutes	I/IO/P	771.00	200.23	320.21	Contact UH	Contact UH	Contact UH	200.23	320.21	200.23	732.45	368.24
210		93005	Electrocardiogram	I/IO/P	225.00	58.43	67.35	Contact UH	Contact UH	Contact UH	58.43	67.35	58.43	213.75	77.45
211		95819	Electroencephalogram (Eeg)	I/IO/P	977.00	253.73	320.21	Contact UH	Contact UH	Contact UH	253.73	320.21	253.73	928.15	368.24
212		94727	Gas Dilution	I/IO/P	533.00	138.42	168.92	Contact UH	Contact UH	Contact UH	138.42	168.92	138.42	506.35	194.26
213		94760	Noninvasive Ear Or Pulse Oximetry For Oxygen Saturation	I/IO/P	128.00	33.24	N/A	Contact UH	Contact UH	Contact UH	33.24	N/A	33.24	121.60	T.B.D
214		94644	Continuous Inhalation Therapy With Aerosol Medication For Acute Airway Obstruction; First Hour	I/IO/P	376.00	97.65	136.43	Contact UH	Contact UH	Contact UH	97.65	136.43	97.65	357.20	156.89
215		94645	Continuous Inhalation Therapy With Aerosol Medication For Acute Airway Obstruction; Each Addition	I/IO/P	386.00	100.24	N/A	Contact UH	Contact UH	Contact UH	100.24	N/A	100.24	366.70	T.B.D
216		94003	Ventilation Assist And Management; Hospital Inpatient/Observation, Each Subsequent Day	I/IO/P	940.00	244.12	589.43	Contact UH	Contact UH	Contact UH	244.12	589.43	244.12	1113.43	677.84
217		94002	Ventilation Assist And Management; Hospital Inpatient/Observation, Initial Day	I/IO/P	1862.00	483.56	589.43	Contact UH	Contact UH	Contact UH	483.56	589.43	483.56	1768.90	677.84
218		94681	Oxygen Uptake, Expired Gas Analysis	I/IO/P	903.00	234.51	320.21	Contact UH	Contact UH	Contact UH	234.51	320.21	234.51	857.85	368.24
219		94010	Spirometry	I/IO/P	533.00	138.42	168.92	Contact UH	Contact UH	Contact UH	138.42	168.92	138.42	506.35	194.26
220		93888	Transcranial Doppler Study Of The Intracranial Arteries; Limited Study	I/IO/P	836.00	217.11	131.72	Contact UH	Contact UH	Contact UH	217.11	131.72	131.72	794.20	151.48
221		77417	Therapeutic Radiology Port Image(S)	I/IO/P	360.00	93.49	N/A	Contact UH	Contact UH	Contact UH	93.49	N/A	93.49	342.00	T.B.D
222		94729	Diffusing Capacity	I/IO/P	360.00	93.49	N/A	Contact UH	Contact UH	Contact UH	93.49	N/A	93.49	342.00	T.B.D
223		77085	Bone Density Study, Dual-Energy X-Ray Absorptiometry	I/IO/P	411.00	106.74	131.72	Contact UH	Contact UH	Contact UH	106.74	131.72	106.74	390.45	151.48
224		77334	Therapy Devices, Design And Construction; Complex	I/IO/P	1387.00	360.20	409.72	Contact UH	Contact UH	Contact UH	360.20	409.72	360.20	1317.65	471.18
225		94668	Manipulation Of Chest Wall	I/IO/P	232.00	60.25	136.43	Contact UH	Contact UH	Contact UH	60.25	136.43	60.25	257.72	156.89
226		87536	Infectious Agent Detection; Hiv-1, Quant	I/IO/P	841.00	92.87	85.10	Contact UH	Contact UH	Contact UH	92.87	85.10	85.10	798.95	97.87
