

University Hospital
 Shoppable Services
 Filename: 221775306_UniversityHospital_ShoppableServices.pdf
 Updated 3/10/2026, using 1/6/2026 CDM

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	Aetna Health Plan: Better Health	Aetna Health Plan: Commercial	Aetna Health Plan: Medicare	Devon Health Services (FKA Americare)	WellPoint	Amerihealth: HMO and PPO	Amerihealth: Medicare	Clover Health: Medicare HMO/PPO	Consumer Health Network: PPO	Correctional Medical Services, In.
1		85027	Complete Blood Count, Automated	I/OP	34.68	10.18	13.18	6.47	26.01	10.38	10.00	6.47	6.47	32.95	27.74
2		80053	Blood Test, Comprehensive Group Of Blood Chemicals	I/OP	205.02	60.19	77.91	10.56	163.77	61.38	14.60	10.56	10.56	194.77	164.02
3		80061	Blood Test, Lipids (Cholesterol And Triglycerides)	I/OP	77.52	22.76	29.46	23.88	58.14	23.21	19.00	13.39	13.39	73.64	62.02
4		84153	Psa (Prostate Specific Antigen)	I/OP	228.48	67.08	86.82	70.37	171.36	68.41	26.10	18.39	18.39	217.06	182.78
5		80076	Liver Function Blood Test Panel	I/OP	72.42	21.26	27.52	8.17	54.32	21.68	11.30	8.17	8.17	68.80	57.94
6		70450	Ct Scan, Head Or Brain, Without Contrast	I/OP	2535.72	744.49	197.96	121.30	1901.79	759.19	137.02	121.30	121.30	2408.93	2028.58
7		74177	Ct Scan Of Abdomen And Pelvis With Contrast	I/OP	1623.84	476.76	664.84	407.38	1217.88	486.18	196.54	407.38	407.38	1542.65	1299.07
8		81001	Manual Urinalysis Test With Examination Using Microscope	I/OP	38.76	11.38	14.73	11.94	29.07	11.60	4.40	3.17	3.17	36.82	31.01
9		76830	Ultrasound Pelvis Through Vagina	I/OP	626.03	183.80	197.96	121.30	469.52	187.43	57.66	121.30	121.30	594.73	500.82
10		62323	Injection Of Substance Into Spinal Canal Of Lower Back Or Sacrum Using Imaging Guidance	I/OP	3127.58	918.26	1289.21	789.96	2345.69	936.40	300.00	789.96	789.96	2971.20	2502.06
11		85610	Blood Test, Clotting Time	I/OP	15.30	4.49	5.81	4.29	11.48	4.58	5.60	4.29	4.29	14.54	12.24
12		85730	Coagulation Assessment Blood Test	I/OP	20.40	5.99	7.75	6.01	15.30	6.11	9.40	6.01	6.01	19.38	16.32
13		80048	Basic Metabolic Panel	I/OP	162.18	47.62	61.63	8.46	115.30	48.56	11.70	8.46	8.46	124.07	129.74
14		72193	Ct Scan, Pelvis, With Contrast	I/OP	1755.42	515.39	331.41	203.07	1316.57	525.57	192.82	203.07	203.07	1667.65	1404.34
15		93452	Insertion Of Catheter Into Left Heart For Diagnosis	OP	14690.04	4313.00	5987.74	3668.96	11017.53	4398.20	2000.00	3668.96	3668.96	13965.54	11752.03
16		76700	Ultrasound Of Abdomen	I/OP	1105.68	324.63	197.96	121.30	829.26	331.04	70.68	121.30	121.30	1060.40	884.54
17		73721	Mri Scan Of Leg Joint	I/OP	1879.86	551.93	449.99	275.73	1409.90	562.83	294.50	275.73	275.73	1785.87	1503.89
18		59400	Routine Obstetric Care For Vaginal Delivery, Including Pre-And Post-Delivery Care	I/OP	8470.08	2486.82	3218.63	2608.78	6352.56	2635.94	5505.55	N/A	N/A	8046.58	6776.06
19		77067	Mammography, Screening, Bilateral	I/OP	541.62	159.02	205.82	166.82	406.22	162.16	37.20	N/A	N/A	514.54	433.30
20		43239	Biopsy Of The Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope	I/OP	3269.10	959.81	1745.38	1006.88	2451.83	978.77	550.00	1069.47	1069.47	3105.65	2615.28
21		43235	Diagnostic Examination Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope	I/OP	3269.10	959.81	1745.38	1069.47	2451.83	978.77	300.00	1069.47	1069.47	3105.65	2615.28
22		72110	X-Ray, Lower Back, Minimum Four Views	I/OP	403.92	118.59	197.96	121.30	302.94	120.93	31.00	121.30	121.30	383.72	323.14
23		64483	Injections Of Anesthetic And/Or Steroid Drug Into Lower Or Sacral Spine Nerve Root Using Imaging Guidance	I/OP	3168.12	930.16	1657.38	1015.55	2376.09	948.54	300.00	1015.55	1015.55	3009.71	2534.50
24		45385	Removal Of Polyps Or Growths Of Large Bowel Using An Endoscope	I/OP	2984.52	876.26	2195.01	1344.98	2238.39	893.57	550.00	1344.98	1344.98	2835.29	2387.62
25		77066	Mammography Of Both Breasts	I/OP	541.62	159.02	205.82	166.82	406.22	162.16	48.98	N/A	N/A	514.54	433.30
26		45380	Biopsy Of Large Bowel Using An Endoscope	OP	2984.52	876.26	2195.01	1344.98	2238.39	893.57	550.00	1344.98	1344.98	2835.29	2387.62
27		49505	Repair Of Groin Hernia Patient Age 5 Years Or Older	OP	8993.34	2640.44	6569.78	4025.60	6745.01	2692.61	950.00	4025.60	4025.60	8543.67	7194.67
28		97110	Physical Therapy, Therapeutic Exercise	I/OP	165.24	48.51	62.79	50.89	123.93	49.47	30.00	N/A	N/A	156.98	132.19
29		70553	Mri Scan Of Brain Before And After Contrast	I/OP	10027.62	2944.11	664.84	407.38	7520.72	3002.27	477.40	407.38	407.38	9526.24	8022.10
30		81002	Automated Urinalysis Test	I/OP	23.46	6.89	8.91	3.48	17.60	7.02	5.00	3.48	3.48	22.29	18.77
31		68821	Removal Of Recurring Cataract In Lens Capsule Using Laser	OP	1973.70	579.48	1021.29	625.79	1480.28	590.93	550.00	625.79	625.79	1875.02	1578.96
32		72148	Mri Scan Of Lower Spinal Canal	I/OP	1446.36	424.65	449.99	275.73	1084.77	433.04	294.50	275.73	275.73	1374.04	1157.09
33		90832	Psychotherapy, 30 Min	OP	542.64	159.32	299.11	183.28	406.98	162.47	352.72	183.28	183.28	515.51	434.11
34		55700	Biopsy Of Prostate Gland	OP	8650.88	2539.90	3813.56	2336.74	6488.16	2590.07	650.00	2336.74	2336.74	8218.34	6920.70
35		45391	Ultrasound Examination Of Lower Large Bowel Using An Endoscope	OP	4146.30	1217.35	2195.01	1344.98	3109.73	1241.40	550.00	1344.98	1344.98	3938.99	3317.04
36		77065	Mammography Of One Breast	I/OP	541.62	159.02	205.82	166.82	406.22	162.16	38.44	N/A	N/A	514.54	433.30
37		19120	Removal Of 1 Or More Breast Growth, Open Procedure	OP	12774.00	3750.59	7128.67	4368.06	9580.86	3824.68	650.00	4368.06	4368.06	12135.76	10219.58
38		90834	Psychotherapy, 45 Min	OP	542.64	159.32	299.11	167.13	406.98	162.47	352.72	183.28	183.28	515.51	434.11
39		90837	Psychotherapy, 60 Min	OP	542.64	159.32	299.11	183.28	406.98	162.47	352.72	183.28	183.28	515.51	434.11
40		85025	Complete Blood Cell Count, With Differential White Blood Cells, Automated	I/OP	44.88	13.18	17.05	13.82	33.66	13.44	11.00	7.77	7.77	42.64	35.90
41		84443	Blood Test, Thyroid Stimulating Hormone (Tsh)	I/OP	637.50	187.17	242.25	196.35	478.13	190.87	26.20	16.80	16.80	605.63	510.00
42		90853	Group Psychotherapy	OP	284.58	83.55	172.19	105.51	213.44	85.20	184.98	105.51	105.51	270.35	227.66
43		45378	Diagnostic Examination Of Large Bowel Using An Endoscope	I/OP	2984.52	876.26	1697.26	1039.99	2238.39	893.57	550.00	1039.99	1039.99	2835.29	2387.62
44		90846	Family Psychotherapy, Not Including Patient, 50 Min	OP	472.59	138.75	299.11	183.28	364.44	141.49	307.18	183.28	183.28	448.96	378.07
45		90847	Family Psychotherapy, Including Patient, 50 Min	OP	472.59	138.75	299.11	183.28	364.44	141.49	307.18	183.28	183.28	448.96	378.07
46		99203	New Patient Office Or Other Outpatient Visit, Typically 30 Min	OP	306.00	89.84	116.28	94.25	229.50	91.62	198.90	N/A	N/A	290.70	244.80
47		99204	New Patient Office Or Other Outpatient Visit, Typically 45 Min	OP	469.20	137.76	178.30	144.51	351.90	140.48	304.98	N/A	N/A	445.74	375.36
48		99205	New Patient Office Or Other Outpatient Visit, Typically 60 Min	OP	581.40	170.70	220.93	179.07	436.05	174.07	377.91	N/A	N/A	552.33	465.12
49		99243	Patient Office Consultation, Typically 40 Min	OP	346.80	101.82	131.78	106.81	260.10	103.83	N/A	N/A	N/A	329.46	277.44
50		42820	Removal Of Tonsils And Adenoid Glands Patient Younger Than Age 12	OP	17359.48	5096.45	11012.72	6747.99	13018.86	5197.13	950.00	6747.99	6747.99	16490.56	13886.78
51		47562	Removal Of Gallbladder Using An Endoscope	OP	17103.00	5021.44	10861.37	6655.25	12827.25	5120.64	2400.00	6655.25	6655.25	16382.40	13682.40
52		55866	Surgical Removal Of Prostate And Surrounding Lymph Nodes Using An Endoscope	OP	30511.94	8958.31	19381.76	11876.08	22883.96	9135.27	800.00	11876.08	11876.08	28986.34	24409.55
53		59510	Routine Obstetric Care For Cesarean Delivery, Including Pre-And Post-Delivery Care	I/OP	3020.12	886.71	1147.65	930.20	2265.09	904.22	1963.08	N/A	N/A	2899.11	2416.10
54		59610	Routine Obstetric Care For Vaginal Delivery After Prior Cesarean Delivery Including Pre-And Post-Del	I/OP	9263.64	2719.80	3520.18	2853.20	6947.73	2773.53	6021.37	N/A	N/A	8800.46	7410.91
55		66984	Removal Of Cataract With Insertion Of Lens	OP	6907.51	2028.04	4245.86	2601.63	5180.63	2068.11	1400.00	2601.63	2601.63	6562.13	5526.01
56	N/A	DRG - 460	Spinal Fusion Except Cervical Without Major Comorbid Conditions Or Complications (Mcc)	IP	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
57		DRG - 470	Major Joint Replacement Or Reattachment Of Lower Extremity Without Major Comorbid Conditions Or Complications	IP	N/A	N/A	33117.28	33117.28	N/A	N/A	33117.28	33117.28	33117.28	N/A	N/A
58		DRG - 473	Cervical Spinal Fusion Without Comorbid Conditions (Cc) Or Major Comorbid Conditions Or Complications	IP	N/A	N/A	41914.68	41914.68	N/A	N/A	41914.68	41914.68	41914.68	N/A	N/A
59		DRG - 743	Uterine And Adnexa Procedures For Non-Malignancy Without Comorbid Conditions (Cc) Or Major Comorbid Conditions (Cc)	IP	N/A	N/A	21301.58	21301.58	N/A	N/A	21301.58	21301.58	21301.58	N/A	N/A
60		29826	Shaving Of Shoulder Bone Using An Endoscope	OP	189.19	55.55	71.89	58.27	141.89	56.64	1050.00	N/A	N/A	179.73	151.35
61		29881	Removal Of One Knee Cartilage Using An Endoscope	OP	9594.42	2816.92	6040.24	2955.08	7195.82	2872.57	1050.00	3701.13	3701.13	9114.70	7675.54
62		99244	Patient Office Consultation, Typically 60 Min	OP	520.20	152.73	197.68	160.22	390.15	155.75	338.13	N/A	N/A	494.19	416.16
63		99385	Initial New Patient Preventive Medicine Evaluation (18-39 Years)	OP	377.40	110.80	143.41	116.24	283.05	112.99	245.31	N/A	N/A	383.53	301.92
64		99386	Initial New Patient Preventive Medicine Evaluation (40-64 Years)	OP	428.40	125.78	162.79	131.95	321.30	128.26	278.46	N/A	N/A	406.98	342.72
65	N/A	80055	Obstetric Blood Test Panel	OP	N/A	N/A	N/A	N/A	N/A	N/A	Contact UH	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	Contact UH	N/A	N/A	N/A	N/A
67	N/A	DRG - 216	Cardiac Valve And Other Major Cardiothoracic Procedures With Cardiac Catheterization With Major C	IP	N/A	N/A	167960.89	167960.89	N/A	N/A	167960.89	167960.89	167960.89	N/A	N/A
68		93000	Electrocardiogram, Routine, With Interpretation And Report	OP	16.39	4.81	6.23	5.05	12.29	4.91	30.00	N/A	N/A	15.57	13.11
69		95810	Sleep Study	OP	3099.12	909.90	1894.00	954.53	2324.34	927.88	380.00	1160.54	1160.54	2944.16	2479.30

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70		76805	Abdominal Ultrasound Of Pregnant Uterus (Greater Or Equal To 14 Weeks 0 Days) Single Or First Fe	I/OP	497.76	146.14	197.96	153.31	373.32	149.03	62.00	121.30	121.30	472.87	398.21
71		86480	Tuberculosis Test	I/OP	562.02	165.01	213.57	61.98	421.52	168.27	95.00	61.98	61.98	533.92	449.62
72		83735	Blood Test, Magnesium	I/OP	130.56	38.33	49.61	6.70	97.92	39.09	10.50	6.70	6.70	124.03	104.45
73		DRG - 115	Extraocular Procedures Except Orbit	IP	N/A	N/A	26352.70	26352.70	N/A	N/A	26352.70	26352.70	26352.70	N/A	N/A
74		DRG - 117	Intraocular Procedures Without Complications	IP	N/A	N/A	18626.65	18626.65	N/A	N/A	18626.65	18626.65	18626.65	N/A	N/A
75		DRG - 788	Cesarean Section Without Sterilization Without Complications	IP	N/A	N/A	16461.64	16461.64	N/A	N/A	8487.00	16461.64	16461.64	N/A	N/A
76		DRG - 906	Hand Procedures For Injuries	IP	N/A	N/A	30258.65	30258.65	N/A	N/A	30258.65	30258.65	30258.65	N/A	N/A
77		DRG - 482	Hipand Femur Procedures Except Major Joint Without Complications	IP	N/A	N/A	28002.64	28002.64	N/A	N/A	28002.64	28002.64	28002.64	N/A	N/A
78		DRG - 494	Lower Extremity And Humerus Procedures Except Hip, Foot And Femur Without Complications	IP	N/A	N/A	34449.60	34449.60	N/A	N/A	34449.60	34449.60	34449.60	N/A	N/A
79		DRG - 502	Soft Tissue Procedures Without Complications	IP	N/A	N/A	23107.76	23107.76	N/A	N/A	23107.76	23107.76	23107.76	N/A	N/A
80		DRG - 505	Foot Procedures W/O Cc/Mcc	IP	N/A	N/A	30780.58	30780.58	N/A	N/A	30780.58	30780.58	30780.58	N/A	N/A
81		DRG - 512	Shoulder, Elbow Or Forearm Procedures, Except Major Joint Procedures Without Complications	IP	N/A	N/A	28421.56	28421.56	N/A	N/A	28421.56	28421.56	28421.56	N/A	N/A
82		DRG - 660	Kidney And Ureter Procedures For Non-Neoplasm With Complications	IP	N/A	N/A	22692.27	22692.27	N/A	N/A	22692.27	22692.27	22692.27	N/A	N/A
83		DRG - 142	Major Head And Neck Procedures Without Complications	IP	N/A	N/A	27408.59	27408.59	N/A	N/A	27408.59	27408.59	27408.59	N/A	N/A
84		DRG - 250	Percutaneous Cardiovascular Procedures With Coronary Artery Stent	IP	N/A	N/A	37471.34	37471.34	N/A	N/A	37471.34	37471.34	37471.34	N/A	N/A
85		DRG - 329	Major Small And Large Bowel Procedures With Major Comp	IP	N/A	N/A	78917.31	78917.31	N/A	N/A	78917.31	78917.31	78917.31	N/A	N/A
86		DRG - 355	Hernia Procedures Except Inguinal And Femoral Without Complications	IP	N/A	N/A	23092.31	23092.31	N/A	N/A	23092.31	23092.31	23092.31	N/A	N/A
87		DRG - 419	Laparoscopic Cholecystectomy Without C.D.E. Without Complications	IP	N/A	N/A	23449.42	23449.42	N/A	N/A	23449.42	23449.42	23449.42	N/A	N/A
88		DRG - 479	Biopsies Of Musculoskeletal System And Connective Tissue Without Complications	IP	N/A	N/A	31915.45	31915.45	N/A	N/A	31915.45	31915.45	31915.45	N/A	N/A
89		DRG - 448	Multiple Level Spinal Fusion Except Cervical Without Mcc	IP	N/A	N/A	72810.30	72810.30	N/A	N/A	72810.30	72810.30	72810.30	N/A	N/A
90		DRG - 451	Single Level Spinal Fusion Except Cervical Without Mcc	IP	N/A	N/A	55462.74	55462.74	N/A	N/A	55462.74	55462.74	55462.74	N/A	N/A
91		72131	Ct Scan, Lumbar Spine	I/OP	734.40	215.62	197.96	121.30	550.80	219.88	171.74	121.30	121.30	697.68	587.52
92		87491	Infectious Agent Detection, Chlamydia Trachomatis	I/OP	365.16	107.21	138.76	35.09	273.67	109.33	48.50	35.09	35.09	346.90	292.13
93		73700	Ct Scan, Lower Extremities	I/OP	1819.68	534.26	197.96	121.30	1384.76	544.81	147.56	121.30	121.30	1728.70	1455.74
94		73630	X-Ray, Foot	I/OP	831.30	244.07	163.92	100.44	623.48	248.89	17.98	100.44	100.44	789.74	685.04
95		73560	X-Ray, Knee	I/OP	803.25	235.83	163.92	100.44	602.44	240.49	16.74	100.44	100.44	763.09	642.60
96		72190	X-Ray, Pelvis, 3 Views	I/OP	407.35	119.60	197.96	121.30	305.51	121.96	22.32	121.30	121.30	386.98	325.88
97		92557	Comprehensive Audiometry Threshold Evaluation And Speech Recognition	I/OP	542.64	159.32	291.26	178.47	406.98	162.47	65.00	178.47	178.47	515.51	434.11
98		76512	Ophthalmic Ultrasound, Diagnostic, B-Scan With And Without Quant. A	I/OP	402.90	118.29	197.96	121.30	302.18	120.63	56.42	121.30	121.30	382.76	322.32
99		70355	X-Ray, Jaws, Panoramic	I/OP	325.38	95.53	163.92	100.22	244.04	97.42	22.94	100.44	100.44	309.11	260.30
100		96415	Chemotherapy Administration, Intravenous Infusion Technique	I/OP	252.96	74.27	132.49	81.18	189.72	75.74	27.00	81.18	81.18	240.31	202.37
101		96367	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis; Additional Sequential Infusion Of A New	I/OP	252.96	74.27	132.49	81.18	189.72	75.74	164.42	81.18	81.18	240.31	202.37
102		70498	Ct Scan, Neck	I/OP	1693.20	497.12	331.41	203.07	1269.90	506.94	220.10	203.07	203.07	1608.54	1354.56
103		76376	3D Rendering With Interpretation And Post Process Supervision	I/OP	287.64	84.45	109.30	88.59	215.73	86.12	186.97	N/A	N/A	273.26	230.11
104		92567	Tympanometry	OP	416.16	122.18	73.06	128.18	312.12	124.60	25.00	44.77	44.77	395.35	332.93
105		92235	Fluorescein Angiography	OP	1043.46	306.36	579.70	355.21	782.60	312.41	53.03	355.21	355.21	991.29	834.77
106		76815	Abdominal Ultrasound Of Pregnant Uterus	I/OP	545.70	160.22	197.96	168.08	409.28	163.38	53.32	121.30	121.30	518.42	436.56
107		96368	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis; Concurrent Infusion	I/OP	155.04	45.52	58.92	47.75	116.28	46.42	100.78	N/A	N/A	147.29	124.03
108		90472	Immunization Administration	I/OP	174.42	51.21	66.28	53.72	130.82	52.22	113.37	N/A	N/A	165.70	139.54
109		92603	Diagnostic Analysis Of Cochlear Implant, Age 7 Years Or Older; With Programming	OP	542.64	159.32	291.26	178.47	406.98	162.47	48.00	178.47	178.47	515.51	434.11
110		92250	Fundus Photography With Interpretation And Report	OP	432.48	126.98	239.97	147.04	324.36	129.48	25.88	147.04	147.04	410.86	345.98
111		96523	Irrigation Of Implanted Venous Access Device	I/OP	215.22	63.19	110.58	67.76	161.42	64.44	25.00	67.76	67.76	204.46	172.18
112		90746	Hepatitis B Vaccine (Hepb), Adult Dosage, 3 Dose Schedule, For Intramuscular Use	I/OP	254.71	74.78	96.79	75.15	191.03	76.26	61.05	75.15	75.15	241.97	203.77
113		89051	Cell Count, Miscellaneous Body Fluids	I/OP	103.02	30.25	39.15	31.73	77.27	30.84	8.60	5.60	5.60	97.87	82.42
114		73590	X-Ray, Lower Leg	I/OP	773.93	227.23	163.92	100.44	580.45	231.71	17.98	100.44	100.44	735.23	619.14
115		72170	X-Ray, Pelvis, 1-2 Views	I/OP	407.35	119.60	197.96	121.30	305.51	121.96	121.30	121.30	121.30	386.98	325.88
116		73070	X-Ray, Elbow	I/OP	770.10	226.10	163.92	100.44	577.58	230.57	17.98	100.44	100.44	731.60	616.08
117		72125	Ct Scan, Neck Spine Without Contrast	I/OP	1343.34	394.40	197.96	143.75	1007.51	402.20	171.74	121.30	121.30	1074.67	874.67
118		73030	X-Ray, Shoulder	I/OP	761.18	223.48	163.92	100.44	570.89	227.90	19.22	100.44	100.44	608.94	504.67
119		73060	X-Ray, Humerus	I/OP	771.38	226.48	163.92	100.44	578.54	230.95	18.60	100.44	100.44	732.81	617.10
120		72100	X-Ray, Lumbar Spine, 2-3 Views	I/OP	592.88	174.07	197.96	121.30	444.66	177.51	22.94	121.30	121.30	563.24	474.30
121		73120	Hepatitis B Surface Antibody (Hbsab)	I/OP	655.35	192.41	197.96	201.85	491.51	196.21	16.74	121.30	121.30	622.58	524.28
122		73610	X-Ray, Ankle	I/OP	300.90	88.34	163.92	100.44	225.68	90.09	17.98	100.44	100.44	285.86	240.72
123		73110	X-Ray, Wrist	I/OP	465.38	136.64	163.92	100.44	349.04	139.33	17.98	100.44	100.44	442.11	372.30
124		73090	X-Ray, Forearm	I/OP	770.10	226.10	163.92	100.44	577.58	230.57	18.60	100.44	100.44	731.60	616.08
125		93312	Echocardiography, Transesophageal	I/OP	2769.30	813.07	1020.73	625.45	2076.98	829.13	225.00	625.45	625.45	2630.84	2215.44
126		97140	Manual Therapy Techniques, 1 Or More Regions, Each 15 Minutes	I/OP	215.22	63.19	81.78	66.29	161.42	64.44	15.00	N/A	N/A	204.46	172.18
127		92611	Motion Fluoroscopic Evaluation Of Swallowing Function By Cine Or Video Recording	I/OP	1018.98	299.17	387.21	313.85	764.24	305.08	77.00	N/A	N/A	968.03	815.18
128		73562	X-Ray, Knee, 3 Views	I/OP	323.85	95.08	163.92	100.44	242.89	96.96	19.22	100.44	100.44	307.66	259.08
129		96374	Therapeutic, Prophylactic, Or Diagnostic Injection; Intravenous Push, Single Or Initial Substance/Drug	I/OP	765.00	224.60	392.22	235.62	573.75	229.04	497.25	240.33	240.33	726.75	612.00
130		92950	Cardiopulmonary Resuscitation	I/OP	1402.50	411.77	579.70	431.97	1051.88	419.91	116.00	355.21	355.21	1332.38	1122.00
131		77386	Intensity Modulated Radiation Therapy Delivery Complex	I/OP	2433.72	714.54	1076.89	659.86	1825.29	728.66	424.00	659.86	659.86	2312.03	1946.98
132		93990	Duplex Scan Of Hemodialysis Access	I/OP	397.80	116.79	197.96	121.30	298.35	119.10	110.00	121.30	121.30	377.91	318.24
133		93926	Duplex Scan Of Lower Extremity Arteries Or Arterial Bypass Grafts; Unilateral Or Limited Study	I/OP	397.80	116.79	197.96	121.30	298.35	119.10	125.00	121.30	121.30	377.91	318.24
134		84703	Blood Test, Human Chorionic Gonadotropin (Hcg)	I/OP	179.52	52.71	68.22	7.52	134.64	53.75	11.60	7.52	7.52	170.54	143.62
135		93978	Duplex Scan Of Aorta, Inferior Vena Cava, Iliac Vasculature, Or Bypass Grafts; Complete Study	I/OP	915.96	268.93	449.99	282.12	686.97	274.24	180.00	275.73	275.73	870.16	732.77
136		93925	Duplex Scan Of Lower Extremity Arteries Or Arterial Bypass Grafts; Complete Bilateral Study	I/OP	870.06	255.45	449.99	267.98	652.55	260.50	175.00	275.73	275.73	696.05	584.28
137		92587	Distortion Product Evoked Otoacoustic Emissions	I/OP	1044.48	306.66	579.70	355.21	783.36	312.72	48.00	355.21	355.21	992.26	835.58
138		92134	Scanning Computerized Ophthalmic Diagnostic Imaging, Posterior Segment; Retina	I/OP	224.40	65.88	110.58	67.76	168.30	67.19	16.10	67.76	67.76	213.18	179.52