227		95951	Eeg Monitoring, Video Recording	I/IO/P	4147.00	1076.98	N/A	Contact UH	Contact UH	Contact UH	1076.98	N/A	1076.98	3939.65	T.B.D
228		76642	Ultrasound Of Breast	I/IO/P	409.00	106.22	97.87	Contact UH	Contact UH	Contact UH	106.22	97.87	97.87	388.55	112.55
229		96360	Intravenous Infusion, Hydration; Initial, 31 Minutes To 1 Hour	I/IO/P	581.00	150.89	247.52	Contact UH	Contact UH	Contact UH	150.89	247.52	150.89	551.95	284.65
230		93458	Catheter Placement In Coronary Artery(S) For Coronary Angiography	I/IO/P	13574.00	3525.17	3508.45	Contact UH	Contact UH	Contact UH	3525.17	3508.45	3508.45	12895.30	4034.72
231		76770	Ultrasound Of Retroperitoneal, Complete	I/IO/P	473.00	122.84	131.72	Contact UH	Contact UH	Contact UH	122.84	131.72	122.84	449.35	151.48
232		93975	Vascular Study	I/IO/P	845.00	219.45	278.40	Contact UH	Contact UH	Contact UH	219.45	278.40	219.45	802.75	320.16
233		76536	Ultrasound Of Head And Neck	I/IO/P	739.00	191.92	131.72	Contact UH	Contact UH	Contact UH	191.92	131.72	131.72	702.05	151.48
234		76775	Ultrasound Of Retroperitoneal, Limited	I/IO/P	473.00	122.84	131.72	Contact UH	Contact UH	Contact UH	122.84	131.72	122.84	449.35	151.48
235		74018	X-Ray, Abdomen	I/IO/P	248.00	64.41	97.87	Contact UH	Contact UH	Contact UH	64.41	97.87	64.41	235.60	112.55
236		86900	Blood Typing Abo	I/IO/P	242.00	62.85	2.99	Contact UH	Contact UH	Contact UH	62.85	2.99	2.99	257.72	9.44
237		87186	Susceptibility Studies, Antimicrobial Agent	I/IO/P	357.00	11.00	8.65	Contact UH	Contact UH	Contact UH	11.00	8.65	8.65	339.15	3.95
238		96375	Therapeutic, Prophylactic, Or Diagnostic Injection; Sequential Intravenous Push Of A New Substance	I/IO/P	205.00	53.24	48.42	Contact UH	Contact UH	Contact UH	53.24	48.42	48.42	194.75	55.68
239		86923	Compatibility Test Each Unit; Electronic	I/IO/P	441.00	12.00	180.45	Contact UH	Contact UH	Contact UH	12.00	180.45	12.00	418.95	207.52
240		86920	Compatibility Test Each Unit, Immediate Spin Technique	I/IO/P	424.00	110.11	180.45	Contact UH	Contact UH	Contact UH	110.11	180.45	110.11	402.80	207.52
241		99152	Mod Sedation Services Provided By The Same Physician	OP	281.00	72.98	N/A	Contact UH	Contact UH	Contact UH	72.98	N/A	72.98	266.95	T.B.D
242		97161	Physical Therapy Evaluation: Low Complexity 20 Minutes	I/IO/P	198.00	51.42	N/A	Contact UH	Contact UH	Contact UH	51.42	N/A	51.42	188.10	T.B.D
243		71046	C-Reactive Protein;	I/IO/P	248.00	64.41	97.87	Contact UH	Contact UH	Contact UH	64.41	97.87	64.41	235.60	112.55
244		87040	Culture, Bacterial, Blood	I/IO/P	86.00	9.00	10.32	Contact UH	Contact UH	Contact UH	9.00	10.32	9.00	81.70	11.87
245		97165	Occupational Therapy Evaluation, Low Complexity, 30 Minutes	I/IO/P	198.00	51.42	N/A	Contact UH	Contact UH	Contact UH	51.42	N/A	51.42	188.10	T.B.D