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139		96411	Chemotherapy Administration, Intravenous, Push Technique, Each Additional Substance/Drug	OP	387.60	113.80	132.49	119.38	290.70	116.05	52.00	81.18	81.18	368.22	310.08
140		82805	Blood Gasses With O2 Saturation	I/OP	504.90	148.24	191.86	78.77	378.68	151.17	41.00	78.77	78.77	479.66	403.92
141		94664	Demonstration And/Or Evaluation Of Patient Utilization Of An Aerosol Generator, Nebulizer, Metered I	I/OP	803.76	235.98	378.64	232.01	602.82	240.65	16.00	232.01	232.01	763.57	643.01
142		94667	Manipulation Chest Wall	I/OP	515.10	151.23	239.97	147.04	386.33	154.22	15.00	147.04	147.04	489.35	412.08
143		94660	Continuous Positive Airway Pressure Ventilation (Cpap)	I/OP	769.08	225.80	378.64	232.01	576.81	230.26	60.00	232.01	232.01	730.63	615.26
144		95816	Electroencephalogram (Eeg)	I/OP	1058.76	310.85	579.70	355.21	794.07	316.99	71.00	355.21	355.21	1005.82	847.01
145		97597	Debridement	I/OP	726.24	213.22	369.91	223.68	544.68	217.44	472.06	226.66	226.66	689.93	580.99
146		90651	Hpv Vaccine	I/OP	1129.08	331.50	429.05	347.76	846.81	338.05	200.63	N/A	N/A	1072.63	903.26
147		96413	Chemotherapy Administration, Intravenous Infusion Technique; Up To 1 Hour	I/OP	1239.30	363.86	617.48	378.36	929.48	371.05	27.00	378.36	378.36	1177.34	991.44
148		92570	Acoustic Immittance Testing	OP	542.64	159.32	291.26	167.13	406.98	162.47	25.00	178.47	178.47	515.51	434.11
149		92133	Scanning Computerized Ophthalmic Diagnostic Imaging, Optic Nerve	OP	224.40	65.88	110.58	69.12	168.30	67.19	16.10	67.76	67.76	213.18	179.52
150		90675	Rabies Vaccine, For Intramuscular Use	I/OP	1592.94	467.69	583.95	319.75	1194.71	476.93	310.08	319.75	319.75	1513.29	1274.35
151		96417	Chemotherapy Administration, Intravenous Infusion Technique	I/OP	252.96	74.27	132.49	81.18	189.72	75.74	27.00	81.18	81.18	240.31	202.37
152		92083	Visual Field Examination	I/OP	432.48	126.98	239.97	133.20	324.36	129.48	281.11	147.04	147.04	410.86	345.98
153		92136	Ophthalmic Biometry	OP	432.48	126.98	239.97	147.04	324.36	129.48	281.11	147.04	147.04	410.86	345.98
154		96401	Chemotherapy Administration, Subcutaneous Or Intramuscular; Non-Hormonal Anti-Neoplastic	I/OP	501.84	147.34	132.49	81.18	376.38	150.25	5.00	81.18	81.18	476.75	401.47
155		96402	Chemotherapy Administration, Subcutaneous Or Intramuscular; Hormonal Anti-Neoplastic	OP	315.18	92.54	132.49	81.18	236.39	94.36	5.00	81.18	81.18	299.42	252.14
156		90734	Meningococcal Conjugate Vaccine	I/OP	288.67	84.75	109.69	88.91	216.50	86.43	119.93	N/A	N/A	274.24	230.94
157		96365	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis; Initial, Up To 1 Hour	I/OP	829.26	243.47	392.22	255.41	621.95	248.28	539.02	240.33	240.33	787.80	663.41
158		90670	Pneumococcal Conjugate Vaccine, T3 Valent (Pcv13), For Intramuscular Use	I/OP	856.98	251.61	325.65	263.95	642.74	256.58	176.11	N/A	N/A	814.13	685.58
159		77336	Continuing Medical Physics Consultation	I/OP	1491.24	437.83	247.17	151.45	1118.43	446.48	21.00	151.45	151.45	1416.68	1192.99
160		92602	Diagnostic Analysis Of Cochlear Implant, Patient Younger Than 7 Yrs Of Age; Subsequent Reprgr	OP	542.64	159.32	291.26	178.47	406.98	162.47	48.00	178.47	178.47	515.51	434.11
161		92025	Computerized Corneal Topography	OP	215.22	63.19	110.58	67.76	161.42	64.44	139.89	67.76	67.76	204.46	172.18
162		93223	Complete Bilateral Noninvasive Physiologic Studies Of Upper Or Lower Extremity Arteries, 3 Or More	I/OP	1025.10	300.97	291.26	178.47	788.83	306.91	140.00	178.47	178.47	973.85	820.08
163		82948	Glucose Test	I/OP	44.73	13.13	17.00	13.78	33.55	13.39	3.00	5.04	5.04	42.49	35.78
164		94150	Vital Capacity, Total (Separate Procedure)	I/OP	577.32	169.50	178.47	432.99	172.85	11.00	178.47	178.47	178.47	548.45	461.86
165		94060	Bronchodilation Responsiveness	I/OP	1043.46	306.36	579.70	355.21	782.60	312.41	49.00	355.21	355.21	991.29	834.77
166		90732	Pneumococcal Polysaccharide Vaccine	I/OP	429.93	126.23	163.37	132.42	322.45	128.72	93.71	133.47	133.47	408.43	343.94
167		92584	Electrocochleography	OP	998.58	293.18	291.26	307.56	748.94	298.97	77.00	178.47	178.47	948.65	798.86
168		92550	Tympanometry And Reflex Threshold Measurements	OP	542.64	159.32	291.26	178.47	406.98	162.47	25.00	178.47	178.47	515.51	434.11
169		92626	Evaluation Of Auditory Function, First Hour	OP	542.64	159.32	291.26	178.47	406.98	162.47	25.00	178.47	178.47	515.51	434.11
170		92579	Visual Reinforcement Audiometry (Vra)	I/OP	937.38	275.21	291.26	178.47	703.04	280.65	65.00	178.47	178.47	890.51	749.90
171		92582	Conditioning Play Audiometry	OP	937.38	275.21	291.26	178.47	703.04	280.65	65.00	178.47	178.47	890.51	749.90
172		90686	Influenza Virus Vaccine	I/OP	71.99	21.14	27.36	22.17	53.99	21.55	23.82	N/A	N/A	68.39	57.59
173		92604	Diagnostic Analysis Of Cochlear Implant, Age 7 Yrs Or Older	OP	542.64	159.32	291.26	178.47	406.98	162.47	48.00	178.47	178.47	515.51	434.11
174		90715	Tetanus, Diphtheria Toxoids And Acellular Pertussis Vaccine (Tdap), 7 Years+	I/OP	348.51	102.32	132.43	39.69	261.38	104.34	45.61	39.69	39.69	331.08	278.81
175		86901	Blood Typing Rhd	I/OP	186.66	54.80	73.06	57.49	140.00	55.89	5.40	2.99	2.99	177.33	149.33
176		93922	Limited Bilateral Noninvasive Physiologic Studies Of Upper Or Lower Extremity Arteries	I/OP	546.72	160.52	239.97	168.39	410.04	163.69	85.00	147.04	147.04	519.38	437.38
177		36415	Routine Venipuncture	I/OP	61.20	17.97	23.26	9.34	45.90	18.32	1.00	9.34	9.34	58.14	48.96
178		92610	Evaluation Of Oral And Pharyngeal Swallowing Function	I/OP	270.30	79.36	102.71	83.25	202.73	80.93	77.00	N/A	N/A	226.79	216.24
179		92522	Evaluation Of Speech Sound Production	I/OP	579.36	170.10	220.16	178.44	434.52	173.46	48.00	N/A	N/A	560.39	463.49
180		93880	Duplex Scan Of Extracranial Arteries; Complete Bilateral Study	I/OP	877.20	257.55	449.99	275.73	657.90	262.63	185.00	275.73	275.73	833.34	701.76
181		97802	Medical Nutrition Therapy	OP	107.10	31.44	40.70	32.99	80.33	32.07	69.62	N/A	N/A	101.75	85.68
182		86703	Antibody; Hiv-1 And Hiv-2, Single Result	I/OP	77.52	22.76	29.46	13.71	58.14	23.21	19.50	13.71	13.71	73.64	62.02
183		93970	Duplex Scan Of Extremity Veins; Complete Bilateral Study	I/OP	872.10	256.05	449.99	275.73	654.08	261.11	185.00	275.73	275.73	828.50	697.68
184		96376	Therapeutic, Prophylactic, Or Diagnostic Injection Sequential Intravenous Push Of The Same Substan	I/OP	223.38	65.58	84.88	68.80	167.54	66.88	145.20	N/A	N/A	212.21	178.70
185		90744	Hepatitis B Vaccine (Hepb), Pediatric/Adolescent Dosage, 3 Dose Schedule	I/OP	84.18	24.72	31.99	25.93	63.14	25.20	29.40	33.20	33.20	79.97	67.34
186		93971	Duplex Scan Of Extremity Veins; Unilateral Or Limited Study	I/OP	397.80	116.79	197.96	121.30	298.35	119.10	130.00	121.30	121.30	377.91	318.24
187		90471	Immunization Administration	I/OP	248.88	73.07	132.49	81.18	186.66	74.51	161.77	81.18	81.18	226.44	189.10
188		90632	Hepatitis A Vaccine (Hepa), Adult Dosage, For Intramuscular Use	I/OP	270.35	79.37	102.73	73.54	202.76	80.94	70.72	73.54	73.54	256.83	216.28
189		99153	Mod Sedation Services Provided By The Same Physician	OP	369.24	108.41	140.31	113.73	276.93	110.55	240.01	N/A	N/A	350.78	295.39
190		93303	Transthoracic Echocardiography	I/OP	2847.84	836.13	1020.73	625.45	2135.88	852.64	160.00	625.45	625.45	2705.45	2278.27
191		73552	X-Ray, Femur, 2 Views	I/OP	369.75	108.56	163.92	100.44	277.31	110.70	19.84	100.44	100.44	351.26	295.80
192		96372	Therapeutic, Prophylactic, Or Diagnostic Injection; Subcutaneous Or Intramuscular	I/OP	195.84	57.50	132.49	60.32	146.88	58.63	127.30	81.18	81.18	186.05	156.67
193		95851	Range Of Motion Measurements And Report	I/OP	118.32	34.74	44.96	36.44	88.74	35.43	76.91	N/A	N/A	112.40	94.66
194		77300	Basic Radiation Dosimetry Calculation	I/OP	672.18	197.35	247.17	151.45	504.14	201.25	43.00	151.45	151.45	638.57	537.74
195		96366	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis, Each Additional Hour	I/OP	264.18	77.56	85.89	52.63	198.14	79.10	171.72	52.63	52.63	250.97	211.34
196		94761	Noninvasive Ear Or Pulse Oximetry For Oxygen Saturation; Multiple Determinations	I/OP	390.66	114.70	148.45	120.32	293.00	116.96	26.00	N/A	N/A	371.13	312.53
197		94640	Inhalation Therapy	I/OP	664.02	194.96	378.64	232.01	498.02	198.81	16.00	232.01	232.01	630.82	531.22
198		77412	Radiation Therapy Delivery	I/OP	931.26	273.42	489.57	299.98	698.45	278.82	135.00	299.98	299.98	884.70	745.01
199		77063	Screening Digital Breast Tomosynthesis, Bilateral	I/OP	541.62	159.02	205.82	166.82	406.22	162.16	6.20	N/A	N/A	514.54	433.30
200		87591	Infectious Agent Detection, Neisseria Gonorrhoeae	I/OP	365.16	107.21	138.76	35.09	273.87	109.33	48.50	35.09	35.09	346.90	292.13
201		97535	Self-Care/Home Management Training	I/OP	215.22	63.19	81.78	66.29	161.42	64.44	15.00	N/A	N/A	204.46	172.18
202		70551	Mri, Brain Without Contrast	I/OP	5737.50	1684.53	449.99	1767.15	4303.13	1717.81	294.50	275.73	275.73	5450.63	4590.00
203		97162	Physical Therapy Evaluation, Complex, 30 Minutes	I/OP	390.66	114.70	148.45	120.32	293.00	116.96	50.00	N/A	N/A	371.13	312.53
204		92507	Therapy Speech And/Or Auditory	I/OP	235.62	69.18	89.54	72.57	176.72	70.54	45.00	N/A	N/A	223.84	188.50
205		92612	Flexible Endoscopic Evaluation Of Swallowing By Cine Or Video Recording	I/OP	977.16	286.89	371.32	300.97	732.87	292.56	300.00	N/A	N/A	932.80	781.73
206		71250	Ct Scan, Thorax Without Contrast	I/OP	1052.64	309.06	197.96	121.30	789.48	315.16	171.74	121.30	121.30	1000.01	842.11
207		76705	Ultrasound Of Abdomen, Limited	I/OP	800.70	235.09	197.96	121.30	600.53	239.73	51.46	121.30	121.30	760.67	640.96