246		97166	Occupational Therapy Evaluation, Mod Complexity 45 Minutes	I/IO/P	360.00	93.49	N/A	Contact UH	Contact UH	Contact UH	93.49	N/A	93.49	342.00	T.B.D
247		73502	X-Ray, Hip, 2-3 Views	I/IO/P	261.00	67.78	97.87	Contact UH	Contact UH	Contact UH	67.78	97.87	67.78	247.95	112.55
248		86850	Antibody Screen, Rbc, Each Serum Technique	I/IO/P	167.00	43.37	9.77	Contact UH	Contact UH	Contact UH	43.37	9.77	9.77	158.65	11.24
249		72040	X-Ray, Neck, Spine, 2-3 Views	I/IO/P	243.00	63.11	97.87	Contact UH	Contact UH	Contact UH	63.11	97.87	63.11	230.85	112.55
250		80307	Drug Tests	I/IO/P	91.00	49.71	62.14	Contact UH	Contact UH	Contact UH	49.71	62.14	23.63	86.45	71.46
251		83690	Blood Test, Lipase	I/IO/P	55.00	4.50	6.89	Contact UH	Contact UH	Contact UH	4.50	6.89	4.50	52.25	7.92
252		82550	Blood Test, Creatine Kinase (Ck)	I/IO/P	45.00	4.80	6.51	Contact UH	Contact UH	Contact UH	4.80	6.51	4.80	42.75	7.49
253		93306	Echocardiography, With Doppler	I/IO/P	1892.00	491.35	584.62	Contact UH	Contact UH	Contact UH	491.35	584.62	491.35	1797.40	672.31
254		97018	Application Of A Modality To 1 Or More Areas; Paraffin Bath	OP	108.00	28.05	N/A	Contact UH	Contact UH	Contact UH	28.05	N/A	28.05	102.60	T.B.D
255		77002	X-Ray, Guidance Of Needle Placement	I/IO/P	845.00	219.45	N/A	Contact UH	Contact UH	Contact UH	219.45	N/A	219.45	802.75	T.B.D
256		96361	Intravenous Infusion, Hydration; Each Additional Hour	I/IO/P	298.00	77.39	48.42	Contact UH	Contact UH	Contact UH	77.39	48.42	48.42	283.10	55.68
257		71045	X-Ray, Chest, 1 View	I/IO/P	248.00	64.41	97.87	Contact UH	Contact UH	Contact UH	64.41	97.87	64.41	235.60	112.55
258		92526	Therapy Swallowing Dysfunction And/Or Oral Function For Feeding	I/IO/P	178.00	46.23	N/A	Contact UH	Contact UH	Contact UH	46.23	N/A	46.23	169.10	T.B.D
259		97129	Therapeutic Interventions, 15 Minutes	I/IO/P	178.00	46.23	N/A	Contact UH	Contact UH	Contact UH	46.23	N/A	46.23	169.10	T.B.D
260		82248	Bilirubin; Direct	I/IO/P	46.00	4.50	5.02	Contact UH	Contact UH	Contact UH	4.50	5.02	4.50	43.70	5.77
261		86706	Hepatitis B Surface Antibody	I/IO/P	91.00	12.00	10.74	Contact UH	Contact UH	Contact UH	12.00	10.74	10.74	86.45	12.35
262		83036	Hemoglobin; Glycosylated (A1C)	I/IO/P	57.00	6.60	9.71	Contact UH	Contact UH	Contact UH	6.60	9.71	6.60	54.15	11.17
263		97164	Re-Evaluation Of Physical Therapy Established Plan Of Care	I/IO/P	198.00	51.42	N/A	Contact UH	Contact UH	Contact UH	51.42	N/A	51.42	188.10	T.B.D
264		97150	Therapeutic Procedure, Group	I/IO/P	198.00	51.42	N/A	Contact UH	Contact UH	Contact UH	51.42	N/A	51.42	188.10	T.B.D
265		97112	Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes	I/IO/P	144.00	37.40	N/A	Contact UH	Contact UH	Contact UH	37.40	N/A	37.40	136.80	T.B.D
266		97760	Orthotic(S) Management And Training	I/IO/P	152.00	39.47	N/A	Contact UH	Contact UH	Contact UH	39.47	N/A	39.47	144.40	T.B.D