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208		95813	Electroencephalogram (Eeg) Extended Monitoring; 61-119 Minutes	I/OP	835.38	245.27	579.70	355.21	626.54	250.11	125.00	355.21	355.21	793.61	688.30
209		93005	Electrocardiogram	I/OP	221.34	64.99	110.58	67.76	166.01	66.27	30.00	67.76	67.76	210.27	177.07
210		95819	Electroencephalogram (Eeg)	I/OP	1058.76	310.85	579.70	355.21	794.07	316.99	115.00	355.21	355.21	1005.82	847.01
211		94727	Gas Dilution	I/OP	577.32	169.50	291.26	178.47	432.99	172.85	27.00	178.47	178.47	548.45	461.86
212		94760	Noninvasive Ear Or Pulse Oximetry For Oxygen Saturation	I/OP	290.70	85.35	110.47	89.54	218.03	87.04	10.00	N/A	N/A	276.17	232.56
213		94644	Continuous Inhalation Therapy With Aerosol Medication For Acute Airway Obstruction; First Hour	I/OP	476.34	139.85	239.97	146.71	357.26	142.62	5.04	147.04	147.04	452.52	381.07
214		94645	Continuous Inhalation Therapy With Aerosol Medication For Acute Airway Obstruction; Each Additional Hour	I/OP	158.10	46.42	60.08	48.69	118.58	47.34	102.77	N/A	N/A	150.20	126.48
215		94003	Ventilation Assist And Management: Hospital Inpatient/Observation, Each Subsequent Day	I/OP	1018.98	299.17	1230.72	754.12	764.24	305.08	17.33	754.12	754.12	968.03	815.18
216		94002	Ventilation Assist And Management: Hospital Inpatient/Observation, Initial Day	I/OP	2021.64	593.55	1230.72	754.12	1516.23	605.28	17.33	754.12	754.12	1920.56	1617.31
217		94681	Oxygen Uptake, Expired Gas Analysis	I/OP	978.18	287.19	579.70	355.21	733.64	292.87	54.00	355.21	355.21	929.27	782.54
218		94010	Spirometry	I/OP	577.32	169.50	291.26	178.47	432.99	172.85	27.00	178.47	178.47	548.45	461.86
219		93888	Transcranial Doppler Study Of The Intracranial Arteries; Limited Study	I/OP	1308.66	384.22	197.96	121.30	981.50	391.81	140.00	121.30	121.30	1243.23	1046.93
220		77417	Therapeutic Radiology Port Image(S)	I/OP	390.66	114.70	148.45	120.32	293.00	116.96	4.00	N/A	N/A	293.00	312.53
221		94729	Diffusing Capacity	I/OP	390.66	114.70	148.45	120.32	293.00	116.96	30.00	N/A	N/A	371.13	312.53
222		77085	Bone Density Study, Dual-Energy X-Ray Absorptiometry	I/OP	445.74	130.87	197.96	121.30	334.31	133.45	289.73	121.30	121.30	423.45	356.59
223		77334	Therapy Devices, Design And Construction; Complex	I/OP	1501.44	440.82	681.49	417.58	1126.08	449.53	106.00	417.58	417.58	1426.37	1201.15
224		94668	Manipulation Of Chest Wall	I/OP	251.94	73.97	239.97	147.04	188.96	75.43	15.00	147.04	147.04	239.97	201.55
225		87536	Infectious Agent Detection; Hiv-1, Quant	I/OP	381.34	111.96	144.91	117.45	286.01	114.17	117.60	85.10	85.10	362.27	305.07
226		76642	Ultrasound Of Breast	I/OP	443.70	130.27	163.92	100.44	332.78	132.84	42.16	100.44	100.44	421.52	354.96
227		96360	Intravenous Infusion, Hydration; Initial, 31 Minutes To 1 Hour	I/OP	769.08	225.80	392.22	236.88	576.81	230.26	499.90	240.33	240.33	730.63	615.26
228		93458	Catheter Placement In Coronary Artery(S) For Coronary Angiography	I/OP	14690.04	4313.00	5987.74	3668.96	11017.53	4398.20	2000.00	3668.96	3668.96	13955.54	11752.03
229		76770	Ultrasound Of Retroperitoneal, Complete	I/OP	513.06	150.63	197.96	121.30	384.80	153.61	68.82	121.30	121.30	487.41	410.45
230		93975	Vascular Study	I/OP	945.54	277.61	449.99	275.73	709.16	283.09	225.00	275.73	275.73	898.26	756.43
231		76536	Ultrasound Of Head And Neck	I/OP	652.80	191.66	197.96	121.30	489.60	195.45	50.84	121.30	121.30	620.16	522.24
232		76775	Ultrasound Of Retroperitoneal, Limited	I/OP	897.60	263.54	197.96	121.30	673.20	268.74	51.46	121.30	121.30	852.72	718.08
233		74018	X-Ray, Abdomen	I/OP	344.25	101.07	163.92	106.03	258.19	103.07	223.76	100.44	100.44	275.40	225.40
234		86900	Blood Typing Abo	I/OP	263.16	77.26	239.97	2.99	197.37	78.79	4.80	2.99	2.99	250.00	210.53
235		87186	Susceptibility Studies, Antimicrobial Agent	I/OP	2762.16	810.97	1049.62	8.65	2071.62	826.99	13.50	8.65	8.65	2624.05	2209.73
236		96375	Therapeutic, Prophylactic, Or Diagnostic Injection; Sequential Intravenous Push Of A New Substance/	I/OP	199.92	58.70	85.89	52.63	149.94	59.86	129.95	52.63	52.63	189.92	159.94
237		86923	Compatibility Test Each Unit, Electronic	I/OP	478.38	140.45	319.01	195.47	358.79	143.23	20.00	195.47	195.47	454.46	382.70
238		86920	Compatibility Test Each Unit, Immediate Spin Technique	I/OP	460.02	135.06	319.01	195.47	345.02	137.73	20.00	195.47	195.47	437.02	368.02
239		99152	Mod Sedation Services Provided By The Same Physician	OP	304.98	89.54	115.89	93.93	228.74	91.31	198.24	N/A	N/A	289.73	243.98
240		97161	Physical Therapy Evaluation: Low Complexity 20 Minutes	I/OP	215.22	63.19	81.78	66.29	161.42	64.44	40.00	N/A	N/A	204.46	172.18
241		71046	C-Reactive Protein;	I/OP	328.44	96.43	163.92	100.44	246.33	98.33	213.49	100.44	100.44	312.02	262.75
242		87040	Culture, Bacterial, Blood	I/OP	93.84	27.55	35.66	28.90	70.38	28.10	16.10	10.32	10.32	89.15	75.07
243		97165	Occupational Therapy Evaluation, Low Complexity, 30 Minutes	I/OP	215.22	63.19	81.78	66.29	161.42	64.44	40.00	N/A	N/A	204.46	172.18
244		97166	Occupational Therapy Evaluation, Mod Complexity 45 Minutes	I/OP	433.50	127.28	164.73	133.52	325.13	129.79	50.00	N/A	N/A	411.83	346.80
245		73502	X-Ray, Hip, 2-3 Views	I/OP	354.45	104.07	163.92	109.17	265.84	106.12	19.84	100.44	100.44	336.73	283.56
246		86850	Antibody Screen, Rbc, Each Serum Technique	I/OP	216.24	63.49	99.47	9.77	162.18	64.74	7.80	9.77	9.77	205.43	172.99
247		72040	X-Ray, Neck, Spine, 2-3 Views	I/OP	336.69	98.85	163.92	103.70	252.52	100.80	21.08	100.44	100.44	319.86	269.35
248		80307	Drug Tests	I/OP	1299.48	381.53	493.80	62.14	974.61	389.06	33.85	62.14	62.14	1234.51	1039.58
249		83690	Blood Test, Lipase	I/OP	84.66	24.86	32.17	6.89	63.50	25.35	10.80	6.89	6.89	80.43	67.73
250		82550	Blood Test, Creatine Kinase (Ck)	I/OP	49.98	14.67	18.99	6.51	37.49	14.96	1.70	6.51	6.51	47.48	39.98
251		93306	Echocardiography, With Doppler	I/OP	1989.00	583.97	1020.73	625.45	1491.75	595.51	265.00	625.45	625.45	1899.55	1591.20
252		97018	Application Of A Modality To 1 Or More Areas; Paraffin Bath	OP	118.32	34.74	44.96	36.44	88.74	35.43	18.00	N/A	N/A	112.40	94.66
253		77002	X-Ray, Guidance Of Needle Placement	I/OP	1144.95	336.16	435.08	352.64	858.71	342.80	744.22	N/A	N/A	1087.70	915.96
254		96361	Intravenous Infusion, Hydration; Each Additional Hour	I/OP	221.34	64.99	85.89	68.17	166.01	66.27	143.87	52.63	52.63	210.27	177.07
255		71045	X-Ray, Chest, 1 View	I/OP	341.70	100.32	163.92	100.44	256.28	102.30	222.11	100.44	100.44	324.62	273.36
256		92526	Therapy Swallowing Dysfunction And/Or Oral Function For Feeding	I/OP	204.00	59.89	77.52	62.83	153.00	61.08	36.00	N/A	N/A	193.80	163.20
257		97129	Therapeutic Interventions, 15 Minutes	I/OP	193.80	56.90	73.64	59.69	145.35	58.02	125.97	N/A	N/A	184.11	155.04
258		82248	Bilirubin, Direct	I/OP	76.50	22.46	29.07	5.02	57.38	22.90	6.90	5.02	5.02	72.68	61.20
259		86706	Hepatitis B Surface Antibody	I/OP	98.94	29.05	37.60	10.74	74.21	29.62	14.80	10.74	10.74	93.99	79.15
260		83036	Hemoglobin; Glycosylated (A1C)	I/OP	115.26	33.84	43.80	9.71	86.45	34.51	14.80	9.71	9.71	109.50	92.21
261		97164	Re-Evaluation Of Physical Therapy Established Plan Of Care	I/OP	215.22	63.19	81.78	66.29	161.42	64.44	25.00	N/A	N/A	204.46	172.18
262		97150	Therapeutic Procedure, Group	I/OP	215.22	63.19	81.78	66.29	161.42	64.44	8.00	N/A	N/A	204.46	172.18
263		97112	Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes	I/OP	215.22	63.19	81.78	66.29	161.42	64.44	18.00	N/A	N/A	204.46	172.18
264		97760	Orthotic(S) Management And Training	I/OP	165.24	48.51	62.79	50.89	123.93	49.47	107.41	N/A	N/A	156.98	132.19
265		93454	Catheter Placement In Coronary Artery(S) For Coronary Angiography	I/OP	14690.04	4313.00	5987.74	3668.96	11017.53	4398.20	2000.00	3668.96	3668.96	13955.54	11752.03
266		84702	Gonadotropin, Chorionic (Hcg); Quantitative	I/OP	156.06	45.82	59.30	15.05	117.05	46.72	19.00	15.05	15.05	148.26	124.85
267		97163	Physical Therapy Evaluation: High Complexity	I/OP	765.00	224.60	290.70	235.62	573.75	229.04	60.00	N/A	N/A	726.75	612.00
268		97530	Therapeutic Activities	I/OP	215.22	63.19	81.78	66.29	161.42	64.44	17.00	N/A	N/A	204.46	172.18
269		97168	Re-Evaluation Of Occupational Therapy Established Plan Of Care	I/OP	215.22	63.19	81.78	66.29	161.42	64.44	25.00	N/A	N/A	204.46	172.18
270		87086	Culture, Bacterial, Urine	I/OP	135.66	39.83	51.55	8.07	101.75	40.62	13.00	8.07	8.07	128.88	108.53
271		87150	Culture Typing, Dna/Rna Probe	I/OP	2950.86	866.37	1121.33	35.09	2213.15	883.49	30.56	35.09	35.09	2803.32	2360.69
272		72070	X-Ray, Thoracic Spine, 2 Views	I/OP	407.35	119.60	197.96	121.30	305.51	121.96	22.32	121.30	121.30	386.98	325.88
273		93798	Cardiac Rehabilitation With Ecg Monitor	I/OP	416.16	122.18	234.40	143.63	312.12	124.60	270.50	143.63	143.63	395.35	332.93
274		73564	X-Ray, Knee, 4 Or More Views	I/OP	436.56	128.17	197.96	121.30	327.42	130.71	21.70	121.30	121.30	414.73	349.25
275		93350	Echocardiography, Transthoracic	I/OP	2694.84	791.21	1020.73	625.45	2021.13	806.84	150.00	625.45	625.45	2590.10	2155.87
276		97116	Therapeutic Procedure, Gait Training	I/OP	319.26	93.73	121.32	98.33	239.45	95.59	15.00	N/A	N/A	303.30	255.41

Notes:
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Shoppable ID	NIA Indicator	Billing Code	Description	Location Provided	Gross Charge	Aetna Health Plan: Better Health	Aetna Health Plan: Commercial	Aetna Health Plan: Medicare	Devon Health Services (FKA Americare)	WellPoint	Amerihealth: HMO and PPO	Amerihealth: Medicare	Clover Health: Medicare HMO/PPO	Consumer Health Network: PPO	Correctional Medical Services, In.
277		92523	Evaluation Of Speech Sound Production	I/OP	579.36	170.10	220.16	178.44	434.52	173.46	48.00	N/A	N/A	550.39	463.49
278		83540	Blood Test, Iron	I/OP	742.56	218.02	282.17	6.47	556.92	222.32	10.10	6.47	6.47	705.43	594.05
279		84439	Blood Test, Free T4	I/OP	377.40	110.80	143.41	116.24	283.05	112.99	13.70	9.02	9.02	358.53	301.92
280		82728	Blood Test, Ferritin	I/OP	581.40	170.70	220.93	13.63	436.05	174.07	21.30	13.63	13.63	552.33	465.12
281		93308	Echocardiography, Transthoracic, Follow-Up Or Limited Study	I/OP	1477.98	433.93	449.99	275.73	1108.49	442.51	75.00	275.73	275.73	1404.08	1182.38
282		86592	Syphilis Test	I/OP	95.88	28.15	36.43	4.27	71.91	28.71	6.70	4.27	4.27	91.09	76.70
283		83605	Blood Test, Lactic Acid	I/OP	956.76	280.90	363.57	11.57	717.57	286.45	16.50	11.57	11.57	908.92	765.41
284		84100	Blood Test, Phosphorus	I/OP	86.70	25.46	32.95	26.70	65.03	25.96	1.70	4.74	4.74	82.37	69.36
285		93017	Cardiovascular Stress Test	I/OP	1171.98	344.09	579.70	355.21	878.99	350.89	150.00	355.21	355.21	1113.38	937.58
286		76856	Ultrasound Of Pelvis	I/OP	627.30	184.18	197.96	121.30	470.48	187.81	57.66	121.30	121.30	595.94	501.84
287		70496	Ct Scan, Head Or Brain	I/OP	1725.84	506.71	331.41	203.07	1294.38	516.72	220.10	203.07	203.07	1639.55	1380.67
288		74170	Ct Scan, Abdomen With And Without Contrast	I/OP	4702.20	1380.57	331.41	203.07	3526.65	1407.84	238.08	203.07	203.07	4467.09	3761.76
289		70486	Ct Scan, Maxillofacial Without Contrast	I/OP	1183.20	347.39	197.96	121.30	887.40	354.25	144.46	121.30	121.30	1124.04	946.56
290		71260	Ct Scan, Thorax With Contrast	I/OP	1623.84	476.76	331.41	500.14	1217.88	486.18	200.88	203.07	203.07	1542.65	1299.07
291		88341	Immunohistochemistry Or Immunocytochemistry, Per Specimen	I/OP	489.60	143.75	186.05	150.80	367.20	146.59	318.24	N/A	N/A	465.12	391.68
292		87077	Culture, Bacterial; Aerobic Isolate	I/OP	80.58	23.66	30.62	8.08	60.44	24.13	8.90	8.08	8.08	76.55	64.46
293		76937	Ultrasound Guided Vascular Access	I/OP	604.86	177.59	229.85	186.30	453.65	181.10	393.16	N/A	N/A	574.62	483.89
294		77001	Fluoroscopic Guidance For Vein Dvc	I/OP	492.66	144.64	187.21	151.74	369.50	147.50	320.23	N/A	N/A	468.03	394.13
295		83615	Lactate Dehydrogenase (Ld), (Ldh)	I/OP	82.62	24.26	31.40	6.04	61.97	24.74	1.70	6.04	6.04	78.49	66.10
296		85652	Sedimentation Rate, Erythrocyte, Automated	I/OP	62.22	18.27	23.64	2.70	46.67	18.63	3.70	2.70	2.70	59.11	49.78
297		82306	Gonadotropin, Chorionic (Hcg); Quantitative	I/OP	572.22	168.00	217.44	176.24	429.17	171.32	44.90	29.60	29.60	543.61	457.78
298		86803	Hepatitis C Antibody	I/OP	364.14	106.91	138.37	14.27	273.11	109.02	19.70	14.27	14.27	345.93	291.31
299		80202	Blood Test, Vancomycin	I/OP	192.78	56.60	73.26	13.54	144.59	57.72	19.00	13.54	13.54	183.14	154.22
300		86704	Hepatitis B Core Antibody (Hbcab); Total	I/OP	123.42	36.24	46.90	12.05	92.57	36.95	16.70	12.05	12.05	117.25	98.74
301		84484	Blood Test, Troponin	I/OP	195.84	57.50	74.42	12.47	146.88	58.63	12.00	12.47	12.47	186.05	156.67
302		84145	Procalcitonin (Pct)	I/OP	1095.48	321.63	416.28	27.22	821.61	327.99	16.88	27.22	27.22	1040.71	876.38
303		86140	C-Reactive Protein	I/OP	62.22	18.27	23.64	5.18	46.67	18.63	8.10	5.18	5.18	59.11	49.78
304		87340	Infectious Agent Antigen Detection, Hep B	I/OP	97.92	28.75	37.21	10.33	73.44	29.32	14.30	10.33	10.33	93.02	78.34

University Hospital
 Shoppable Services
 Filename: 221775306_UniversityHospital_ShoppableServices.pdf
 Updated 3/10/2026, using 1/6/2026 CDM

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Shoppable ID	N/A Indicator	Billing Code	Description	Location Provided	Gross Charge	Coverity Health Care (FKA CCN and FirstHealth)
1		85027	Complete Blood Count, Automated	IP/OP	34.68	24.28
2		80053	Blood Test, Comprehensive Group Of Blood Chemicals	IP/OP	205.02	143.51
3		80061	Blood Test, Lipids (Cholesterol And Triglycerides)	IP/OP	77.52	54.26
4		84153	Psa (Prostate Specific Antigen)	IP/OP	228.48	159.94
5		80076	Liver Function Blood Test Panel	IP/OP	72.42	50.69
6		70450	Ct Scan, Head Or Brain, Without Contrast	IP/OP	2535.72	1775.00
7		74177	Ct Scan Of Abdomen And Pelvis With Contrast	IP/OP	1623.84	1136.69
8		81001	Manual Urinalysis Test With Examination Using Microscope	IP/OP	38.76	27.13
9		76830	Ultrasound Pelvis Through Vagina	IP/OP	626.03	438.22
10		62323	Injection Of Substance Into Spinal Canal Of Lower Back Or Sacrum Using Imaging Guidance	IP/OP	3127.58	2189.31
11		85610	Blood Test, Clotting Time	IP/OP	15.30	10.71
12		85730	Coagulation Assessment Blood Test	IP/OP	20.40	14.28
13		80048	Basic Metabolic Panel	IP/OP	162.18	113.53
14		72193	Ct Scan, Pelvis, With Contrast	IP/OP	1755.42	1228.79
15		93452	Insertion Of Catheter Into Left Heart For Diagnosis	OP	14690.04	10283.03
16		76700	Ultrasound Of Abdomen	IP/OP	1105.68	773.98
17		73721	Mri Scan Of Leg Joint	IP/OP	1879.86	1315.90
18		59400	Routine Obstetric Care For Vaginal Delivery, Including Pre-And Post-Delivery Care	IP/OP	8470.08	5929.06
19		77067	Mammography, Screening, Bilateral	IP/OP	541.62	379.13
20		43239	Biopsy Of The Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope	IP/OP	3269.10	2288.37
21		43235	Diagnostic Examination Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope	IP/OP	3269.10	2288.37
22		72110	X-Ray, Lower Back, Minimum Four Views	IP/OP	403.92	282.74
23		64483	Injections Of Anesthetic And/Or Steroid Drug Into Lower Or Sacral Spine Nerve Root Using Imaging Guidance	IP/OP	3169.12	2217.68
24		45385	Removal Of Polyps Or Growths Of Large Bowel Using An Endoscope	IP/OP	2984.52	2089.16
25		77066	Mammography Of Both Breasts	IP/OP	541.62	379.13
26		45380	Biopsy Of Large Bowel Using An Endoscope	OP	2984.52	2089.16
27		49505	Repair Of Groin Hernia Patient Age 5 Years Or Older	OP	8993.34	6295.34
28		97110	Physical Therapy, Therapeutic Exercise	IP/OP	165.24	115.67
29		70553	Mri Scan Of Brain Before And After Contrast	IP/OP	10027.62	7019.33
30		81002	Automated Urinalysis Test	IP/OP	23.46	16.42
31		66821	Removal Of Recurring Cataract In Lens Capsule Using Laser	OP	1973.70	1381.59
32		72148	Mri Scan Of Lower Spinal Canal	IP/OP	1446.36	1012.45
33		90832	Psychotherapy, 30 Min	OP	542.64	379.85
34		55700	Biopsy Of Prostate Gland	OP	8650.88	6055.62
35		45391	Ultrasound Examination Of Lower Large Bowel Using An Endoscope	OP	4146.30	2902.41
36		77065	Mammography Of One Breast	IP/OP	541.62	379.13
37		19120	Removal Of 1 Or More Breast Growth, Open Procedure	OP	12774.48	8942.14
38		90834	Psychotherapy, 45 Min	OP	542.64	379.85
39		90837	Psychotherapy, 60 Min	OP	542.64	379.85
40		85025	Complete Blood Cell Count, With Differential White Blood Cells, Automated	IP/OP	44.88	31.42
41		84443	Blood Test, Thyroid Stimulating Hormone (Tsh)	IP/OP	637.50	446.25
42		90853	Group Psychotherapy	OP	284.58	199.21
43		45378	Diagnostic Examination Of Large Bowel Using An Endoscope	IP/OP	2984.52	2089.16
44		90846	Family Psychotherapy, Not Including Patient, 50 Min	OP	472.59	330.81
45		90847	Family Psychotherapy, Including Patient, 50 Min	OP	472.59	330.81
46		99203	New Patient Office Or Other Outpatient Visit, Typically 30 Min	OP	306.00	214.20
47		99204	New Patient Office Or Other Outpatient Visit, Typically 45 Min	OP	469.20	328.44
48		99205	New Patient Office Or Other Outpatient Visit, Typically 60 Min	OP	581.40	406.98
49		99243	Patient Office Consultation, Typically 40 Min	OP	346.80	242.76
50		42820	Removal Of Tonsils And Adenoid Glands Patient Younger Than Age 12	OP	17358.48	12150.94
51		47562	Removal Of Gallbladder Using An Endoscope	OP	17103.00	11972.10
52		55866	Surgical Removal Of Prostate And Surrounding Lymph Nodes Using An Endoscope	OP	30511.94	21358.36
53		59510	Routine Obstetric Care For Cesarean Delivery, Including Pre-And Post-Delivery Care	IP/OP	3020.12	2114.08
54		59610	Routine Obstetric Care For Vaginal Delivery After Prior Cesarean Delivery Including Pre-And Post-Del	IP/OP	9263.64	6484.55
55		66984	Removal Of Cataract With Insertion Of Lens	OP	6907.51	4835.26
56	N/A	DRG - 460	Spinal Fusion Except Cervical Without Major Comorbid Conditions Or Complications (Mcc)	IP	N/A	N/A
57		DRG - 470	Major Joint Replacement Or Reattachment Of Lower Extremity Without Major Comorbid Conditions Or	IP	N/A	N/A
58		DRG - 473	Cervical Spinal Fusion Without Comorbid Conditions (Cc) Or Major Comorbid Conditions Or Complica	IP	N/A	N/A
59		DRG - 743	Uterine And Adnexa Procedures For Non-Malignancy Without Comorbid Conditions (Cc) Or Major Coi IP	IP	N/A	N/A
60		29826	Shaving Of Shoulder Bone Using An Endoscope	OP	189.19	132.43
61		29881	Removal Of One Knee Cartilage Using An Endoscope	OP	9594.42	6716.09
62		99244	Patient Office Consultation, Typically 60 Min	OP	520.20	364.14
63		99385	Initial New Patient Preventive Medicine Evaluation (18-39 Years)	OP	377.40	264.18
64		99386	Initial New Patient Preventive Medicine Evaluation (40-64 Years)	OP	428.40	299.88
65	N/A	80055	Obstetric Blood Test Panel	OP	N/A	N/A
66	N/A	80069	Kidney Function Panel Test	OP	N/A	N/A
67	N/A	DRG - 216	Cardiac Valve And Other Major Cardiothoracic Procedures With Cardiac Catheterization With Major C	IP	N/A	N/A
68		93000	Electrocardiogram, Routine, With Interpretation And Report	OP	16.39	11.47
69		95810	Sleep Study	OP	3099.12	2169.38