267		93454	Catheter Placement In Coronary Artery(S) For Coronary Angiography	I/IO/P	13574.00	3525.17	3508.45	Contact UH	Contact UH	Contact UH	3525.17	3508.45	3508.45	12895.30	4034.72
268		84702	Gonadotropin, Chorionic (Hcg); Quantitative	I/IO/P	52.00	11.39	15.05	Contact UH	Contact UH	Contact UH	11.39	15.05	11.39	49.40	17.31
269		97163	Physical Therapy Evaluation: High Complexity	I/IO/P	706.00	183.35	N/A	Contact UH	Contact UH	Contact UH	183.35	N/A	183.35	670.70	T.B.D
270		97530	Therapeutic Activities	I/IO/P	198.00	51.42	N/A	Contact UH	Contact UH	Contact UH	51.42	N/A	51.42	188.10	T.B.D
271		97168	Re-Evaluation Of Occupational Therapy Established Plan Of Care	I/IO/P	198.00	51.42	N/A	Contact UH	Contact UH	Contact UH	51.42	N/A	51.42	188.10	T.B.D
272		87086	Culture, Bacterial, Urine	I/IO/P	80.00	20.78	8.07	Contact UH	Contact UH	Contact UH	20.78	8.07	8.07	76.00	9.28
273		87150	Culture Typing, Dna/Rna Probe	I/IO/P	2726.00	28.07	35.09	Contact UH	Contact UH	Contact UH	28.07	35.09	28.07	2589.70	40.35
274		72070	X-Ray, Thoracic Spine, 2 Views	I/IO/P	232.00	60.25	131.72	Contact UH	Contact UH	Contact UH	60.25	131.72	60.25	248.82	151.48
275		93798	Cardiac Rehabilitation With Ecg Monitor	I/IO/P	384.00	99.72	140.44	Contact UH	Contact UH	Contact UH	99.72	140.44	99.72	364.80	161.51
276		73564	X-Ray, Knee, 4 Or More Views	I/IO/P	223.00	57.91	131.72	Contact UH	Contact UH	Contact UH	57.91	131.72	57.91	248.82	151.48

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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:		United Healthcare:		United Healthcare:		Wellcare:		Minimum		Maximum		Discounted Cash
ID	Indicator	Billing Code					Community Plan:	Medicaid	Community Plan:	Medicare	Commercial	Oxford	PPO	Wellcare: Medicaid	Wellcare: Medicare	Negotiated Rate	Negotiated Rate	Negotiated Rate	Negotiated Rate	Negotiated Rate	Negotiated Rate		
277		93350	Echocardiography, Transthoracic	I/OP		1892.00		491.35		584.62	Contact UH	Contact UH	Contact UH	491.35	584.62	491.35	1797.40					672.31	
278		97116	Therapeutic Procedure, Gait Training	I/OP		294.00		76.35		N/A	Contact UH	Contact UH	Contact UH	76.35	N/A	76.35	279.30					T.B.D	
279		92523	Evaluation Of Speech Sound Production	I/OP		534.00		138.68		N/A	Contact UH	Contact UH	Contact UH	138.68	N/A	138.68	507.30					T.B.D	
280		83540	Blood Test, Iron	I/OP		38.00		4.50		6.47	Contact UH	Contact UH	Contact UH	4.50	6.47	4.50	36.10					7.44	
281		84439	Blood Test, Free T4	I/OP		78.00		20.26		9.02	Contact UH	Contact UH	Contact UH	20.26	9.02	9.02	74.10					10.37	
282		82728	Blood Test, Ferritin	I/OP		115.00		16.00		13.63	Contact UH	Contact UH	Contact UH	16.00	13.63	13.63	109.25					15.67	