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70		76805	Abdominal Ultrasound Of Pregnant Uterus (Greater Or Equal To 14 Weeks 0 Days) Single Or First Fe	IP/OP	487.76	348.43
71		86480	Tuberculosis Test	IP/OP	562.02	393.41
72		83735	Blood Test, Magnesium	IP/OP	130.56	91.39
73		DRG - 115	Extraocular Procedures Except Orbit	IP	N/A	N/A
74		DRG - 117	Intraocular Procedures Without Complications	IP	N/A	N/A
75		DRG - 788	Cesarean Section Without Sterilization Without Complications	IP	N/A	N/A
76		DRG - 906	Hand Procedures For Injuries	IP	N/A	N/A
77		DRG - 482	Hip And Femur Procedures Except Major Joint Without Complications	IP	N/A	N/A
78		DRG - 494	Lower Extremity And Humerus Procedures Except Hip, Foot And Femur Without Complications	IP	N/A	N/A
79		DRG - 502	Soft Tissue Procedures Without Complications	IP	N/A	N/A
80		DRG - 505	Foot Procedures W/O Co/Mcc	IP	N/A	N/A
81		DRG - 512	Shoulder, Elbow Or Forearm Procedures, Except Major Joint Procedures Without Complications	IP	N/A	N/A
82		DRG - 660	Kidney And Ureter Procedures For Non-Neoplasm With Complications	IP	N/A	N/A
83		DRG - 142	Major Head And Neck Procedures Without Complications	IP	N/A	N/A
84		DRG - 250	Percutaneous Cardiovascular Procedures With Coronary Artery Stent	IP	N/A	N/A
85		DRG - 329	Major Small And Large Bowel Procedures With Major Comp	IP	N/A	N/A
86		DRG - 355	Hernia Procedures Except Inguinal And Femoral Without Complications	IP	N/A	N/A
87		DRG - 419	Laparoscopic Cholecystectomy Without C.D.E. Without Complications	IP	N/A	N/A
88		DRG - 479	Biopsies Of Musculoskeletal System And Connective Tissue Without Complications	IP	N/A	N/A
89		DRG - 448	Multiple Level Spinal Fusion Except Cervical Without Mcc	IP	N/A	N/A
90		DRG - 451	Single Level Spinal Fusion Except Cervical Without Mcc	IP	N/A	N/A
91		72131	Ct Scan, Lumbar Spine	IP/OP	734.40	514.08
92		87491	Infectious Agent Detection, Chlamydia Trachomatis	IP/OP	365.16	255.51
93		73700	Ct Scan, Lower Extremities	IP/OP	1819.68	1273.78
94		73630	X-Ray, Foot	IP/OP	831.30	581.91
95		73560	X-Ray, Knee	IP/OP	803.25	562.28
96		72190	X-Ray, Pelvis, 3 Views	IP/OP	407.35	285.15
97		92557	Comprehensive Audiometry Threshold Evaluation And Speech Recognition	IP/OP	542.64	379.85
98		76512	Ophthalmic Ultrasound, Diagnostic, B-Scan With And Without Quant. A	IP/OP	402.90	282.03
99		70355	X-Ray, Jaws, Panoramic	IP/OP	325.38	227.77
100		96415	Chemotherapy Administration, Intravenous Infusion Technique	IP/OP	252.96	177.07
101		96367	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis; Additional Sequential Infusion Of A Nev	IP/OP	252.96	177.07
102		70498	Ct Scan, Neck	IP/OP	1693.20	1185.24
103		76376	3D Rendering With Interpretation And Post Process Supervision	IP/OP	287.64	201.35
104		92567	Tympanometry	OP	416.16	291.31
105		92235	Fluorescein Angiography	OP	1043.46	730.42
106		76815	Abdominal Ultrasound Of Pregnant Uterus	IP/OP	545.70	381.99
107		96368	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis; Concurrent Infusion	IP/OP	155.04	108.53
108		90472	Immunization Administration	IP/OP	174.42	122.09
109		92603	Diagnostic Analysis Of Cochlear Implant, Age 7 Years Or Older; With Programming	OP	542.64	379.85
110		92250	Fundus Photography With Interpretation And Report	OP	432.48	302.74
111		96523	Irrigation Of Implanted Venous Access Device	IP/OP	215.22	150.65
112		90746	Hepatitis B Vaccine (Hepb), Adult Dosage, 3 Dose Schedule, For Intramuscular Use	IP/OP	254.71	178.30
113		89051	Cell Count, Miscellaneous Body Fluids	IP/OP	103.02	72.11
114		73590	X-Ray, Lower Leg	IP/OP	773.93	541.75
115		72170	X-Ray, Pelvis, 1-2 Views	IP/OP	407.35	285.15
116		73070	X-Ray, Elbow	IP/OP	770.10	539.07
117		72125	Ct Scan, Neck, Spine Without Contrast	IP/OP	1343.34	940.34
118		73030	X-Ray, Shoulder	IP/OP	761.18	532.83
119		73060	X-Ray, Humerus	IP/OP	771.38	539.97
120		72100	X-Ray, Lumbar Spine, 2-3 Views	IP/OP	592.88	415.02
121		73120	Hepatitis B Surface Antibody (Hbsab)	IP/OP	655.35	458.75
122		73610	X-Ray, Ankle	IP/OP	300.90	210.63
123		73110	X-Ray, Wrist	IP/OP	465.38	325.77
124		73090	X-Ray, Forearm	IP/OP	770.10	539.07
125		93312	Echocardiography, Transesophageal	IP/OP	2769.30	1938.51
126		97140	Manual Therapy Techniques, 1 Or More Regions, Each 15 Minutes	IP/OP	215.22	150.65
127		92611	Motion Fluoroscopic Evaluation Of Swallowing Function By Cine Or Video Recording	IP/OP	1018.98	713.29
128		73562	X-Ray, Knee, 3 Views	IP/OP	323.85	226.70
129		96374	Therapeutic, Prophylactic, Or Diagnostic Injection; Intravenous Push, Single Or Initial Substance/Drug	IP/OP	765.00	535.50
130		92950	Cardiopulmonary Resuscitation	IP/OP	1402.50	981.75
131		77386	Intensity Modulated Radiation Therapy Delivery Complex	IP/OP	2433.72	1703.60
132		93990	Duplex Scan Of Hemodialysis Access	IP/OP	397.80	278.46
133		93926	Duplex Scan Of Lower Extremity Arteries Or Arterial Bypass Grafts; Unilateral Or Limited Study	IP/OP	397.80	278.46
134		84703	Blood Test, Human Chorionic Gonadotropin (Hog)	IP/OP	179.52	125.66
135		93978	Duplex Scan Of Aorta, Inferior Vena Cava, Iliac Vasculature, Or Bypass Grafts; Complete Study	IP/OP	915.96	641.17
136		93925	Duplex Scan Of Lower Extremity Arteries Or Arterial Bypass Grafts; Complete Bilateral Study	IP/OP	870.06	609.04
137		92587	Distortion Product Evoked Otoacoustic Emissions	IP/OP	1044.48	731.14
138		92134	Scanning Computerized Ophthalmic Diagnostic Imaging, Posterior Segment; Retina	IP/OP	224.40	157.08

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139		96411	Chemotherapy Administration; Intravenous, Push Technique, Each Additional Substance/Drug	OP	387.60	271.32
140		82805	Blood Gasses With O2 Saturation	IP/OP	504.90	353.43
141		94664	Demonstration And/Or Evaluation Of Patient Utilization Of An Aerosol Generator, Nebulizer, Metered	IP/OP	803.76	562.63
142		94667	Manipulation Chest Wall	IP/OP	515.10	360.57
143		94660	Continuous Positive Airway Pressure Ventilation (Cpap)	IP/OP	769.08	538.36
144		95816	Electroencephalogram (Eeg)	IP/OP	1058.76	741.13
145		97597	Debridement	IP/OP	726.24	508.37
146		90651	Hpv Vaccine	IP/OP	1129.08	790.36
147		96413	Chemotherapy Administration, Intravenous Infusion Technique; Up To 1 Hour	IP/OP	1239.30	867.51
148		92570	Acoustic Immittance Testing	OP	542.64	379.85
149		92133	Scanning Computerized Ophthalmic Diagnostic Imaging, Optic Nerve	OP	224.40	157.08
150		90675	Rabies Vaccine, For Intramuscular Use	IP/OP	1592.94	1115.06
151		96417	Chemotherapy Administration, Intravenous Infusion Technique	IP/OP	252.96	177.07
152		92083	Visual Field Examination	IP/OP	432.48	302.74
153		92136	Ophthalmic Biometry	OP	432.48	302.74
154		96401	Chemotherapy Administration, Subcutaneous Or Intramuscular; Non-Hormonal Anti-Neoplastic	IP/OP	501.84	351.29
155		96402	Chemotherapy Administration, Subcutaneous Or Intramuscular; Hormonal Anti-Neoplastic	OP	315.18	220.63
156		90734	Meningococcal Conjugate Vaccine	IP/OP	288.67	202.07
157		96365	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis; Initial, Up To 1 Hour	IP/OP	829.26	580.48
158		90670	Pneumococcal Conjugate Vaccine, 13 Valent (Pcv13), For Intramuscular Use	IP/OP	856.98	599.89
159		77336	Continuing Medical Physics Consultation	IP/OP	1491.24	1043.87
160		92602	Diagnostic Analysis Of Cochlear Implant, Patient Younger Than 7 Yrs Of Age; Subsequent Reprogram	OP	542.64	379.85
161		92625	Computerized Corneal Topography	OP	215.22	150.65
162		93923	Complete Bilateral Noninvasive Physiologic Studies Of Upper Or Lower Extremity Arteries, 3 Or More	IP/OP	1025.10	717.57
163		82948	Glucose Test	IP/OP	44.73	31.31
164		94150	Vital Capacity, Total (Separate Procedure)	IP/OP	577.32	404.12
165		94060	Bronchodilation Responsiveness	IP/OP	1043.46	730.42
166		90732	Pneumococcal Polysaccharide Vaccine	IP/OP	429.93	300.95
167		92584	Electrocochleography	OP	998.58	699.01
168		92550	Tympanometry And Reflex Threshold Measurements	OP	542.64	379.85
169		92626	Evaluation Of Auditory Function, First Hour	OP	542.64	379.85
170		92579	Visual Reinforcement Audiometry (Vra)	IP/OP	937.38	656.17
171		92582	Conditioning Play Audiometry	OP	937.38	656.17
172		90686	Influenza Virus Vaccine	IP/OP	71.99	50.39
173		92604	Diagnostic Analysis Of Cochlear Implant, Age 7 Yrs Or Older	OP	542.64	379.85
174		90715	Tetanus, Diphtheria Toxoids And Acellular Pertussis Vaccine (Tdap), 7 Years+	IP/OP	348.51	243.96
175		86901	Blood Typing Rhd	IP/OP	186.66	130.66
176		93922	Limited Bilateral Noninvasive Physiologic Studies Of Upper Or Lower Extremity Arteries	IP/OP	546.72	382.70
177		36415	Routine Venipuncture	IP/OP	61.20	42.84
178		92610	Evaluation Of Oral And Pharyngeal Swallowing Function	IP/OP	270.30	189.21
179		92522	Evaluation Of Speech Sound Production	IP/OP	579.36	406.55
180		93880	Duplex Scan Of Extracranial Arteries; Complete Bilateral Study	IP/OP	877.20	614.04
181		97802	Medical Nutrition Therapy	OP	107.10	74.97
182		86703	Antibody; Hiv-1 And Hiv-2, Single Result	IP/OP	77.52	54.26
183		93970	Duplex Scan Of Extremity Veins; Complete Bilateral Study	IP/OP	872.10	610.47
184		96376	Therapeutic, Prophylactic, Or Diagnostic Injection Sequential Intravenous Push Of The Same Substan	IP/OP	223.38	156.37
185		90744	Hepatitis B Vaccine (Hepb), Pediatric/Adolescent Dosage, 3 Dose Schedule	IP/OP	84.18	58.93
186		93971	Duplex Scan Of Extremity Veins, Unilateral Or Limited Study	IP/OP	397.80	278.46
187		90471	Immunization Administration	IP/OP	248.88	174.22
188		90632	Hepatitis A Vaccine (Hepaa), Adult Dosage, For Intramuscular Use	IP/OP	270.35	189.25
189		99153	Mod Sedation Services Provided By The Same Physician	OP	369.24	258.47
190		93303	Transthoracic Echocardiography	IP/OP	2847.84	1993.49
191		73552	X-Ray, Femur, 2 Views	IP/OP	369.75	258.83
192		96372	Therapeutic, Prophylactic, Or Diagnostic Injection; Subcutaneous Or Intramuscular	IP/OP	195.84	137.09
193		95851	Range Of Motion Measurements And Report	IP/OP	118.32	82.82
194		77300	Basic Radiation Dosimetry Calculation	IP/OP	672.18	470.53
195		96366	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis, Each Additional Hour	IP/OP	264.18	184.93
196		94761	Noninvasive Ear Or Pulse Oximetry For Oxygen Saturation; Multiple Determinations	IP/OP	390.66	273.46
197		94640	Inhalation Therapy	IP/OP	664.02	464.81
198		77412	Radiation Therapy Delivery	IP/OP	931.26	651.88
199		77063	Screening Digital Breast Tomosynthesis, Bilateral	IP/OP	541.62	379.13
200		87591	Infectious Agent Detection, Neisseria Gonorrhoeae	IP/OP	365.16	255.61
201		97535	Self-Care/Home Management Training	IP/OP	215.22	150.65
202		70551	Mri, Brain Without Contrast	IP/OP	5737.50	4016.25
203		97162	Physical Therapy Evaluation, Complex, 30 Minutes	IP/OP	390.66	273.46
204		92507	Therapy Speech And/Or Auditory	IP/OP	235.62	164.93
205		92612	Flexible Endoscopic Evaluation Of Swallowing By Cine Or Video Recording	IP/OP	977.16	684.01
206		71250	Ct Scan, Thorax Without Contrast	IP/OP	1052.64	736.85
207		76705	Ultrasound Of Abdomen, Limited	IP/OP	800.70	560.49

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208		95813	Electroencephalogram (Eeg) Extended Monitoring; 61-119 Minutes	IP/OP	835.38	584.77
209		93005	Electrocardiogram	IP/OP	221.34	154.94
210		95819	Electroencephalogram (Eeg)	IP/OP	1058.76	741.13
211		94727	Gas Dilution	IP/OP	577.32	404.12
212		94760	Noninvasive Ear Or Pulse Oximetry For Oxygen Saturation	IP/OP	290.70	203.49
213		94644	Continuous Inhalation Therapy With Aerosol Medication For Acute Airway Obstruction; First Hour	IP/OP	476.34	333.44
214		94645	Continuous Inhalation Therapy With Aerosol Medication For Acute Airway Obstruction; Each Additional Hour	IP/OP	158.10	110.67
215		94003	Ventilation Assist And Management; Hospital Inpatient/Observation, Each Subsequent Day	IP/OP	1018.98	713.29
216		94002	Ventilation Assist And Management; Hospital Inpatient/Observation, Initial Day	IP/OP	2021.64	1415.15
217		94681	Oxygen Uptake, Expired Gas Analysis	IP/OP	978.18	684.73
218		94010	Spirometry	IP/OP	577.32	404.12
219		93888	Transcranial Doppler Study Of The Intracranial Arteries; Limited Study	IP/OP	1308.66	916.06
220		77417	Therapeutic Radiology Port Image(S)	IP/OP	390.66	273.46
221		94729	Diffusing Capacity	IP/OP	390.66	273.46
222		77085	Bone Density Study, Dual-Energy X-Ray Absorptiometry	IP/OP	445.74	312.02
223		77334	Therapy Devices, Design And Construction; Complex	IP/OP	1501.44	1051.01
224		94668	Manipulation Of Chest Wall	IP/OP	251.94	176.36
225		87536	Infectious Agent Detection; Hiv-1, Quant	IP/OP	381.34	266.94
226		76642	Ultrasound Of Breast	IP/OP	443.70	310.59
227		96360	Intravenous Infusion, Hydration; Initial, 31 Minutes To 1 Hour	IP/OP	769.08	538.36
228		93458	Catheter Placement In Coronary Artery(S) For Coronary Angiography	IP/OP	14690.04	10283.03
229		76770	Ultrasound Of Retroperitoneal, Complete	IP/OP	513.06	359.14
230		93975	Vascular Study	IP/OP	945.54	661.88
231		76536	Ultrasound Of Head And Neck	IP/OP	652.80	456.96
232		76775	Ultrasound Of Retroperitoneal, Limited	IP/OP	897.60	628.32
233		74018	X-Ray, Abdomen	IP/OP	344.25	240.98
234		86900	Blood Typing Abo	IP/OP	263.16	184.21
235		87186	Susceptibility Studies, Antimicrobial Agent	IP/OP	2762.16	1933.51
236		96375	Therapeutic, Prophylactic, Or Diagnostic Injection; Sequential Intravenous Push Of A New Substance	IP/OP	199.92	139.94
237		86923	Compatibility Test Each Unit; Electronic	IP/OP	478.38	334.87
238		86920	Compatibility Test Each Unit; Immediate Spin Technique	IP/OP	460.02	322.01
239		99152	Mod Sedation Services Provided By The Same Physician	OP	304.98	213.49
240		97161	Physical Therapy Evaluation: Low Complexity 20 Minutes	IP/OP	215.22	150.65
241		71046	C-Reactive Protein;	IP/OP	328.44	229.91
242		87040	Culture, Bacterial, Blood	IP/OP	93.84	65.69
243		97165	Occupational Therapy Evaluation, Low Complexity, 30 Minutes	IP/OP	215.22	150.65
244		97166	Occupational Therapy Evaluation, Mod Complexity 45 Minutes	IP/OP	433.50	303.45
245		73502	X-Ray, Hip, 2-3 Views	IP/OP	354.45	248.12
246		86850	Antibody Screen, Rbc, Each Serum Technique	IP/OP	216.24	151.37
247		72040	X-Ray, Neck, Spine, 2-3 Views	IP/OP	336.69	235.68
248		80307	Drug Tests	IP/OP	1299.48	909.64
249		83690	Blood Test, Lipase	IP/OP	84.66	59.26
250		82550	Blood Test, Creatine Kinase (Ck)	IP/OP	49.98	34.99
251		93306	Echocardiography, With Doppler	IP/OP	1989.00	1392.30
252		97018	Application Of A Modality To 1 Or More Areas; Paraffin Bath	OP	118.32	82.82
253		77002	X-Ray, Guidance Of Needle Placement	IP/OP	1144.95	801.47
254		96361	Intravenous Infusion, Hydration; Each Additional Hour	IP/OP	221.34	154.94
255		71045	X-Ray, Chest, 1 View	IP/OP	341.70	239.19
256		92526	Therapy Swallowing Dysfunction And/Or Oral Function For Feeding	IP/OP	204.00	142.80
257		97129	Therapeutic Interventions, 15 Minutes	IP/OP	193.80	135.66
258		82248	Bilirubin; Direct	IP/OP	76.50	53.55
259		86706	Hepatitis B Surface Antibody	IP/OP	98.94	69.26
260		83036	Hemoglobin; Glycosylated (A1c)	IP/OP	115.26	80.68
261		97164	Re-Evaluation Of Physical Therapy Established Plan Of Care	IP/OP	215.22	150.65
262		97150	Therapeutic Procedure, Group	IP/OP	215.22	150.65
263		97112	Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes	IP/OP	215.22	150.65
264		97760	Orthotic(S) Management And Training	IP/OP	165.24	115.67
265		93454	Catheter Placement In Coronary Artery(S) For Coronary Angiography	IP/OP	14690.04	10283.03
266		84702	Gonadotropin, Chorionic (Hcg); Quantitative	IP/OP	156.06	109.24
267		97163	Physical Therapy Evaluation: High Complexity	IP/OP	765.00	535.50
268		97530	Therapeutic Activities	IP/OP	215.22	150.65
269		97168	Re-Evaluation Of Occupational Therapy Established Plan Of Care	IP/OP	215.22	150.65
270		87086	Culture, Bacterial, Urine	IP/OP	135.66	94.96
271		87150	Culture Typing, Dna/Rna Probe	IP/OP	2950.86	2065.60
272		72070	X-Ray, Thoracic Spine, 2 Views	IP/OP	407.35	285.15
273		93798	Cardiac Rehabilitation With Ecg Monitor	IP/OP	416.16	291.31
274		73564	X-Ray, Knee, 4 Or More Views	IP/OP	436.56	305.59
275		93350	Echocardiography, Transthoracic	IP/OP	2694.84	1886.39
276		97116	Therapeutic Procedure, Gait Training	IP/OP	319.26	223.48

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277		92523	Evaluation Of Speech Sound Production	IP/OP	579.36	405.55
278		83540	Blood Test, Iron	IP/OP	742.56	519.79
279		84439	Blood Test, Free T4	IP/OP	377.40	264.18
280		82728	Blood Test, Ferritin	IP/OP	581.40	406.98
281		93308	Echocardiography, Transthoracic, Follow-Up Or Limited Study	IP/OP	1477.98	1034.59
282		86592	Syphilis Test	IP/OP	95.88	67.12
283		83605	Blood Test, Lactic Acid	IP/OP	956.76	669.73
284		84100	Blood Test, Phosphorus	IP/OP	86.70	60.69
285		93017	Cardiovascular Stress Test	IP/OP	1171.98	820.39
286		76856	Ultrasound Of Pelvis	IP/OP	627.30	439.11
287		70496	Ct Scan, Head Or Brain	IP/OP	1725.84	1208.09
288		74170	Ct Scan, Abdomen With And Without Contrast	IP/OP	4702.20	3291.54
289		70486	Ct Scan, Maxillofacial Without Contrast	IP/OP	1183.20	828.24
290		71260	Ct Scan, Thorax With Contrast	IP/OP	1623.84	1136.69
291		88341	Immunohistochemistry Or Immunocytochemistry, Per Specimen	IP/OP	489.60	342.72
292		87077	Culture, Bacterial; Aerobic Isolate	IP/OP	80.58	56.41
293		76937	Ultrasound Guided Vascular Access	IP/OP	604.86	423.40
294		77001	Fluoroscopic Guidance For Vein Dvc	IP/OP	492.66	344.86
295		83615	Lactate Dehydrogenase (Ld), (Ldh)	IP/OP	82.62	57.83
296		85652	Sedimentation Rate, Erythrocyte, Automated	IP/OP	62.22	43.55
297		82306	Gonadotropin, Chorionic (Hcg), Quantitative	IP/OP	572.22	400.55
298		86803	Hepatitis C Antibody	IP/OP	364.14	254.90
299		80202	Blood Test, Vancomycin	IP/OP	192.78	134.95
300		96704	Hepatitis B Core Antibody (Hbcab), Total	IP/OP	123.42	86.39
301		84484	Blood Test, Troponin	IP/OP	185.84	137.09
302		84145	Procalcitonin (Pct)	IP/OP	1085.48	766.84
303		86140	C-Reactive Protein	IP/OP	62.22	43.55
304		87340	Infectious Agent Antigen Detection, Hep B	IP/OP	97.92	68.54