283		93308	Echocardiography, Transthoracic, Follow-Up Or Limited Study	I/OP		1113.00		289.05		278.40	Contact UH	Contact UH	Contact UH	289.05	278.40	278.40	1057.35					320.16	
284		86592	Syphilis Test	I/OP		44.00		11.43		4.27	Contact UH	Contact UH	Contact UH	11.43	4.27	4.27	41.80					4.91	
285		83605	Blood Test, Lactic Acid	I/OP		49.00		13.50		11.57	Contact UH	Contact UH	Contact UH	13.50	11.57	11.57	46.55					13.31	
286		84100	Blood Test, Phosphorus	I/OP		45.00		3.00		4.74	Contact UH	Contact UH	Contact UH	3.00	4.74	3.00	42.75					5.45	
287		93017	Cardiovascular Stress Test	I/OP		1082.00		281.00		320.21	Contact UH	Contact UH	Contact UH	281.00	320.21	281.00	1027.90					368.24	
288		76856	Ultrasound Of Pelvis	I/OP		462.00		119.98		131.72	Contact UH	Contact UH	Contact UH	119.98	131.72	119.98	438.90					151.48	
289		70496	Ct Scan, Head Or Brain	I/OP		2319.00		602.24		216.12	Contact UH	Contact UH	Contact UH	602.24	216.12	216.12	2203.05					248.54	
290		74170	Ct Scan, Abdomen With And Without Contrast	I/OP		4344.00		1128.14		216.12	Contact UH	Contact UH	Contact UH	1128.14	216.12	216.12	4126.80					248.54	
291		70486	Ct Scan, Maxillofacial Without Contrast	I/OP		1093.00		283.85		131.72	Contact UH	Contact UH	Contact UH	283.85	131.72	131.72	1038.35					151.48	
292		71260	Ct Scan, Thorax With Contrast	I/OP		1500.00		389.55		216.12	Contact UH	Contact UH	Contact UH	389.55	216.12	216.12	1425.00					248.54	
293		88341	Immunohistochemistry Or Immunocytochemistry, Per Specimen	I/OP		152.00		79.42		N/A	Contact UH	Contact UH	Contact UH	79.42	N/A	39.47	144.40					T.B.D	
294		87077	Culture, Bacterial; Aerobic Isolate	I/OP		73.00		9.00		8.08	Contact UH	Contact UH	Contact UH	9.00	8.08	8.08	69.35					9.29	
295		76937	Ultrasound Guided Vascular Access	I/OP		558.00		144.91		N/A	Contact UH	Contact UH	Contact UH	144.91	N/A	144.91	530.10					T.B.D	
296		77001	Fluoroscopic Guidance For Vein Dvc	I/OP		454.00		117.90		N/A	Contact UH	Contact UH	Contact UH	117.90	N/A	117.90	431.30					T.B.D	
297		83615	Lactate Dehydrogenase (Ld), (Ldh)	I/OP		55.00		4.20		6.04	Contact UH	Contact UH	Contact UH	4.20	6.04	4.20	52.25					6.95	
298		85652	Sedimentation Rate, Erythrocyte, Automated	I/OP		23.00		1.50		2.70	Contact UH	Contact UH	Contact UH	1.50	2.70	1.50	21.85					3.11	
299		82306	Gonadotropin, Chorionic (Hcg); Quantitative	I/OP		166.00		30.00		29.60	Contact UH	Contact UH	Contact UH	30.00	29.60	29.60	157.70					34.04	
300		86803	Hepatitis C Antibody	I/OP		118.00		19.00		14.27	Contact UH	Contact UH	Contact UH	19.00	14.27	14.27	112.10					16.41	
301		80202	Blood Test, Vancomycin	I/OP		97.00		12.00		13.54	Contact UH	Contact UH	Contact UH	12.00	13.54	12.00	92.15					15.57	
302		86704	Hepatitis B Core Antibody (Hbcab); Total	I/OP		106.00		15.00		12.05	Contact UH	Contact UH	Contact UH	15.00	12.05	12.05	100.70					13.86	
303		84484	Blood Test, Troponin	I/OP		76.00		9.51		12.47	Contact UH	Contact UH	Contact UH	9.51	12.47	9.51	72.20					14.34	
304		84145	Procalcitonin (Pct)	I/OP		549.00		142.58		27.22	Contact UH	Contact UH	Contact UH	142.58	27.22	27.22	521.55					31.30	
305		86140	C-Reactive Protein	I/OP		34.00		8.83		5.18	Contact UH	Contact UH	Contact UH	8.83	5.18	5.18	32.30					5.96	
306		87340	Infectious Agent Antigen Detection, Hep B	I/OP		90.00		14.00		10.33	Contact UH	Contact UH	Contact UH	14.00	10.33	10.33	85.50					11.88	
307		84132	Blood Test, Potassium	I/OP		26.00		3.90		4.76	Contact UH	Contact UH	Contact UH	3.90	4.76	3.90	24.70					5.47	
308		88305	Level Iv - Surgical Pathology, Gross And Microscopic Examination	I/OP		105.00		27.27		60.12	Contact UH	Contact UH	Contact UH	27.27	60.12	27.27	113.57					69.14	
309		83550	Iron Binding Capacity	I/OP		27.00		7.01		8.74	Contact UH	Contact UH	Contact UH	7.01	8.74	7.01	25.65					10.05	
310		87389	Infectious Agent Antigen Detection, With Hiv	I/OP		99.00		25.71		24.08	Contact UH	Contact UH	Contact UH	25.71	24.08	24.08	94.05					27.69	
311		84295	Blood Test, Sodium	I/OP		27.00		3.90		4.81	Contact UH	Contact UH	Contact UH	3.90	4.81	3.90	25.65					5.53	
312		83880	Blood Test, B-Type Natriuretic Peptide (Bnp)	I/OP		152.00		39.47		39.26	Contact UH	Contact UH	Contact UH	39.47	39.26	39.26	144.40					45.15	
313		82570	Blood Test, Creatine Urine	I/OP		51.00		3.00		5.18	Contact UH	Contact UH	Contact UH	3.00	5.18	3.00	48.45					5.96	
314		82247	Bilirubin; Total	I/OP		46.00		3.00		5.02	Contact UH	Contact UH	Contact UH	3.00	5.02	3.00	43.70					5.77	
315		88185	Flow Cytometry, Cell Surface, Cytoplasmic, Or Nuclear Marker, Technical Component Only	I/OP		64.00		16.62		N/A	Contact UH	Contact UH	Contact UH	16.62	N/A	16.62	60.80					T.B.D	
316		87070	Culture, Bacterial; Any Other Source Except Urine, Blood, Stool Or Aerobic	I/OP		152.00		9.00		8.62	Contact UH	Contact UH	Contact UH	9.00	8.62	8.62	144.40					9.91	
317		87205	Smear, Primary Source With Interpretation; Gram Or Giemsa Stain For Bacteria, Fungi, Or Cell Type	I/OP		39.00		4.20		4.27	Contact UH	Contact UH	Contact UH	4.20	4.27	4.20	37.05					4.91	
318		85007	Blood Count	I/OP		20.00		2.40		3.80	Contact UH	Contact UH	Contact UH	2.40	3.80	2.40	19.00					4.37	
319		87081	Culture, Presumptive, Pathogenic Organisms, Screening Only	I/OP		83.00		9.00		6.63	Contact UH	Contact UH	Contact UH	9.00	6.63	6.63	78.85					7.62	
320		74176	Ct Scan, Abdomen And Pelvis Without Contrast	I/OP		971.00		252.17		278.40	Contact UH	Contact UH	Contact UH	252.17	278.40	252.17	922.45					320.16	
321		82435	Blood Test, Chloride	I/OP		26.00		6.75		4.60	Contact UH	Contact UH	Contact UH	6.75	4.60	4.60	24.70					5.29	