Notes:
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Shoppable ID	N/A Indicator	Billing Code	Description	Location Provided	Gross Charge	First Trenton Indemnity	Horizon Plan: Indemnity	Horizon Plan: Medicare Blue	Horizon Plan: Managed	Horizon Plan: NJ Health	Horizon Plan: PPO	Managed Care Incorporated	Multiplan, Inc	QualCare	Three Rivers Provider Network
1		85027	Complete Blood Count, Automated	I/IO P	34.68	31.21	13.28	10.40	13.28	9.41	13.28	31.21	27.74	26.01	32.95
2		80053	Blood Test, Comprehensive Group Of Blood Chemicals	I/IO P	205.02	184.52	78.48	61.51	78.48	28.22	78.48	184.52	164.02	163.77	194.77
3		80061	Blood Test, Lipids (Cholesterol And Triglycerides)	I/IO P	77.52	69.77	29.67	23.26	29.67	29.40	29.67	69.77	62.02	58.14	73.64
4		84153	Psa (Prostate Specific Antigen)	I/IO P	228.48	205.63	87.46	68.54	87.46	48.02	87.46	205.63	182.78	171.36	217.06
5		80076	Liver Function Blood Test Panel	I/IO P	72.42	65.18	27.72	21.73	27.72	13.72	27.72	65.18	57.94	54.32	68.80
6		70450	Ct Scan, Head Or Brain, Without Contrast	I/IO P	2535.72	2282.15	242.96	121.30	242.96	269.50	242.96	2282.15	2028.58	1901.79	2408.93
7		74177	Ct Scan Of Abdomen And Pelvis With Contrast	I/IO P	1623.84	1461.46	815.98	407.38	815.98	295.27	815.98	1461.46	1299.07	1217.88	1542.65
8		81001	Manual Urinalysis Test With Examination Using Microscope	I/IO P	38.76	34.88	14.84	11.63	14.84	4.27	14.84	34.88	31.01	29.07	36.82
9		76830	Ultrasound Pelvis Through Vagina	I/IO P	626.03	563.43	242.96	121.30	242.96	144.45	242.96	563.43	500.82	469.52	594.73
10		62323	Injection Of Substance Into Spinal Canal Of Lower Back Or Sacrum Using Imaging Guidance	I/IO P	3127.58	2814.82	1582.29	789.96	1582.29	216.31	1582.29	2814.82	2502.06	2345.69	2971.20
11		85610	Blood Test, Clotting Time	I/IO P	15.30	13.77	5.86	4.59	5.86	5.86	5.86	13.77	12.24	11.48	14.54
12		85730	Coagulation Assessment Blood Test	I/IO P	20.40	18.36	7.81	6.12	7.81	5.88	7.81	18.36	16.32	15.30	19.38
13		80048	Basic Metabolic Panel	I/IO P	162.18	145.96	62.08	48.65	62.08	18.23	62.08	145.96	129.74	121.64	154.07
14		72193	Ct Scan, Pelvis, With Contrast	I/IO P	1755.42	1579.88	406.75	203.07	406.75	321.62	406.75	1579.88	1404.34	1316.57	1667.65
15		93452	Insertion Of Catheter Into Left Heart For Diagnosis	OP	14690.04	13221.04	7348.93	3668.96	7348.93	1222.42	7348.93	11752.03	11107.53	13955.54	
16		76700	Ultrasound Of Abdomen	I/IO P	1105.68	995.11	242.96	121.30	242.96	129.36	242.96	995.11	884.54	826.26	1050.40
17		73721	Mri Scan Of Leg Joint	I/IO P	1879.86	1691.87	552.29	275.73	552.29	646.80	552.29	1691.87	1503.89	1409.90	1785.87
18		59400	Routine Obstetric Care For Vaginal Delivery, Including Pre-And Post-Delivery Care	I/IO P	8470.08	7623.07	3242.35	2541.02	3242.35	1331.10	3242.35	7623.07	6776.06	6352.56	8046.58
19		77067	Mammography, Screening, Bilateral	I/IO P	541.62	487.46	207.33	162.49	207.33	129.36	207.33	487.46	433.30	406.22	514.54
20		43239	Biopsy Of The Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope	I/IO P	3269.10	2942.19	2142.15	1069.47	2142.15	523.46	2142.15	2942.19	2615.28	2451.83	3105.65
21		43235	Diagnostic Examination Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope	I/IO P	3269.10	2942.19	2142.15	1069.47	2142.15	394.11	2142.15	2942.19	2615.28	2451.83	3105.65
22		72110	X-Ray, Lower Back, Minimum Four Views	I/IO P	403.92	363.53	242.96	121.30	242.96	53.90	242.96	363.53	323.14	302.94	383.72
23		64483	Injections Of Anesthetic And/Or Steroid Drug Into Lower Or Sacral Spine Nerve Root Using Imaging Guidance	I/IO P	3168.12	2851.31	2034.15	1015.55	2034.15	365.17	2034.15	2851.31	2534.50	2376.09	3009.71
24		45385	Removal Of Polyps Or Growths Of Large Bowel Using An Endoscope	I/IO P	2984.52	2696.07	2693.99	1344.98	2693.99	707.31	2693.99	2696.07	2387.62	2238.39	2835.29
25		77066	Mammography Of Both Breasts	I/IO P	541.62	487.46	207.33	162.49	207.33	160.27	207.33	487.46	433.30	406.22	514.54
26		45380	Biopsy Of Large Bowel Using An Endoscope	OP	2984.52	2696.07	2693.99	1344.98	2693.99	522.52	2693.99	2696.07	2387.62	2238.39	2835.29
27		49505	Repair Of Groin Hernia Patient Age 5 Years Or Older	OP	8993.34	8094.01	8063.28	4025.60	8063.28	8063.28	8063.28	8094.01	7194.67	6745.01	8543.67
28		97110	Physical Therapy, Therapeutic Exercise	I/IO P	165.24	148.72	63.25	49.57	63.25	15.63	63.25	148.72	132.19	123.93	156.98
29		70553	Mri Scan Of Brain Before And After Contrast	I/IO P	10027.62	9024.86	815.98	407.38	815.98	1066.42	815.98	9024.86	8022.10	7520.72	9526.24
30		81002	Automated Urinalysis Test	I/IO P	23.46	21.11	8.98	7.04	8.98	1.96	8.98	21.11	18.77	17.60	22.29
31		66821	Removal Of Recurring Cataract In Lens Capsule Using Laser	OP	1973.70	1776.33	1253.46	625.79	1253.46	394.11	1253.46	1776.33	1578.96	1480.28	1875.02
32		72148	Mri Scan Of Lower Spinal Canal	I/IO P	1446.36	1301.72	552.29	275.73	552.29	646.80	552.29	1301.72	1157.09	1084.77	1374.04
33		90832	Psychotherapy, 30 Min	OP	542.64	488.38	367.11	183.28	367.11	68.21	367.11	488.38	434.11	406.98	515.51
34		55700	Biopsy Of Prostate Gland	OP	8650.88	7785.79	4680.49	2336.74	4680.49	1092.62	4680.49	7785.79	6920.70	6488.16	8218.34
35		45391	Ultrasound Examination Of Lower Large Bowel Using An Endoscope	OP	4146.30	3731.67	2693.99	1344.98	2693.99	497.15	2693.99	3731.67	3317.04	3109.73	3939.99
36		77065	Mammography Of One Breast	I/IO P	541.62	487.46	207.33	162.49	207.33	126.34	207.33	487.46	433.30	406.22	514.54
37		19120	Removal Of 1 Or More Breast Growth, Open Procedure	OP	12774.48	11497.03	8749.22	4368.06	8749.22	469.30	8749.22	11497.03	10219.58	9580.86	12135.76
38		90834	Psychotherapy, 45 Min	OP	542.64	488.38	367.11	183.28	367.11	90.26	367.11	488.38	434.11	406.98	515.51
39		90837	Psychotherapy, 60 Min	OP	542.64	488.38	367.11	183.28	367.11	90.26	367.11	488.38	434.11	406.98	515.51
40		85025	Complete Blood Cell Count, With Differential White Blood Cells, Automated	I/IO P	44.88	40.39	17.18	13.46	17.18	9.80	17.18	40.39	35.90	33.66	42.64
41		84443	Blood Test, Thyroid Stimulating Hormone (Tsh)	I/IO P	637.50	573.75	244.04	191.25	244.04	49.00	244.04	573.75	510.00	478.13	605.63
42		90853	Group Psychotherapy	OP	284.58	256.12	211.34	105.51	211.34	27.50	211.34	256.12	227.66	213.44	270.35
43		45378	Diagnostic Examination Of Large Bowel Using An Endoscope	I/IO P	2984.52	2696.07	2083.10	1039.99	2083.10	433.52	2083.10	2696.07	2387.62	2238.39	2835.29
44		90846	Family Psychotherapy, Not Including Patient, 50 Min	OP	472.59	425.33	367.11	183.28	367.11	24.50	367.11	425.33	378.07	354.44	448.96
45		90847	Family Psychotherapy, Including Patient, 50 Min	OP	472.59	425.33	367.11	183.28	367.11	113.94	367.11	425.33	378.07	354.44	448.96
46		99203	New Patient Office Or Other Outpatient Visit, Typically 30 Min	OP	306.00	275.40	117.14	91.80	117.14	61.14	117.14	275.40	244.80	229.50	290.70
47		99204	New Patient Office Or Other Outpatient Visit, Typically 45 Min	OP	469.20	422.28	179.61	140.76	179.61	92.31	179.61	422.28	375.36	351.90	445.74
48		99205	New Patient Office Or Other Outpatient Visit, Typically 60 Min	OP	581.40	522.26	222.56	174.42	222.56	115.60	222.56	522.26	465.12	436.05	552.33
49		99243	Patient Office Consultation, Typically 40 Min	OP	348.80	312.12	132.76	104.04	132.76	64.70	132.76	312.12	277.44	260.10	329.46
50		42820	Removal Of Tonsils And Adenoid Glands Patient Younger Than Age 12	OP	17358.48	15622.63	13516.22	6747.99	13516.22	309.29	13516.22	15622.63	13866.78	13018.86	16490.56
51		47562	Removal Of Gallbladder Using An Endoscope	OP	17103.00	15392.70	13330.47	6655.25	13330.47	591.92	13330.47	15392.70	13682.40	12827.25	16247.85
52		55866	Surgical Removal Of Prostate And Surrounding Lymph Nodes Using An Endoscope	OP	30511.94	27460.75	23787.79	11876.08	23787.79	1762.61	23787.79	27460.75	24409.55	22883.96	28986.34
53		59510	Routine Obstetric Care For Cesarean Delivery, Including Pre-And Post-Delivery Care	I/IO P	3020.12	2718.11	1156.10	906.04	1156.10	156.78	1156.10	2718.11	2416.10	2265.09	2869.11
54		59610	Routine Obstetric Care For Vaginal Delivery After Prior Cesarean Delivery Including Pre-And Post-Del	I/IO P	9263.64	8337.28	3546.12	2779.09	3546.12	N/A	3546.12	8337.28	7410.91	6947.73	8800.46
55		66984	Removal Of Cataract With Insertion Of Lens	OP	6907.51	6216.76	5211.06	2601.63	5211.06	1338.93	5211.06	6216.76	5526.01	5180.63	6562.13
56	N/A	DRG - 460	Spinal Fusion Except Cervical Without Major Comorbid Conditions Or Complications (Mcc)	IP	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
57	DRG - 470	Major Joint Replacement Or Reattachment Of Lower Extremity Without Major Comorbid Conditions Or	IP	N/A	N/A	33117.28	33117.28	33117.28	33117.28	N/A	33117.28	N/A	N/A	N/A	N/A
58	DRG - 473	Cervical Spinal Fusion Without Comorbid Conditions (Cc) Or Major Comorbid Conditions Or Complica	IP	N/A	N/A	41914.68	41914.68	41914.68	41914.68	N/A	41914.68	N/A	N/A	N/A	N/A
59	DRG - 743	Uterine And Adnexa Procedures For Non-Malignancy Without Comorbid Conditions (Cc) Or Major Co	IP	N/A	N/A	21301.58	21301.58	21301.58	21301.58	N/A	21301.58	N/A	N/A	N/A	N/A
60		29826	Shaving Of Shoulder Bone Using An Endoscope	OP	189.19	170.27	72.42	56.76	72.42	782.24	72.42	170.27	151.35	141.89	179.73
61		29881	Removal Of One Knee Cartilage Using An Endoscope	OP	9594.42	8634.98	7413.36	3701.13	7413.36	741.24	7413.36	8634.98	7675.54	7195.82	9114.70
62		99244	Patient Office Consultation, Typically 60 Min	OP	520.20	468.18	199.13	156.06	199.13	91.10	199.13	468.18	416.16	390.15	494.19
63		99385	Initial New Patient Preventive Medicine Evaluation (18-39 Years)	OP	377.40	339.66	144.47	113.22	144.47	84.30	144.47	339.66	301.92	283.05	358.53
64		99386	Initial New Patient Preventive Medicine Evaluation (40-64 Years)	OP	428.40	385.56	163.99	128.52	163.99	84.30	163.99	385.56	342.72	321.30	406.98
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	N/A	DRG - 216	Cardiac Valve And Other Major Cardiothoracic Procedures With Cardiac Catheterization With Major C	IP	N/A	N/A	167960.89	167960.89	167960.89	N/A	167960.89	N/A	N/A	78485.00	N/A
68		93000	Electrocardiogram, Routine, With Interpretation And Report	OP	16.39	14.75	6.27	4.92	6.27	229.68	6.27	14.75	13.11	12.29	15.57
69		95810	Sleep Study	OP	3099.12	2789.21	2324.56	1160.54	2324.56	3928.05	2324.56	2789.21	2479.30	2324.34	2944.16

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Shoppable ID	N/A Indicator	Billing Code	Description	Location Provided	Gross Charge	First Trenton Indemnity	Horizon Plan: Indemnity	Horizon Plan: Medicare Blue	Horizon Plan: Managed	Horizon Plan: NJ Health	Horizon Plan: PPO	Managed Care Incorporated	Multiplan, Inc	QualCare	Three Rivers Provider Network
70		76805	Abdominal Ultrasound Of Pregnant Uterus (Greater Or Equal To 14 Weeks 0 Days) Single Or First Fe	I/IO	497.76	447.98	242.96	121.30	242.96	126.62	242.96	447.98	398.21	373.32	472.87
71		86480	Tuberculosis Test	I/IO	562.02	505.82	215.14	168.61	215.14	79.28	215.14	505.82	449.62	421.52	533.92
72		83735	Blood Test, Magnesium	I/IO	130.56	117.50	49.98	39.17	49.98	8.82	49.98	117.50	104.45	97.92	124.03
73		DRG - 115	Extraocular Procedures Except Orbit	IP	N/A	N/A	26352.70	26352.70	26352.70	N/A	26352.70	N/A	N/A	N/A	N/A
74		DRG - 117	Intraocular Procedures Without Complications	IP	N/A	N/A	18626.65	18626.65	18626.65	N/A	18626.65	N/A	N/A	N/A	N/A
75		DRG - 788	Cesarean Section Without Sterilization Without Complications	IP	N/A	N/A	16461.64	16461.64	16461.64	N/A	16461.64	N/A	N/A	N/A	N/A
76		DRG - 906	Hand Procedures For Injuries	IP	N/A	N/A	30258.65	30258.65	30258.65	N/A	30258.65	N/A	N/A	N/A	N/A
77		DRG - 482	Hip And Femur Procedures Except Major Joint Without Complications	IP	N/A	N/A	28002.64	28002.64	28002.64	N/A	28002.64	N/A	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	34449.60	34449.60	34449.60	N/A	34449.60	N/A	N/A	N/A	N/A
79		DRG - 502	Soft Tissue Procedures Without Complications	IP	N/A	N/A	23107.76	23107.76	23107.76	N/A	23107.76	N/A	N/A	N/A	N/A
80		DRG - 505	Foot Procedures W/O CoMcc	IP	N/A	N/A	30780.58	30780.58	30780.58	N/A	30780.58	N/A	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	28421.56	28421.56	28421.56	N/A	28421.56	N/A	N/A	N/A	N/A
82		DRG - 660	Kidney And Ureter Procedures For Non-Neoplasm With Complications	IP	N/A	N/A	22692.27	22692.27	22692.27	N/A	22692.27	N/A	N/A	N/A	N/A
83		DRG - 142	Major Head And Neck Procedures Without Complications	IP	N/A	N/A	N/A	N/A	27408.59	N/A	N/A	N/A	N/A	N/A	N/A
84		DRG - 250	Percutaneous Cardiovascular Procedures With Coronary Artery Stent	IP	N/A	N/A	37471.34	37471.34	37471.34	N/A	37471.34	N/A	N/A	N/A	N/A
85		DRG - 329	Major Small And Large Bowel Procedures With Major Comp	IP	N/A	N/A	78917.31	78917.31	78917.31	N/A	78917.31	N/A	N/A	N/A	N/A
86		DRG - 355	Hernia Procedures Except Inguinal And Femoral Without Complications	IP	N/A	N/A	23092.31	23092.31	23092.31	N/A	23092.31	N/A	N/A	N/A	N/A
87		DRG - 419	Laparoscopic Cholecystectomy Without C.D.E. Without Complications	IP	N/A	N/A	23449.42	23449.42	23449.42	N/A	23449.42	N/A	N/A	N/A	N/A
88		DRG - 479	Biopsies Of Musculoskeletal System And Connective Tissue Without Complications	IP	N/A	N/A	31915.45	31915.45	31915.45	N/A	31915.45	N/A	N/A	N/A	N/A
89		DRG - 448	Multiple Level Spinal Fusion Except Cervical Without Mcc	IP	N/A	N/A	72810.30	72810.30	72810.30	N/A	72810.30	N/A	N/A	N/A	N/A
90		DRG - 451	Single Level Spinal Fusion Except Cervical Without Mcc	IP	N/A	N/A	55462.74	55462.74	55462.74	N/A	55462.74	N/A	N/A	N/A	N/A
91		72131	Ct Scan, Lumbar Spine	I/IO	734.40	660.96	242.96	121.30	242.96	286.10	242.96	660.96	587.52	550.80	697.68
92		87491	Infectious Agent Detection, Chlamydia Trachomatis	I/IO	365.16	328.64	139.78	109.55	139.78	38.96	139.78	328.64	292.13	273.67	346.90
93		73700	Ct Scan, Lower Extremities	I/IO	1819.68	1637.71	242.96	121.30	242.96	245.00	242.96	1637.71	1455.74	1364.76	1728.70
94		73630	X-Ray, Foot	I/IO	831.30	748.17	201.18	100.44	201.18	29.79	201.18	748.17	665.04	623.48	789.74
95		73560	X-Ray, Knee	I/IO	803.25	722.93	201.18	100.44	201.18	32.34	201.18	722.93	642.60	602.44	763.09
96		72190	X-Ray, Pelvis, 3 Views	I/IO	407.35	366.62	242.96	121.30	242.96	39.20	242.96	366.62	325.88	305.51	386.98
97		92557	Comprehensive Audiometry Threshold Evaluation And Speech Recognition	I/IO	542.64	488.38	357.48	178.47	357.48	323.64	357.48	488.38	434.11	406.98	515.51
98		76512	Ophthalmic Ultrasound, Diagnostic, B-Scan With And Without Quant. A	I/IO	402.90	362.61	242.96	121.30	242.96	117.60	242.96	362.61	322.32	302.18	382.76
99		70355	X-Ray, Jaws, Panoramic	I/IO	325.38	292.84	201.18	100.44	201.18	27.44	201.18	292.84	260.30	244.04	309.11
100		96415	Chemotherapy Administration, Intravenous Infusion Technique	I/IO	252.96	227.66	162.60	81.18	162.60	362.79	162.60	227.66	202.37	189.72	240.31
101		96367	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis; Additional Sequential Infusion Of A New	I/IO	252.96	227.66	162.60	81.18	162.60	46.98	162.60	227.66	202.37	189.72	240.31
102		70498	Ct Scan, Neck	I/IO	1693.20	1523.88	406.75	203.07	406.75	362.60	406.75	1523.88	1354.56	1269.90	1608.54
103		76376	3D Rendering With Interpretation And Post Process Supervision	I/IO	287.64	258.88	110.11	86.29	110.11	124.81	110.11	258.88	230.11	215.73	273.26
104		92567	Tympanometry	OP	416.16	374.54	89.67	44.77	89.67	109.62	89.67	374.54	332.93	312.12	395.35
105		92235	Fluorescein Angiography	OP	1043.46	939.11	711.49	355.21	711.49	114.27	711.49	939.11	834.77	782.60	991.29
106		76815	Abdominal Ultrasound Of Pregnant Uterus	I/IO	545.70	491.13	242.96	121.30	242.96	68.60	242.96	491.13	436.56	409.28	518.42
107		96368	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis; Concurrent Infusion	I/IO	155.04	139.54	59.35	46.51	59.35	29.23	59.35	139.54	124.03	116.28	147.29
108		90472	Immunization Administration	I/IO	174.42	156.98	66.77	52.33	66.77	28.71	66.77	156.98	139.54	130.82	165.70
109		92603	Diagnostic Analysis Of Cochlear Implant, Age 7 Years Or Older; With Programming	OP	542.64	488.38	357.48	178.47	357.48	127.89	357.48	488.38	434.11	406.98	515.51
110		92250	Fundus Photography With Interpretation And Report	OP	432.48	389.23	294.52	147.04	294.52	122.96	294.52	389.23	345.98	324.36	410.86
111		96523	Irrigation Of Implanted Venous Access Device	I/IO	215.22	193.70	135.72	67.76	135.72	180.09	135.72	193.70	172.18	161.42	204.46
112		90746	Hepatitis B Vaccine (Hepb), Adult Dosage, 3 Dose Schedule, For Intramuscular Use	I/IO	254.71	229.24	97.50	76.41	97.50	140.94	97.50	229.24	203.77	191.03	241.97
113		89051	Cell Count, Miscellaneous Body Fluids	I/IO	103.02	92.72	39.44	30.91	39.44	1.76	39.44	92.72	82.42	77.27	97.87
114		73590	X-Ray, Lower Leg	I/IO	773.93	696.54	201.18	100.44	201.18	32.34	201.18	696.54	619.14	580.45	735.23
115		72170	X-Ray, Pelvis, 1-2 Views	I/IO	407.35	366.62	242.96	121.30	242.96	32.34	242.96	366.62	325.88	305.51	386.98
116		73070	X-Ray, Elbow	I/IO	770.10	693.09	201.18	100.44	201.18	32.34	201.18	693.09	616.08	577.58	731.60
117		72125	Ct Scan, Neck Spine Without Contrast	I/IO	1343.34	1209.01	242.96	121.30	242.96	245.00	242.96	1209.01	1074.67	1007.51	1276.17
118		73030	X-Ray, Shoulder	I/IO	761.18	685.06	201.18	100.44	201.18	32.34	201.18	685.06	608.94	570.89	723.12
119		73060	X-Ray, Humerus	I/IO	771.38	694.24	201.18	100.44	201.18	32.34	201.18	694.24	617.10	578.54	732.81
120		72100	X-Ray, Lumbar Spine, 2-3 Views	I/IO	592.88	533.59	242.96	121.30	242.96	43.12	242.96	533.59	474.30	444.66	563.24
121		73120	Hepatitis B Surface Antibody (Hbsab)	I/IO	655.35	589.82	242.96	121.30	242.96	21.56	242.96	589.82	524.28	491.51	622.58
122		73610	X-Ray, Ankle	I/IO	300.90	270.81	201.18	100.44	201.18	29.79	201.18	270.81	240.72	225.68	285.86
123		73110	X-Ray, Wrist	I/IO	465.38	418.84	201.18	100.44	201.18	32.34	201.18	418.84	372.30	349.04	442.11
124		73090	X-Ray, Forearm	I/IO	770.10	693.09	201.18	100.44	201.18	27.44	201.18	693.09	616.08	577.58	731.60
125		93312	Echocardiography, Transesophageal	I/IO	2769.30	2492.37	1252.78	625.45	1252.78	1477.26	1252.78	2492.37	2215.44	2076.98	2630.84
126		97140	Manual Therapy Techniques, 1 Or More Regions, Each 15 Minutes	I/IO	215.22	193.70	82.39	64.57	82.39	12.06	82.39	193.70	172.18	161.42	204.46
127		92611	Motion Fluoroscopic Evaluation Of Swallowing Function By Cine Or Video Recording	I/IO	1018.98	917.08	390.07	305.69	390.07	96.63	390.07	917.08	815.18	764.24	968.03
128		73562	X-Ray, Knee, 3 Views	I/IO	323.85	291.47	201.18	100.44	201.18	32.34	201.18	291.47	259.08	242.89	307.66
129		96374	Therapeutic, Prophylactic, Or Diagnostic Injection; Intravenous Push, Single Or Initial Substance/Drug	I/IO	765.00	688.50	481.38	240.33	481.38	25.30	481.38	688.50	612.00	573.75	726.75
130		92950	Cardiopulmonary Resuscitation	I/IO	1402.50	1262.25	711.49	355.21	711.49	135.20	711.49	1262.25	1122.00	1051.88	1332.38
131		77386	Intensity Modulated Radiation Therapy Delivery Complex	I/IO	2433.72	2190.35	1321.70	659.86	1321.70	352.84	1321.70	2190.35	1946.98	1825.29	2312.03
132		93990	Duplex Scan Of Hemodialysis Access	I/IO	397.80	358.02	242.96	121.30	242.96	819.54	242.96	358.02	318.24	297.91	377.91
133		93926	Duplex Scan Of Lower Extremity Arteries Or Arterial Bypass Grafts; Unilateral Or Limited Study	I/IO	397.80	358.02	242.96	121.30	242.96	571.59	242.96	358.02	318.24	298.35	377.91
134		84703	Blood Test, Human Chorionic Gonadotropin (Hcg)	I/IO	179.52	161.57	68.72	53.86	68.72	5.88	68.72	161.57	143.62	134.64	170.54
135		93978	Duplex Scan Of Aorta, Inferior Vena Cava, Iliac Vasculature, Or Bypass Grafts; Complete Study	I/IO	915.96	824.36	552.29	275.73	552.29	1044.00	552.29	824.36	732.77	686.97	870.16
136		93925	Duplex Scan Of Lower Extremity Arteries Or Arterial Bypass Grafts; Complete Bilateral Study	I/IO	87										

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

Shoppable ID	N/A Indicator	Billing Code	Description	Location Provided	Gross Charge	First Trenton Indemnity	Horizon Plan: Indemnity	Horizon Plan: Medicare Blue	Horizon Plan: Managed	Horizon Plan: NJ Health	Horizon Plan: PPO	Managed Care Incorporated	Multipian, Inc	QualCare	Three Rivers Provider Network
139		96411	Chemotherapy Administration, Intravenous, Push Technique, Each Additional Substance/Drug	OP	387.60	348.84	162.60	81.18	162.60	850.86	162.60	348.84	310.08	290.70	368.22
140		82805	Blood Gasses With O2 Saturation	I/OP	504.90	454.41	193.28	151.47	193.28	54.25	193.28	454.41	403.92	378.68	479.66
141		94664	Demonstration And/O Evaluation Of Patient Utilization Of An Aerosol Generator, Nebulizer, Metered I	I/OP	803.76	723.38	464.72	232.01	464.72	167.04	464.72	723.38	643.01	602.82	763.57
142		94667	Manipulation Chest Wall	I/OP	515.10	463.59	294.52	147.04	294.52	203.58	294.52	463.59	412.08	386.33	489.35
143		94660	Continuous Positive Airway Pressure Ventilation (Cpap)	I/OP	769.08	692.17	464.72	232.01	464.72	143.55	464.72	692.17	615.26	576.81	730.63
144		95816	Electroencephalogram (Eeg)	I/OP	1058.76	952.88	711.49	355.21	711.49	668.16	711.49	952.88	847.01	794.07	1005.82
145		97597	Debridement	I/OP	726.24	653.62	454.00	226.66	454.00	848.25	454.00	653.62	589.99	544.68	689.93
146		90651	Hpv Vaccine	I/OP	1129.08	1016.17	432.21	338.72	432.21	N/A	432.21	1016.17	903.26	846.81	1072.63
147		96413	Chemotherapy Administration, Intravenous Infusion Technique; Up To 1 Hour	I/OP	1239.30	1115.37	757.86	378.36	757.86	571.59	757.86	1115.37	991.44	929.48	1177.34
148		92570	Acoustic Immittance Testing	OP	542.64	488.38	357.48	178.47	357.48	46.33	357.48	488.38	434.11	406.98	515.51
149		92133	Scanning Computerized Ophthalmic Diagnostic Imaging, Optic Nerve	OP	224.40	201.96	135.72	67.76	135.72	37.95	135.72	201.96	179.52	168.30	213.18
150		90675	Rabies Vaccine, For Intramuscular Use	I/OP	1592.94	1433.65	716.69	357.81	716.69	N/A	716.69	1433.65	1274.35	1194.71	1513.29
151		96417	Chemotherapy Administration, Intravenous Infusion Technique	I/OP	252.96	227.66	162.60	81.18	162.60	589.86	162.60	227.66	202.37	189.72	240.31
152		92083	Visual Field Examination	I/OP	432.48	389.23	294.52	147.04	294.52	99.81	294.52	389.23	345.98	324.36	410.86
153		92136	Ophthalmic Biometry	OP	432.48	389.23	294.52	147.04	294.52	104.40	294.52	389.23	345.98	324.36	410.86
154		96401	Chemotherapy Administration, Subcutaneous Or Intramuscular; Non-Homonal Anti-Neoplastic	I/OP	501.84	451.66	162.60	81.18	162.60	200.97	162.60	451.66	401.47	376.38	476.75
155		96402	Chemotherapy Administration, Subcutaneous Or Intramuscular; Hormonal Anti-Neoplastic	OP	315.18	283.66	162.60	81.18	162.60	164.43	162.60	283.66	252.14	236.39	299.42
156		90734	Meningococcal Conjugate Vaccine	I/OP	288.67	259.80	110.50	86.60	110.50	N/A	110.50	259.80	230.94	216.50	274.24
157		96365	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis; Initial, Up To 1 Hour	I/OP	829.26	746.33	481.38	240.33	481.38	97.25	481.38	746.33	663.41	621.95	787.80
158		90670	Pneumococcal Conjugate Vaccine, 13 Valent (Pcv13), For Intramuscular Use	I/OP	856.98	771.28	328.05	257.09	328.05	N/A	328.05	771.28	685.58	642.74	814.13
159		77336	Continuing Medical Physics Consultation	I/OP	1491.24	1342.12	303.35	151.45	303.35	103.21	303.35	1342.12	1192.99	1118.43	1416.68
160		92602	Diagnostic Analysis Of Cochlear Implant, Patient Younger Than 7 Yrs Of Age; Subsequent Reprogram	OP	542.64	488.38	357.48	178.47	357.48	608.13	357.48	488.38	434.11	406.98	515.51
161		92025	Computerized Corneal Topography	OP	215.22	193.70	135.72	67.76	135.72	N/A	135.72	193.70	172.18	161.42	204.46
162		93923	Complete Bilateral Noninvasive Physiologic Studies Of Upper Or Lower Extremity Arteries, 3 Or More	I/OP	1025.10	922.59	357.48	178.47	357.48	715.14	357.48	922.59	820.08	768.63	973.85
163		82948	Glucose Test	I/OP	44.73	40.26	17.12	13.42	17.12	2.94	17.12	40.26	35.78	33.55	42.49
164		94150	Vital Capacity, Total (Separate Procedure)	I/OP	577.32	519.59	357.48	178.47	357.48	169.65	357.48	519.59	451.86	432.99	548.45
165		94060	Bronchodilation Responsiveness	I/OP	1043.46	939.11	711.49	355.21	711.49	566.37	711.49	939.11	834.77	782.60	991.29
166		90732	Pneumococcal Polysaccharide Vaccine	I/OP	429.93	386.94	164.58	128.98	164.58	122.67	164.58	386.94	343.94	322.45	408.43
167		92584	Electrocochleography	OP	998.58	898.72	357.48	178.47	357.48	113.17	357.48	898.72	798.86	748.94	948.65
168		92550	Tympanometry And Reflex Threshold Measurements	OP	542.64	488.38	357.48	178.47	357.48	30.75	357.48	488.38	434.11	406.98	515.51
169		92626	Evaluation Of Auditory Function, First Hour	OP	542.64	488.38	357.48	178.47	357.48	118.00	357.48	488.38	434.11	406.98	515.51
170		92579	Visual Reinforcement Audiometry (Vra)	I/OP	937.38	843.64	357.48	178.47	357.48	276.66	357.48	843.64	749.90	703.04	890.51
171		92582	Conditioning Play Audiometry	OP	937.38	843.64	357.48	178.47	357.48	284.49	357.48	843.64	749.90	703.04	890.51
172		90686	Influenza Virus Vaccine	I/OP	71.99	64.79	27.56	21.60	27.56	N/A	27.56	64.79	57.59	53.99	68.39
173		92604	Diagnostic Analysis Of Cochlear Implant, Age 7 Yrs Or Older	OP	542.64	488.38	357.48	178.47	357.48	261.00	357.48	488.38	434.11	406.98	515.51
174		90715	Tetanus, Diphtheria Toxoids And Acellular Pertussis Vaccine (Tdap), 7 Years-	I/OP	348.51	313.66	133.41	104.55	133.41	N/A	133.41	313.66	278.81	261.38	331.08
175		86901	Blood Typing Rhd	I/OP	186.66	167.99	89.67	44.77	89.67	3.92	89.67	167.99	149.33	140.00	177.33
176		93922	Limited Bilateral Noninvasive Physiologic Studies Of Upper Or Lower Extremity Arteries	I/OP	546.72	492.05	294.52	147.04	294.52	574.20	294.52	492.05	437.38	410.04	519.38
177		36415	Routine Venipuncture	I/OP	61.20	55.08	23.43	18.36	23.43	3.88	23.43	55.08	48.96	45.90	58.14
178		92610	Evaluation Of Oral And Pharyngeal Swallowing Function	I/OP	270.30	243.27	103.47	81.09	103.47	168.74	103.47	243.27	216.24	202.73	256.79
179		92522	Evaluation Of Speech Sound Production	I/OP	579.36	521.42	221.78	173.81	221.78	103.23	221.78	521.42	463.49	434.52	550.39
180		93880	Duplex Scan Of Extracranial Arteries; Complete Bilateral Study	I/OP	877.20	789.48	552.29	275.73	552.29	173.53	552.29	789.48	701.76	673.34	833.34
181		97802	Medical Nutrition Therapy	OP	107.10	96.39	41.00	32.13	41.00	57.42	41.00	96.39	85.68	80.33	101.75
182		86703	Antibody, Hiv-1 And Hiv-2, Single Result	I/OP	77.52	69.77	29.67	23.26	29.67	41.16	29.67	69.77	62.02	58.14	73.64
183		93970	Duplex Scan Of Extremity Veins; Complete Bilateral Study	I/OP	872.10	784.89	552.29	275.73	552.29	117.11	552.29	784.89	697.68	654.08	828.50
184		96376	Therapeutic, Prophylactic, Or Diagnostic Injection Sequential Intravenous Push Of The Same Substan	I/OP	201.04	182.38	85.51	67.01	85.51	6.04	85.51	201.04	178.70	167.54	212.21
185		90744	Hepatitis B Vaccine (Hepb), Pediatric/Adolescent Dosage, 3 Dose Schedule	I/OP	84.18	75.76	32.22	25.25	32.22	86.03	32.22	75.76	67.34	63.14	77.97
186		93971	Duplex Scan Of Extremity Veins; Unilateral Or Limited Study	I/OP	397.80	358.02	242.96	121.30	242.96	113.96	242.96	358.02	318.24	298.55	377.91
187		90471	Immunization Administration	I/OP	248.88	223.99	162.60	81.18	162.60	49.59	162.60	223.99	199.10	186.66	236.44
188		90632	Hepatitis A Vaccine (Hepa), Adult Dosage, For Intramuscular Use	I/OP	270.35	243.32	103.49	81.11	103.49	207.08	103.49	243.32	216.28	202.76	256.83
189		99153	Mod Sedation Services Provided By The Same Physician	OP	369.24	332.32	141.35	110.77	141.35	16.83	141.35	332.32	295.39	276.93	350.78
190		93303	Transthoracic Echocardiography	I/OP	2847.84	2563.06	1252.78	625.45	1252.78	736.02	1252.78	2563.06	2278.27	2135.88	2705.45
191		73552	X-Ray, Femur, 2 Views	I/OP	369.75	332.78	201.18	100.44	201.18	35.28	201.18	332.78	295.80	277.31	351.26
192		96372	Therapeutic, Prophylactic, Or Diagnostic Injection; Subcutaneous Or Intramuscular	I/OP	195.84	176.26	162.60	81.18	162.60	7.97	162.60	176.26	156.67	146.88	186.05
193		95851	Range Of Motion Measurements And Report	I/OP	118.32	106.49	45.29	35.50	45.29	88.74	45.29	106.49	94.66	88.74	112.40
194		77300	Basic Radiation Dosimetry Calculation	I/OP	672.18	604.96	303.35	151.45	303.35	101.92	303.35	604.96	537.74	504.14	638.57
195		96366	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis, Each Additional Hour	I/OP	264.18	237.76	105.42	52.63	105.42	31.48	105.42	237.76	211.34	198.14	250.97
196		94761	Noninvasive Ear Or Pulse Oximetry For Oxygen Saturation; Multiple Determinations	I/OP	390.66	351.59	149.54	117.20	149.54	73.08	149.54	351.59	312.53	293.00	371.13
197		94640	Inhalation Therapy	I/OP	664.02	597.62	464.72	232.01	464.72	96.57	464.72	597.62	531.22	498.02	630.82
198		77412	Radiation Therapy Delivery	I/OP	931.26	838.13	600.86	299.98	600.86	80.36	600.86	838.13	745.01	698.45	884.70
199		77063	Screening Digital Breast Tomosynthesis, Bilateral	I/OP	541.62	487.46	207.33	162.49	207.33	59.45	207.33	487.46	433.30	406.22	514.54
200		87591	Infectious Agent Detection, Neisseria Gonorrhoeae	I/OP	365.16	328.64	139.78	109.55	139.78	73.89	139.78	328.64	292.13	273.87	346.90
201		97535	Self-Care/Home Management Training	I/OP	215.22	193.70	82.39	64.57	82.39	N/A	82.39	193.70	172.18	161.42	204.46
202		70551	Mri, Brain Without Contrast	I/OP	5737.50	5163.75	552.29	275.73	552.29	646.80	552.29	5163.75	4590.00	4303.13	5450.63
203		97162	Physical Therapy Evaluation, Complex, 30 Minutes	I/OP	390.66	351.59	149.54	117.20	149.54	32.34	149.54	351.59	312.53	293.00	371.13
204		92507	Therapy Speech And/Or Auditory	I/OP	235.62	212.06	90.20	70.69	90.20	25.58	90.20	212.06	188.50	176.72	223.84
205		92612	Flexible Endoscopic Evaluation Of Swallowing By Cine Or Video Recording	I/OP	977.16	879.44	374.06	293.15	374.06	N/A	374.06	879.44	781.73	732.87	928.30
206		71250	Ct Scan, Thorax Without Contrast	I/OP	1052.64	947.38	242.96	121.30	242.96	286.10	242.96	947.38	842.11	789.48	1000.01
207		76705	Ultrasound Of Abdomen, Limited	I/OP	800.70	720.63	242.96	121.30	242.96	86.24	242.96	720.63	640.56	600.53	760.67

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Shoppable ID	N/A Indicator	Billing Code	Description	Location Provided	Gross Charge	First Trenton Indemnity	Horizon Plan: Indemnity	Horizon Plan: Medicare Blue	Horizon Plan: Managed	Horizon Plan: NJ Health	Horizon Plan: PPO	Managed Care Incorporated	Multiplan, Inc	QualCare	Three Rivers Provider Network
208		95813	Electroencephalogram (Eeg) Extended Monitoring; 61-119 Minutes	I/IO/P	835.38	751.84	711.49	355.21	711.49	281.88	711.49	751.84	668.30	626.54	793.61
209		93005	Electrocardiogram	I/IO/P	221.34	199.21	135.72	67.76	135.72	159.21	135.72	199.21	177.07	166.01	210.27
210		95819	Electroencephalogram (Eeg)	I/IO/P	1058.76	952.88	711.49	355.21	711.49	629.01	711.49	952.88	847.01	794.07	1005.82
211		94727	Gas Dilution	I/IO/P	577.32	519.59	357.48	178.47	357.48	63.55	357.48	519.59	461.86	432.99	548.45
212		94760	Noninvasive Ear Or Pulse Oximetry For Oxygen Saturation	I/IO/P	290.70	261.63	111.28	87.21	111.28	130.50	111.28	261.63	232.56	218.03	276.17
213		94644	Continuous Inhalation Therapy With Aerosol Medication For Acute Airway Obstruction; First Hour	I/IO/P	476.34	428.71	294.52	147.04	294.52	39.15	294.52	428.71	381.07	357.26	452.52
214		94645	Continuous Inhalation Therapy With Aerosol Medication For Acute Airway Obstruction; Each Additional Hour	I/IO/P	158.10	142.29	60.52	47.43	60.52	N/A	60.52	142.29	126.48	118.58	150.20
215		94003	Ventilation Assist And Management; Hospital Inpatient/Observation, Each Subsequent Day	I/IO/P	1018.98	917.08	1510.50	754.12	1510.50	92.42	1510.50	917.08	815.18	764.24	968.03
216		94002	Ventilation Assist And Management; Hospital Inpatient/Observation, Initial Day	I/IO/P	2021.64	1819.48	1510.50	754.12	1510.50	128.18	1510.50	1819.48	1617.31	1516.23	1920.56
217		94681	Oxygen Uptake, Expired Gas Analysis	I/IO/P	978.18	880.36	711.49	355.21	711.49	234.90	711.49	880.36	782.54	733.64	929.27
218		94010	Spirometry	I/IO/P	577.32	519.59	357.48	178.47	357.48	414.99	357.48	519.59	461.86	432.99	548.45
219		93888	Transcranial Doppler Study Of The Intracranial Arteries; Limited Study	I/IO/P	1308.66	1177.79	242.96	121.30	242.96	357.57	242.96	1177.79	1046.93	981.50	1243.23
220		77417	Therapeutic Radiology Port Image(S)	I/IO/P	390.66	351.59	149.54	117.20	149.54	21.56	149.54	351.59	312.53	293.00	371.13
221		94729	Diffusing Capacity	I/IO/P	390.66	351.59	149.54	117.20	149.54	81.51	149.54	351.59	312.53	293.00	371.13
222		77085	Bone Density Study, Dual-Energy X-Ray Absorptiometry	I/IO/P	445.74	401.17	242.96	121.30	242.96	48.96	242.96	401.17	356.59	334.31	423.45
223		77334	Therapy Devices, Design And Construction, Complex	I/IO/P	1501.44	1361.30	836.41	417.58	836.41	286.16	836.41	1361.30	1201.15	1126.08	1426.37
224		94668	Manipulation Of Chest Wall	I/IO/P	251.94	226.75	294.52	147.04	294.52	109.62	294.52	226.75	201.55	188.96	239.34
225		87536	Infectious Agent Detection; Hiv-1, Quant	I/IO/P	381.34	343.21	145.98	114.40	145.98	229.32	145.98	343.21	305.07	286.01	362.27
226		76642	Ultrasound Of Breast	I/IO/P	443.70	399.33	201.18	100.44	201.18	77.50	201.18	399.33	354.96	332.78	421.52
227		96360	Intravenous Infusion, Hydration; Initial, 31 Minutes To 1 Hour	I/IO/P	769.08	692.17	481.38	240.33	481.38	368.01	481.38	692.17	615.26	576.81	730.63
228		93458	Catheter Placement In Coronary Artery(S) For Coronary Angiography	I/IO/P	14690.04	13221.04	7348.93	3668.96	7348.93	1521.80	7348.93	13221.04	11752.03	11017.53	13955.54
229		76770	Ultrasound Of Retroperitoneal, Complete	I/IO/P	513.06	461.75	242.96	121.30	242.96	129.36	242.96	461.75	410.45	384.80	487.41
230		93975	Vascular Study	I/IO/P	945.54	850.99	552.29	275.73	552.29	845.64	552.29	850.99	756.43	709.16	898.26
231		76536	Ultrasound Of Head And Neck	I/IO/P	652.80	587.52	242.96	121.30	242.96	80.24	242.96	587.52	522.24	489.60	620.16
232		76775	Ultrasound Of Retroperitoneal, Limited	I/IO/P	897.60	807.84	242.96	121.30	242.96	129.36	242.96	807.84	718.08	673.20	852.72
233		74018	X-Ray, Abdomen	I/IO/P	344.25	309.83	201.18	100.44	201.18	31.99	201.18	309.83	275.40	258.19	327.04
234		86900	Blood Typing Abo	I/IO/P	263.16	236.84	294.52	147.04	294.52	3.92	294.52	236.84	210.53	197.37	250.00
235		87186	Susceptibility Studies, Antimicrobial Agent	I/IO/P	2762.16	2485.94	1057.35	528.65	1057.35	21.56	1057.35	2485.94	2209.73	2071.62	2624.05
236		96375	Therapeutic, Prophylactic, Or Diagnostic Injection; Sequential Intravenous Push Of A New Substance/	I/IO/P	199.92	179.93	105.42	52.63	105.42	11.73	105.42	179.93	159.94	149.94	189.92
237		86923	Compatibility Test Each Unit, Electronic	I/IO/P	478.38	430.54	391.53	195.47	391.53	19.25	391.53	430.54	382.70	358.79	454.46
238		86920	Compatibility Test Each Unit, Immediate Spin Technique	I/IO/P	460.02	414.02	391.53	195.47	391.53	25.93	391.53	414.02	368.02	345.02	437.02
239		99152	Mod Sedation Services Provided By The Same Physician	OP	304.98	274.48	116.75	91.49	116.75	78.80	116.75	274.48	243.98	228.74	289.73
240		97161	Physical Therapy Evaluation: Low Complexity 20 Minutes	I/IO/P	215.22	193.70	82.39	64.57	82.39	32.34	82.39	193.70	172.18	161.42	204.46
241		71046	C-Reactive Protein;	I/IO/P	328.44	295.60	201.18	100.44	201.18	36.87	201.18	295.60	262.75	246.33	312.02
242		87040	Culture, Bacterial, Blood	I/IO/P	93.84	84.46	35.92	28.15	35.92	17.64	35.92	84.46	75.07	70.38	89.15
243		97165	Occupational Therapy Evaluation, Low Complexity, 30 Minutes	I/IO/P	215.22	193.70	82.39	64.57	82.39	31.35	82.39	193.70	172.18	161.42	204.46
244		97166	Occupational Therapy Evaluation, Mod Complexity 45 Minutes	I/IO/P	433.50	390.15	165.94	130.05	165.94	31.35	165.94	390.15	346.80	325.13	411.83
245		73502	X-Ray, Hip, 2-3 Views	I/IO/P	354.45	319.01	201.18	100.44	201.18	45.00	201.18	319.01	283.56	265.84	336.73
246		86850	Antibody Screen, Rbc, Each Serum Technique	I/IO/P	216.24	194.62	122.08	60.95	122.08	8.23	122.08	194.62	172.99	162.18	205.43
247		72040	X-Ray, Neck, Spine, 2-3 Views	I/IO/P	336.69	303.02	201.18	100.44	201.18	34.79	201.18	303.02	269.35	252.52	319.86
248		80307	Drug Tests	I/IO/P	1299.48	1169.53	497.44	389.84	497.44	124.26	497.44	1169.53	1039.58	974.61	1234.51
249		83690	Blood Test, Lipase	I/IO/P	84.66	76.19	32.41	25.40	32.41	8.82	32.41	76.19	67.73	63.50	80.43
250		82550	Blood Test, Creatine Kinase (Ck)	I/IO/P	49.98	44.98	19.13	14.99	19.13	9.41	19.13	44.98	39.98	37.49	47.48
251		93306	Echocardiography, With Doppler	I/IO/P	1989.00	1790.10	1252.78	625.45	1252.78	1545.12	1252.78	1790.10	1591.20	1491.75	1889.55
252		97018	Application Of A Modality To 1 Or More Areas; Paraffin Bath	OP	118.32	106.49	45.29	35.50	45.29	N/A	45.29	106.49	94.66	88.74	112.40
253		77002	X-Ray, Guidance Of Needle Placement	I/IO/P	1144.95	1030.46	438.29	343.49	438.29	56.13	438.29	1030.46	915.96	858.71	1087.70
254		96361	Intravenous Infusion, Hydration; Each Additional Hour	I/IO/P	221.34	199.21	105.42	52.63	105.42	151.38	105.42	199.21	177.07	166.01	210.27
255		71045	X-Ray, Chest, 1 View	I/IO/P	341.70	307.53	201.18	100.44	201.18	24.01	201.18	307.53	273.36	256.28	324.62
256		92526	Therapy Swallowing Dysfunction And/Or Oral Function For Feeding	I/IO/P	204.00	183.60	78.09	61.20	78.09	N/A	78.09	183.60	163.20	153.00	193.80
257		97129	Therapeutic Interventions, 15 Minutes	I/IO/P	193.80	174.42	74.19	58.14	74.19	34.48	74.19	174.42	155.04	145.35	184.11
258		82248	Bilirubin, Direct	I/IO/P	76.50	68.85	29.28	22.95	29.28	17.64	29.28	68.85	61.20	57.38	72.68
259		86706	Hepatitis B Surface Antibody	I/IO/P	98.94	89.05	37.87	29.68	37.87	25.48	37.87	89.05	79.15	74.21	93.99
260		83036	Hemoglobin; Glycosylated (A1C)	I/IO/P	115.26	103.73	44.12	34.58	44.12	12.94	44.12	103.73	92.21	86.45	109.50
261		97164	Re-Evaluation Of Physical Therapy Established Plan Of Care	I/IO/P	215.22	193.70	82.39	64.57	82.39	21.98	82.39	193.70	172.18	161.42	204.46
262		97150	Therapeutic Procedure, Group	I/IO/P	215.22	193.70	82.39	64.57	82.39	N/A	82.39	193.70	172.18	161.42	204.46
263		97112	Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes	I/IO/P	215.22	193.70	82.39	64.57	82.39	14.64	82.39	193.70	172.18	161.42	204.46
264		97760	Orthotic(S) Management And Training	I/IO/P	165.24	148.72	63.25	49.57	63.25	33.98	63.25	148.72	132.19	123.93	156.98
265		93454	Catheter Placement In Coronary Artery(S) For Coronary Angiography	I/IO/P	14690.04	13221.04	7348.93	3668.96	7348.93	1261.18	7348.93	13221.04	11752.03	11017.53	13955.54
266		84702	Gonadotropin, Chorionic (Hcg); Quantitative	I/IO/P	156.06	140.45	59.74	46.82	59.74	22.32	59.74	140.45	124.85	117.05	148.26
267		97163	Physical Therapy Evaluation: High Complexity	I/IO/P	765.00	688.50	292.84	229.50	292.84	32.34	292.84	688.50	612.00	573.75	726.75
268		97530	Therapeutic Activities	I/IO/P	215.22	193.70	82.39	64.57	82.39	36.10	82.39	193.70	172.18	161.42	204.46
269		97168	Re-Evaluation Of Occupational Therapy Established Plan Of Care	I/IO/P	215.22	193.70	82.39	64.57	82.39	20.72	82.39	193.70	172.18	161.42	204.46
270		87086	Culture, Bacterial, Urine	I/IO/P	135.66	122.09	51.93	40.70	51.93	11.76	51.93	122.09	108.53	101.75	128.88
271		87150	Culture Typing, Dna/Rna Probe	I/IO/P	2950.86	2655.77	1129.59	885.26	1129.59	38.96	1129.59	2655.77	2360.69	2213.15	2803.32
272		72070	X-Ray, Thoracic Spine, 2 Views	I/IO/P	407.35	366.62	242.96	121.30	242.96	36.55	242.96	366.62	325.88	305.51	386.98
273		93798	Cardiac Rehabilitation With Ecg Monitor	I/IO/P	416.16	374.54	287.69	143.63	287.69	177.48	287.69	374.54	332.93	312.12	395.35
274		73564	X-Ray, Knee, 4 Or More Views	I/IO/P	436.56	392.90	242.96	121.30	242.96	48.51	242.96	392.90	349.25	327.42	414.73
275		93350	Echocardiography, Transthoracic	I/IO/P	2694.84	2425.36	1252.78	625.45	1252.78	1299.78	1252.78	2425.36	2155.87	2021.13	2560.10
276		97116	Therapeutic Procedure, Gait Training	I/IO/P	319.26	287.33	122.21	95.78	122.21	N/A	122.21	287.33	255.41	239.45	303.30

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Shoppable ID	N/A Indicator	Billing Code	Description	Location Provided	Gross Charge	First Trenton Indemnity	Horizon Plan: Indemnity	Horizon Plan: Medicare Blue	Horizon Plan: Managed	Horizon Plan: NJ Health	Horizon Plan: PPO	Managed Care Incorporated	Multiplan, Inc	QualCare	Three Rivers Provider Network
277		92523	Evaluation Of Speech Sound Production	I/OP	579.36	521.42	221.78	173.81	221.78	214.86	221.78	521.42	463.49	434.52	550.39
278		83540	Blood Test, Iron	I/OP	742.56	668.30	284.25	222.77	284.25	8.82	284.25	668.30	594.05	566.92	705.43
279		84439	Blood Test, Free T4	I/OP	377.40	339.66	144.47	113.22	144.47	19.60	144.47	339.66	301.92	283.05	358.53
280		82728	Blood Test, Ferritin	I/OP	581.40	523.26	222.56	174.42	222.56	31.36	222.56	523.26	465.12	436.05	552.33
281		93308	Echocardiography, Transthoracic, Follow-Up Or Limited Study	I/OP	1477.98	1330.18	552.29	275.73	552.29	1177.11	552.29	1330.18	1182.38	1108.49	1404.08
282		86592	Syphilis Test	I/OP	95.88	86.29	36.70	28.76	36.70	2.94	36.70	86.29	76.70	71.91	91.09
283		83605	Blood Test, Lactic Acid	I/OP	956.76	861.08	366.25	287.03	366.25	29.40	366.25	861.08	765.41	717.57	908.92
284		84100	Blood Test, Phosphorus	I/OP	86.70	78.03	33.19	26.01	33.19	5.88	33.19	78.03	69.36	65.03	82.37
285		93017	Cardiovascular Stress Test	I/OP	1171.98	1054.78	711.49	355.21	711.49	798.66	711.49	1054.78	937.58	878.99	1113.38
286		76856	Ultrasound Of Pelvis	I/OP	627.30	564.57	242.96	121.30	242.96	129.36	242.96	564.57	501.84	470.48	595.94
287		70496	Ct Scan, Head Or Brain	I/OP	1725.84	1553.26	406.75	203.07	406.75	343.00	406.75	1553.26	1380.67	1294.38	1639.55
288		74170	Ct Scan, Abdomen With And Without Contrast	I/OP	4702.20	4231.98	406.75	203.07	406.75	269.50	406.75	4231.98	3761.76	3526.65	4467.09
289		70486	Ct Scan, Maxillofacial Without Contrast	I/OP	1183.20	1064.88	242.96	121.30	242.96	1064.88	242.96	1064.88	946.56	887.40	1124.04
290		71260	Ct Scan, Thorax With Contrast	I/OP	1623.84	1461.46	406.75	203.07	406.75	334.96	406.75	1461.46	1299.07	1217.88	1542.65
291		88341	Immunohistochemistry Or Immunocytochemistry, Per Specimen	I/OP	489.60	440.64	187.42	146.88	187.42	58.41	187.42	440.64	391.68	367.20	465.12
292		87077	Culture, Bacterial; Aerobic Isolate	I/OP	80.58	72.52	30.85	24.17	30.85	8.92	30.85	72.52	64.46	60.44	76.56
293		76937	Ultrasound Guided Vascular Access	I/OP	604.86	544.37	231.54	181.46	231.54	56.84	231.54	544.37	483.89	453.65	574.62
294		77001	Fluoroscopic Guidance For Vein Dvc	I/OP	492.66	443.39	188.59	147.80	188.59	56.13	188.59	443.39	394.13	369.50	468.03
295		83615	Lactate Dehydrogenase (Ld), (Ldh)	I/OP	82.62	74.36	31.63	24.79	31.63	8.23	31.63	74.36	66.10	61.97	78.49
296		85652	Sedimentation Rate, Erythrocyte, Automated	I/OP	62.22	56.00	23.82	18.67	23.82	4.43	23.82	56.00	49.78	46.67	59.11
297		82306	Gonadotropin, Chorionic (Hcg); Quantitative	I/OP	572.22	515.00	219.05	171.67	219.05	58.80	219.05	515.00	457.78	429.17	543.61
298		86803	Hepatitis C Antibody	I/OP	364.14	327.73	139.39	109.24	139.39	40.96	139.39	327.73	291.31	273.11	345.93
299		80202	Blood Test, Vancomycin	I/OP	192.78	173.50	73.80	57.63	73.80	23.52	73.80	173.50	154.22	144.59	183.14
300		86704	Hepatitis B Core Antibody (Hbcab); Total	I/OP	123.42	111.08	47.25	37.03	47.25	25.48	47.25	111.08	98.74	92.57	117.25
301		84484	Blood Test, Troponin	I/OP	195.84	176.26	74.97	58.75	74.97	77.62	74.97	176.26	156.67	146.86	186.05
302		84145	Procalcitonin (Pct)	I/OP	1095.48	985.93	419.35	328.64	419.35	29.73	419.35	985.93	876.38	821.61	1040.71
303		86140	C-Reactive Protein	I/OP	62.22	56.00	23.82	18.67	23.82	5.88	23.82	56.00	49.78	46.67	59.11
304		87340	Infectious Agent Antigen Detection, Hep B	I/OP	97.92	88.13	37.48	29.38	37.48	27.44	37.48	88.13	78.34	73.44	93.02

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Shoppable ID	N/A Indicator	Billing Code	Description	Location Provided	Gross Charge	United Healthcare	United Healthcare	United HealthCare:	United HealthCare:	Fidelis: Medicaid	Fidelis: Medicare	Minimum Negotiated Rate	Maximum Negotiated Rate	Discounted Cash Price
						Community Plan: Medicaid	Community Plan: Medicare	Commercial / PPO	Oxford					
1		85027	Complete Blood Count, Automated	IP/OP	34.68	5.18	6.47	Contact UH	Contact UH	5.18	6.47	5.18	32.95	7.44
2		80053	Blood Test, Comprehensive Group Of Blood Chemicals	IP/OP	205.02	8.45	10.56	Contact UH	Contact UH	8.45	10.56	8.45	194.77	12.14
3		80061	Blood Test, Lipids (Cholesterol And Triglycerides)	IP/OP	77.52	22.76	13.39	Contact UH	Contact UH	22.76	13.39	13.18	73.64	15.40
4		84153	Psa (Prostate Specific Antigen)	IP/OP	228.48	67.08	18.39	Contact UH	Contact UH	67.08	18.39	13.18	217.06	21.15
5		80076	Liver Function Blood Test Panel	IP/OP	72.42	6.54	8.17	Contact UH	Contact UH	6.54	8.17	6.54	68.80	9.40
6		70450	Ct Scan, Head Or Brain, Without Contrast	IP/OP	2535.72	744.49	121.30	Contact UH	Contact UH	744.49	121.30	121.30	2408.93	139.50
7		74177	Ct Scan Of Abdomen And Pelvis With Contrast	IP/OP	1623.84	476.76	407.38	Contact UH	Contact UH	476.76	407.38	196.54	1542.65	468.49
8		81001	Manual Urinalysis Test With Examination Using Microscope	IP/OP	38.76	11.38	3.17	Contact UH	Contact UH	11.38	3.17	3.17	36.82	3.65
9		76830	Ultrasound Pelvis Through Vagina	IP/OP	626.03	183.80	121.30	Contact UH	Contact UH	183.80	121.30	57.66	594.73	139.50
10		62323	Injection Of Substance Into Spinal Canal Of Lower Back Or Sacrum Using Imaging Guidance	IP/OP	3127.58	918.26	789.96	1871.51	1871.51	918.26	789.96	216.31	2971.20	908.45
11		85610	Blood Test, Clotting Time	IP/OP	15.30	3.43	4.29	Contact UH	Contact UH	3.43	4.29	3.43	14.54	4.93
12		85730	Coagulation Assessment Blood Test	IP/OP	20.40	4.81	6.01	Contact UH	Contact UH	4.81	6.01	4.81	19.38	6.91
13		80048	Basic Metabolic Panel	IP/OP	162.18	6.77	8.46	Contact UH	Contact UH	6.77	8.46	6.77	154.07	9.73
14		72193	Ct Scan, Pelvis, With Contrast	IP/OP	1755.42	515.39	203.07	Contact UH	Contact UH	515.39	203.07	192.82	1667.65	233.53
15		93452	Insertion Of Catheter Into Left Heart For Diagnosis	OP	14680.04	4313.00	3668.96	6552.86	6552.86	4313.00	3668.96	1222.42	13965.54	4219.30
16		76700	Ultrasound Of Abdomen	IP/OP	1105.68	324.63	121.30	Contact UH	Contact UH	324.63	121.30	70.68	1050.40	139.50
17		73721	Mri Scan Of Leg Joint	IP/OP	1879.86	551.93	275.73	Contact UH	Contact UH	551.93	275.73	275.73	1785.87	317.09
18		59400	Routine Obstetric Care For Vaginal Delivery, Including Pre-And Post-Delivery Care	IP/OP	8470.08	2486.82	N/A	Contact UH	Contact UH	2486.82	N/A	1331.10	8046.58	T.B.D
19		77067	Mammography, Screening, Bilateral	IP/OP	541.62	159.02	N/A	Contact UH	Contact UH	159.02	N/A	37.20	514.54	T.B.D
20		43239	Biopsy Of The Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope	IP/OP	3269.10	959.81	1069.47	2567.79	2567.79	959.81	1069.47	523.46	3105.65	1229.89
21		43235	Diagnostic Examination Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope	IP/OP	3269.10	959.81	1069.47	2567.79	2567.79	959.81	1069.47	300.00	3105.65	1229.89
22		72110	X-Ray, Lower Back, Minimum Four Views	IP/OP	403.92	118.59	121.30	Contact UH	Contact UH	118.59	121.30	31.00	383.72	139.50
23		64483	Injections Of Anesthetic And/Or Steroid Drug Into Lower Or Sacral Spine Nerve Root Using Imaging	IP/OP	3169.12	930.16	1015.55	1871.51	1871.51	930.16	1015.55	300.00	3009.71	1167.88
24		45385	Removal Of Polyps Or Growths Of Large Bowel Using An Endoscope	IP/OP	2984.52	876.26	1344.98	2567.79	2567.79	876.26	1344.98	550.00	2835.29	1546.73
25		77066	Mammography Of Both Breasts	IP/OP	541.62	159.02	N/A	Contact UH	Contact UH	159.02	N/A	48.98	514.54	T.B.D
26		45380	Biopsy Of Large Bowel Using An Endoscope	OP	2984.52	876.26	1344.98	2567.79	2567.79	876.26	1344.98	522.52	2835.29	1546.73
27		49505	Repair Of Groin Hernia Patient Age 5 Years Or Older	OP	8993.34	2640.44	4025.60	3596.76	3596.76	2640.44	4025.60	528.63	8543.67	4629.44
28		97110	Physical Therapy, Therapeutic Exercise	IP/OP	165.24	48.51	N/A	Contact UH	Contact UH	48.51	N/A	15.50	156.98	T.B.D
29		70553	Mri Scan Of Brain Before And After Contrast	IP/OP	10027.62	2944.11	407.38	Contact UH	Contact UH	2944.11	407.38	407.38	9526.24	468.49
30		81002	Automated Urinalysis Test	IP/OP	23.46	2.78	3.48	Contact UH	Contact UH	2.78	3.48	1.96	22.29	4.00
31		66821	Removal Of Recurring Cataract In Lens Capsule Using Laser	OP	1973.70	579.48	625.79	1871.51	1871.51	579.48	625.79	394.11	1875.02	719.66
32		72148	Mri Scan Of Lower Spinal Canal	IP/OP	1446.36	424.65	275.73	Contact UH	Contact UH	424.65	275.73	1374.04	317.09	317.09
33		90832	Psychotherapy, 30 Min	OP	542.64	159.32	183.28	Contact UH	Contact UH	159.32	183.28	68.21	515.51	210.77
34		55700	Biopsy Of Prostate Gland	OP	8650.88	2539.90	2336.74	2567.79	2567.79	2539.90	2336.74	109.62	8218.34	2687.25
35		45391	Ultrasound Examination Of Lower Large Bowel Using An Endoscope	OP	4146.30	1217.35	1344.98	2567.79	2567.79	1217.35	1344.98	497.15	3938.99	1546.73
36		77065	Mammography Of One Breast	IP/OP	541.62	159.02	N/A	Contact UH	Contact UH	159.02	N/A	38.44	514.54	T.B.D
37		19120	Removal Of 1 Or More Breast Growth, Open Procedure	OP	12774.48	3750.59	4368.06	2859.28	2859.28	3750.59	4368.06	469.30	12135.76	5023.27
38		90834	Psychotherapy, 45 Min	OP	542.64	159.32	183.28	Contact UH	Contact UH	159.32	183.28	90.26	515.51	210.77
39		90837	Psychotherapy, 60 Min	OP	542.64	159.32	183.28	Contact UH	Contact UH	159.32	183.28	90.26	515.51	210.77
40		85025	Complete Blood Cell Count, With Differential White Blood Cells, Automated	IP/OP	44.88	13.18	7.77	Contact UH	Contact UH	13.18	7.77	7.49	42.64	8.94
41		84443	Blood Test, Thyroid Stimulating Hormone (Tsh)	IP/OP	637.50	187.17	16.80	Contact UH	Contact UH	187.17	16.80	11.68	605.63	19.32
42		90853	Group Psychotherapy	OP	284.58	83.55	105.51	Contact UH	Contact UH	83.55	105.51	27.50	270.35	121.34
43		45378	Diagnostic Examination Of Large Bowel Using An Endoscope	IP/OP	2984.52	876.26	1039.99	2567.79	2567.79	876.26	1039.99	433.52	2835.29	1195.99
44		90846	Family Psychotherapy, Not Including Patient, 50 Min	OP	472.59	138.75	183.28	Contact UH	Contact UH	138.75	183.28	24.50	448.96	210.77
45		90847	Family Psychotherapy, Including Patient, 50 Min	OP	472.59	138.75	183.28	Contact UH	Contact UH	138.75	183.28	113.94	448.96	210.77
46		99203	New Patient Office Or Other Outpatient Visit, Typically 30 Min	OP	306.00	89.84	N/A	Contact UH	Contact UH	89.84	N/A	61.14	290.70	T.B.D
47		99204	New Patient Office Of Other Outpatient Visit, Typically 45 Min	OP	469.20	137.76	N/A	Contact UH	Contact UH	137.76	N/A	92.31	445.74	T.B.D
48		99205	New Patient Office Of Other Outpatient Visit, Typically 60 Min	OP	581.40	170.70	N/A	Contact UH	Contact UH	170.70	N/A	115.60	553.33	T.B.D
49		99243	Patient Office Consultation, Typically 40 Min	OP	346.80	101.82	N/A	Contact UH	Contact UH	101.82	N/A	64.70	329.46	T.B.D
50		42820	Removal Of Tonsils And Adenoid Glands Patient Younger Than Age 12	OP	17358.48	5095.45	6747.99	2859.28	2859.28	5095.45	6747.99	309.29	16490.56	7760.19
51		47562	Removal Of Gallbladder Using An Endoscope	OP	17103.00	5021.44	6655.25	4843.06	4843.06	5021.44	6655.25	591.92	16247.85	7653.54
52		55866	Surgical Removal Of Prostate And Surrounding Lymph Nodes Using An Endoscope	OP	30511.94	8958.31	11876.08	6018.29	6018.29	8958.31	11876.08	800.00	28986.34	13657.49
53		59510	Routine Obstetric Care For Cesarean Delivery, Including Pre-And Post-Delivery Care	IP/OP	3020.12	886.71	N/A	Contact UH	Contact UH	886.71	N/A	886.71	2869.11	T.B.D
54		59610	Routine Obstetric Care For Vaginal Delivery After Prior Cesarean Delivery Including Pre-And Post-Del	IP/OP	9263.64	2719.80	N/A	Contact UH	Contact UH	2719.80	N/A	2719.80	8800.46	T.B.D
55		66994	Removal Of Cataract With Insertion Of Lens	OP	6907.51	2028.04	2601.63	2859.28	2859.28	2028.04	2601.63	1338.93	6562.13	2991.87
56	N/A	DRG - 460	Spinal Fusion Except Cervical Without Major Comorbid Conditions Or Complications (Mcc)	IP	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	T.B.D
57	DRG - 470	Major Joint Replacement Or Reattachment Of Lower Extremity Without Major Comorbid Conditions Or	IP	N/A	N/A	33117.28	34473.30	33626.51	N/A	33117.28	33117.28	34473.30	33117.28	33117.28
58	DRG - 473	Cervical Spinal Fusion Without Comorbid Conditions (Cc) Or Major Comorbid Conditions Or Complica	IP	N/A	N/A	41914.68	43630.91	42559.18	N/A	41914.68	41914.68	43630.91	41914.68	41914.68
59	DRG - 743	Uterine And Adnexa Procedures For Non-Malignancy Without Comorbid Conditions (Cc) Or Major Con	IP	N/A	N/A	21301.58	22173.79	21629.12	N/A	21301.58	21301.58	22173.79	21301.58	21301.58
60		29826	Shaving Of Shoulder Bone Using An Endoscope	OP	189.19	55.55	N/A	1835.46	1835.46	55.55	N/A	55.55	1835.46	T.B.D
61		29881	Removal Of One Knee Cartilage Using An Endoscope	OP	9594.42	2816.92	3701.13	3596.76	3596.76	2816.92	3701.13	741.24	9114.70	4256.30
62		99244	Patient Office Consultation, Typically 60 Min	OP	520.20	152.73	N/A	Contact UH	Contact UH	152.73	N/A	91.10	494.19	T.B.D
63		99385	Initial New Patient Preventive Medicine Evaluation (18-39 Years)	OP	377.40	110.80	N/A	Contact UH	Contact UH	110.80	N/A	84.30	358.53	T.B.D
64		99386	Initial New Patient Preventive Medicine Evaluation (40-64 Years)	OP	428.40	125.78	N/A	Contact UH	Contact UH	125.78	N/A	84.30	406.98	T.B.D
65	N/A	80055	Obstetric Blood Test Panel	OP	N/A	N/A	N/A	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	N/A	N/A	N/A	N/A	T.B.D
67	N/A	DRG - 216	Cardiac Valve And Other Major Cardiothoracic Procedures With Cardiac Catheterization With Major C	IP	N/A	N/A	167960.89	174838.20	170543.55	N/A	167960.89	78485.00	174838.20	167960.89
68		93000	Electrocardiogram, Routine, With Interpretation And Report	OP	16.39	4.81	N/A	Contact UH	Contact UH	4.81	N/A	4.81	229.68	T.B.D
69		95810	Sleep Study	OP	3099.12	909.90	1160.54	Contact UH	Contact UH	909.90	1160.54	380.00	3928.05	1334.62

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Shoppable ID	N/A Indicator	Billing Code	Description	Location Provided	Gross Charge	United Healthcare	United Healthcare	United HealthCare:	United HealthCare:	Fidelis: Medicaid	Fidelis: Medicare	Minimum Negotiated Rate	Maximum Negotiated Rate	Discounted Cash Price	
						Community Plan: Medicaid	Community Plan: Medicare	Commercial / PPO	Oxford						
70		76805	Abdominal Ultrasound Of Pregnant Uterus (Greater Or Equal To 14 Weeks 0 Days) Single Or First Fe	IP/OP	487.76	146.14	121.30	Contact UH	Contact UH	146.14	121.30	62.00	472.87	139.50	
71		86480	Tuberculosis Test	IP/OP	562.02	49.58	61.98	Contact UH	Contact UH	49.58	61.98	49.58	533.92	71.28	
72		83735	Blood Test, Magnesium	IP/OP	130.56	5.36	6.70	Contact UH	Contact UH	5.36	6.70	5.36	124.03	7.71	
73		DRG - 115	Extraocular Procedures Except Orbit	IP	N/A	N/A	26352.70	27431.73	26757.91	N/A	26352.70	26352.70	27431.73	26352.70	
74		DRG - 117	Intraocular Procedures Without Complications	IP	N/A	N/A	18626.65	19389.33	18913.06	N/A	18626.65	18626.65	19389.33	18626.65	
75		DRG - 788	Cesarean Section Without Sterilization Without Complications	IP	N/A	N/A	16461.64	11083.00	10212.00	N/A	16461.64	8487.00	16461.64	16461.64	
76		DRG - 906	Hand Procedures For Injuries	IP	N/A	N/A	30258.65	31497.61	30723.92	N/A	30258.65	30258.65	31497.61	30258.65	
77		DRG - 482	Hipand Femur Procedures Except Major Joint Without Complications	IP	N/A	N/A	28002.64	29149.23	28433.22	N/A	28002.64	28002.64	29149.23	28002.64	
78		DRG - 494	Lower Extremity And Humerus Procedures Except Hip, Foot And Femur Without Complications	IP	N/A	N/A	34449.60	35860.17	34979.31	N/A	34449.60	34449.60	35860.17	34449.60	
79		DRG - 502	Soft Tissue Procedures Without Complications	IP	N/A	N/A	23107.76	24053.92	23463.07	N/A	23107.76	23107.76	24053.92	23107.76	
80		DRG - 505	Foot Procedures W/O CoMcc	IP	N/A	N/A	30780.58	32040.92	31253.88	N/A	30780.58	32040.92	30780.58	32040.92	
81		DRG - 512	Shoulder, Elbow Or Forearm Procedures, Except Major Joint Procedures Without Complications	IP	N/A	N/A	28421.56	29585.31	28858.59	N/A	28421.56	28421.56	29585.31	28421.56	
82		DRG - 660	Kidney And Ureter Procedures For Non-Neoplasm With Complications	IP	N/A	N/A	22692.27	23621.42	23041.20	N/A	22692.27	22692.27	23621.42	22692.27	
83		DRG - 142	Major Head And Neck Procedures Without Complications	IP	N/A	N/A	27408.59	28530.86	27830.04	N/A	27408.59	27408.59	28530.86	27408.59	
84		DRG - 250	Percutaneous Cardiovascular Procedures With Coronary Artery Stent	IP	N/A	N/A	37471.34	39005.64	38047.52	N/A	37471.34	39005.64	37471.34	37471.34	
85		DRG - 329	Major Small And Large Bowel Procedures With Major Comp	IP	N/A	N/A	78917.31	82148.65	80130.78	N/A	78917.31	82148.65	78917.31	78917.31	
86		DRG - 355	Hernia Procedures Except Inguinal And Femoral Without Complications	IP	N/A	N/A	23092.31	24037.84	23447.39	N/A	23092.31	24037.84	23092.31	23092.31	
87		DRG - 419	Laparoscopic Cholecystectomy Without C.D.E. Without Complications	IP	N/A	N/A	23449.42	24409.58	23809.99	N/A	23449.42	23449.42	24409.58	23449.42	
88		DRG - 479	Biopsies Of Musculoskeletal System And Connective Tissue Without Complications	IP	N/A	N/A	31915.45	33222.26	32406.20	N/A	31915.45	33222.26	31915.45	31915.45	
89		DRG - 448	Multiple Level Spinal Fusion Except Cervical Without Mcc	IP	N/A	N/A	72810.30	75791.58	73929.87	N/A	72810.30	72810.30	75791.58	72810.30	
90		DRG - 451	Single Level Spinal Fusion Except Cervical Without Mcc	IP	N/A	N/A	55462.74	57733.71	56315.56	N/A	55462.74	55462.74	57733.71	55462.74	
91		72131	Ct Scan, Lumbar Spine	IP/OP	734.40	215.62	121.30	Contact UH	Contact UH	215.62	121.30	121.30	697.68	139.50	
92		87491	Infectious Agent Detection, Chlamydia Trachomatis	IP/OP	365.16	28.07	35.09	Contact UH	Contact UH	28.07	35.09	23.66	346.90	40.35	
93		73700	Ct Scan, Lower Extremities	IP/OP	1819.68	534.26	121.30	Contact UH	Contact UH	534.26	121.30	1728.70	139.50	139.50	
94		73630	X-Ray, Foot	IP/OP	831.30	244.07	100.44	Contact UH	Contact UH	244.07	100.44	17.98	789.74	115.51	
95		73560	X-Ray, Knee	IP/OP	803.25	235.83	100.44	Contact UH	Contact UH	235.83	100.44	16.74	763.09	115.51	
96		72190	X-Ray, Pelvis, 3 Views	IP/OP	407.35	119.60	121.30	Contact UH	Contact UH	119.60	121.30	22.32	386.98	139.50	
97		92557	Comprehensive Audiometry Threshold Evaluation And Speech Recognition	IP/OP	542.64	159.32	178.47	Contact UH	Contact UH	159.32	178.47	65.00	515.51	205.24	
98		76512	Ophthalmic Ultrasound, Diagnostic, B-Scan With And Without Quant. A	IP/OP	402.90	118.29	121.30	Contact UH	Contact UH	118.29	121.30	56.42	382.76	139.50	
99		70355	X-Ray, Jaws, Panoramic	IP/OP	325.38	95.53	100.44	Contact UH	Contact UH	95.53	100.44	22.94	309.11	115.51	
100		96415	Chemotherapy Administration, Intravenous Infusion Technique	IP/OP	252.96	74.27	81.18	Contact UH	Contact UH	74.27	81.18	27.00	362.79	93.36	
101		96367	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis; Additional Sequential Infusion Of A New	IP/OP	252.96	74.27	81.18	Contact UH	Contact UH	74.27	81.18	46.88	240.31	93.36	
102		70498	Ct Scan, Neck	IP/OP	1693.20	497.12	203.07	Contact UH	Contact UH	497.12	203.07	203.07	1608.54	233.53	
103		76376	3D Rendering With Interpretation And Post Process Supervision	IP/OP	287.64	84.45	N/A	Contact UH	Contact UH	84.45	N/A	84.45	273.26	T.B.D	
104		92567	Tympanometry	OP	416.16	122.18	44.77	Contact UH	Contact UH	122.18	44.77	25.00	395.35	51.49	
105		92235	Fluorescein Angiography	OP	1043.46	306.36	355.21	Contact UH	Contact UH	306.36	355.21	53.03	991.29	408.49	
106		76815	Abdominal Ultrasound Of Pregnant Uterus	IP/OP	545.70	160.22	121.30	Contact UH	Contact UH	160.22	121.30	53.32	518.42	139.50	
107		96368	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis; Concurrent Infusion	IP/OP	155.04	45.52	N/A	Contact UH	Contact UH	45.52	N/A	29.23	147.29	T.B.D	
108		90472	Immunization Administration	IP/OP	174.42	51.21	N/A	Contact UH	Contact UH	51.21	N/A	28.71	165.70	T.B.D	
109		92603	Diagnostic Analysis Of Cochlear Implant, Age 7 Years Or Older; With Programming	OP	542.64	159.32	178.47	Contact UH	Contact UH	159.32	178.47	48.00	515.51	205.24	
110		92250	Fundus Photography With Interpretation And Report	OP	432.48	126.98	147.04	Contact UH	Contact UH	126.98	147.04	25.88	410.86	169.10	
111		96523	Irrigation Of Implanted Venous Access Device	IP/OP	215.22	63.19	67.76	Contact UH	Contact UH	63.19	67.76	25.00	204.46	77.92	
112		90746	Hepatitis B Vaccine (Hepb), Adult Dosage, 3 Dose Schedule, For Intramuscular Use	IP/OP	254.71	74.78	75.15	181.23	Contact UH	181.23	74.78	75.15	61.05	241.97	86.42
113		89051	Cell Count, Miscellaneous Body Fluids	IP/OP	103.02	30.25	5.60	Contact UH	Contact UH	30.25	5.60	1.76	97.87	6.44	
114		73590	X-Ray, Lower Leg	IP/OP	773.93	227.23	100.44	Contact UH	Contact UH	227.23	100.44	17.98	735.23	115.51	
115		72170	X-Ray, Pelvis, 1-2 Views	IP/OP	407.35	119.60	121.30	Contact UH	Contact UH	119.60	121.30	16.74	386.98	139.50	
116		73070	X-Ray, Elbow	IP/OP	770.10	226.10	100.44	Contact UH	Contact UH	226.10	100.44	17.98	731.60	115.51	
117		72125	Ct Scan, Neck Spine Without Contrast	IP/OP	1343.34	394.40	121.30	Contact UH	Contact UH	394.40	121.30	121.30	1276.17	139.50	
118		73030	X-Ray, Shoulder	IP/OP	761.18	223.48	100.44	Contact UH	Contact UH	223.48	100.44	19.22	723.12	115.51	
119		73060	X-Ray, Humerus	IP/OP	771.38	226.48	100.44	Contact UH	Contact UH	226.48	100.44	18.60	732.81	115.51	
120		72100	X-Ray, Lumbar Spine, 2-3 Views	IP/OP	592.88	174.07	121.30	Contact UH	Contact UH	174.07	121.30	22.94	563.24	139.50	
121		73120	Hepatitis B Surface Antibody (Hbsab)	IP/OP	655.35	192.41	121.30	Contact UH	Contact UH	192.41	121.30	16.74	622.58	139.50	
122		73610	X-Ray, Ankle	IP/OP	300.90	88.34	100.44	Contact UH	Contact UH	88.34	100.44	17.98	285.86	115.51	
123		73110	X-Ray, Wrist	IP/OP	465.38	136.64	100.44	Contact UH	Contact UH	136.64	100.44	17.98	442.11	115.51	
124		73090	X-Ray, Forearm	IP/OP	770.10	226.10	100.44	Contact UH	Contact UH	226.10	100.44	18.60	731.60	115.51	
125		93312	Echocardiography, Transesophageal	IP/OP	2769.30	813.07	625.45	Contact UH	Contact UH	813.07	625.45	225.00	2630.84	719.27	
126		97140	Manual Therapy Techniques, 1 Or More Regions, Each 15 Minutes	IP/OP	215.22	63.19	N/A	Contact UH	Contact UH	63.19	N/A	12.06	204.46	T.B.D	
127		92611	Motion Fluoroscopic Evaluation Of Swallowing Function By Cine Or Video Recording	IP/OP	1018.98	299.17	N/A	Contact UH	Contact UH	299.17	N/A	77.00	968.03	T.B.D	
128		73562	X-Ray, Knee, 3 Views	IP/OP	323.85	95.08	100.44	Contact UH	Contact UH	95.08	100.44	19.22	307.66	115.51	
129		96374	Therapeutic, Prophylactic, Or Diagnostic Injection; Intravenous Push, Single Or Initial Substance/Drug	IP/OP	765.00	224.60	240.33	Contact UH	Contact UH	224.60	240.33	25.30	726.75	276.38	
130		92950	Cardiopulmonary Resuscitation	IP/OP	1402.50	411.77	355.21	1835.46	Contact UH	1835.46	411.77	116.00	1835.46	408.49	
131		77386	Intensity Modulated Radiation Therapy Delivery Complex	IP/OP	2433.72	714.54	659.86	Contact UH	Contact UH	714.54	659.86	352.84	2312.03	758.84	
132		93990	Duplex Scan Of Hemodialysis Access	IP/OP	397.80	116.79	121.30	Contact UH	Contact UH	116.79	121.30	110.00	819.54	139.50	
133		93926	Duplex Scan Of Lower Extremity Arteries Or Arterial Bypass Grafts; Unilateral Or Limited Study	IP/OP	397.80	116.79	121.30	Contact UH	Contact UH	116.79	121.30	116.79	571.59	139.50	
134		84703	Blood Test, Human Chorionic Gonadotropin (Hog)	IP/OP	179.52	6.02	7.52	Contact UH	Contact UH	6.02	7.52	5.88	170.54	8.65	
135		93978	Duplex Scan Of Aorta, Inferior Vena Cava, Iliac Vasculature, Or Bypass Grafts; Complete Study	IP/OP	915.96	268.93	275.73	Contact UH	Contact UH	268.93	275.73	180.00	1044.00	317.09	
136		93925	Duplex Scan Of Lower Extremity Arteries Or Arterial Bypass Grafts; Complete Bilateral Study	IP/OP	870.06	255.45	275.73	Contact UH	Contact UH	255.45	275.73	175.00	936.99	317.09	
137		92587	Distortion Product Evoked Otoacoustic Emissions	IP/OP	1044.48	306.66	355.21	Contact UH	Contact UH	306.66	355.21	48.00	992.26	408.49	
138		92134	Scanning Computerized Ophthalmic Diagnostic Imaging, Posterior Segment, Retina	IP/OP	224.40	65.88	67.76	Contact UH	Contact UH	65.88	67.76	16.10	213.18	77.92	

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Shoppable ID	N/A Indicator	Billing Code	Description	Location Provided	Gross Charge	United Healthcare	United Healthcare	United HealthCare:	United HealthCare:	Fidelis: Medicaid	Fidelis: Medicare	Minimum Negotiated Rate	Maximum Negotiated Rate	Discounted Cash Price
						Community Plan: Medicaid	Community Plan: Medicare	Commercial / PPO	Oxford					
139		96411	Chemotherapy Administration; Intravenous, Push Technique, Each Additional Substance/Drug	OP	387.60	113.80	81.18	Contact UH	Contact UH	113.80	81.18	52.00	850.86	93.36
140		82805	Blood Gasses With O2 Saturation	IP/OP	504.90	63.02	78.77	Contact UH	Contact UH	63.02	78.77	29.05	479.66	90.59
141		94664	Demonstration And/Or Evaluation Of Patient Utilization Of An Aerosol Generator, Nebulizer, Metered	IP/OP	803.76	235.98	232.01	Contact UH	Contact UH	235.98	232.01	16.00	763.57	266.81
142		94667	Manipulation Chest Wall	IP/OP	515.10	151.23	147.04	Contact UH	Contact UH	151.23	147.04	15.00	489.35	169.10
143		94660	Continuous Positive Airway Pressure Ventilation (Cpap)	IP/OP	769.08	225.80	232.01	Contact UH	Contact UH	225.80	232.01	60.00	730.63	266.81
144		95816	Electroencephalogram (Eeg)	IP/OP	1058.76	310.85	355.21	Contact UH	Contact UH	310.85	355.21	71.00	1005.82	408.49
145		97597	Debridement	IP/OP	726.24	213.22	226.66	1835.46	1835.46	213.22	226.66	213.22	1835.46	260.66
146		90651	Hpv Vaccine	IP/OP	1129.08	331.50	N/A	Contact UH	Contact UH	331.50	N/A	200.63	1072.63	T.B.D
147		96413	Chemotherapy Administration, Intravenous Infusion Technique; Up To 1 Hour	IP/OP	1239.30	363.86	378.36	Contact UH	Contact UH	363.86	378.36	27.00	1177.34	435.11
148		92570	Acoustic Immittance Testing	OP	542.64	159.32	178.47	Contact UH	Contact UH	159.32	178.47	25.00	515.51	205.24
149		92133	Scanning Computerized Ophthalmic Diagnostic Imaging, Optic Nerve	OP	224.40	65.88	67.76	Contact UH	Contact UH	65.88	67.76	16.10	213.18	77.92
150		90675	Rabies Vaccine, For Intramuscular Use	IP/OP	1592.94	467.69	319.75	836.21	836.21	467.69	319.75	310.08	1513.29	367.71
151		96417	Chemotherapy Administration, Intravenous Infusion Technique	IP/OP	252.96	74.27	81.18	Contact UH	Contact UH	74.27	81.18	27.00	589.86	93.36
152		92083	Visual Field Examination	IP/OP	432.48	126.98	147.04	Contact UH	Contact UH	126.98	147.04	99.81	410.86	169.10
153		92136	Ophthalmic Biometry	OP	432.48	126.98	147.04	Contact UH	Contact UH	126.98	147.04	104.40	410.86	169.10
154		96401	Chemotherapy Administration, Subcutaneous Or Intramuscular; Non-Hormonal Anti-Neoplastic	IP/OP	501.84	147.34	81.18	Contact UH	Contact UH	147.34	81.18	5.00	476.75	93.36
155		96402	Chemotherapy Administration, Subcutaneous Or Intramuscular; Hormonal Anti-Neoplastic	OP	315.18	92.54	81.18	Contact UH	Contact UH	92.54	81.18	5.00	299.42	93.36
156		90734	Meningococcal Conjugate Vaccine	IP/OP	288.67	84.75	N/A	Contact UH	Contact UH	84.75	N/A	84.75	274.24	T.B.D
157		96365	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis; Initial, Up To 1 Hour	IP/OP	829.26	243.47	240.33	Contact UH	Contact UH	243.47	240.33	97.25	787.80	276.38
158		90670	Pneumococcal Conjugate Vaccine, 13 Valent (Pcv13), For Intramuscular Use	IP/OP	856.98	251.61	N/A	664.33	664.33	251.61	N/A	176.11	814.13	T.B.D
159		77336	Continuing Medical Physics Consultation	IP/OP	1491.24	437.83	151.45	Contact UH	Contact UH	437.83	151.45	21.00	1416.68	174.17
160		92602	Diagnostic Analysis Of Cochlear Implant, Patient Younger Than 7 Yrs Of Age; Subsequent Reprogram	OP	542.64	159.32	178.47	Contact UH	Contact UH	159.32	178.47	48.00	608.13	205.24
161		92025	Computerized Corneal Topography	OP	215.22	63.19	67.76	Contact UH	Contact UH	63.19	67.76	63.19	204.46	77.92
162		93923	Complete Bilateral Noninvasive Physiologic Studies Of Upper Or Lower Extremity Arteries, 3 Or More	IP/OP	1025.10	300.97	178.47	Contact UH	Contact UH	300.97	178.47	140.00	973.85	205.24
163		82948	Glucose Test	IP/OP	44.73	13.13	5.04	Contact UH	Contact UH	13.13	5.04	2.94	42.49	5.80
164		94150	Vital Capacity, Total (Separate Procedure)	IP/OP	577.32	169.50	178.47	Contact UH	Contact UH	169.50	178.47	11.00	548.45	205.24
165		94060	Bronchodilation Responsiveness	IP/OP	1043.46	306.36	355.21	Contact UH	Contact UH	306.36	355.21	49.00	991.29	408.49
166		90732	Pneumococcal Polysaccharide Vaccine	IP/OP	429.93	126.23	133.47	343.70	343.70	126.23	133.47	93.71	408.43	153.49
167		92584	Electrocochleography	OP	998.58	293.18	178.47	Contact UH	Contact UH	293.18	178.47	77.00	948.65	205.24
168		92550	Tympanometry And Reflex Threshold Measurements	OP	542.64	159.32	178.47	Contact UH	Contact UH	159.32	178.47	25.00	515.51	205.24
169		92626	Evaluation Of Auditory Function, First Hour	OP	542.64	159.32	178.47	Contact UH	Contact UH	159.32	178.47	25.00	515.51	205.24
170		92579	Visual Reinforcement Audiometry (Vra)	IP/OP	937.38	275.21	178.47	Contact UH	Contact UH	275.21	178.47	65.00	890.51	205.24
171		92582	Conditioning Play Audiometry	OP	937.38	275.21	178.47	Contact UH	Contact UH	275.21	178.47	65.00	890.51	205.24
172		90686	Influenza Virus Vaccine	IP/OP	71.99	21.14	N/A	57.56	57.56	21.14	N/A	68.39	T.B.D	T.B.D
173		92604	Diagnostic Analysis Of Cochlear Implant, Age 7 Yrs Or Older	OP	542.64	159.32	178.47	Contact UH	Contact UH	159.32	178.47	48.00	515.51	205.24
174		90715	Tetanus, Diphtheria Toxoids And Acellular Pertussis Vaccine (Tdap), 7 Years+	IP/OP	348.51	102.32	39.69	Contact UH	Contact UH	102.32	39.69	39.69	331.08	45.64
175		86901	Blood Typing Rhd	IP/OP	186.66	54.80	2.99	Contact UH	Contact UH	54.80	2.99	2.99	177.33	3.44
176		93922	Limited Bilateral Noninvasive Physiologic Studies Of Upper Or Lower Extremity Arteries	IP/OP	546.72	160.52	147.04	Contact UH	Contact UH	160.52	147.04	85.00	574.20	169.10
177		36415	Routine Venipuncture	IP/OP	61.20	4.55	9.34	Contact UH	Contact UH	4.55	9.34	1.00	58.14	10.74
178		92610	Evaluation Of Oral And Pharyngeal Swallowing Function	IP/OP	270.30	79.36	N/A	Contact UH	Contact UH	79.36	N/A	77.00	256.79	T.B.D
179		92522	Evaluation Of Speech Sound Production	IP/OP	579.36	170.10	N/A	Contact UH	Contact UH	170.10	N/A	48.00	550.39	T.B.D
180		93880	Duplex Scan Of Extracranial Arteries; Complete Bilateral Study	IP/OP	877.20	257.55	275.73	Contact UH	Contact UH	257.55	275.73	185.00	973.53	317.09
181		97802	Medical Nutrition Therapy	OP	107.10	31.44	N/A	Contact UH	Contact UH	31.44	N/A	31.44	101.75	T.B.D
182		86703	Antibody; Hiv-1 And Hiv-2, Single Result	IP/OP	77.52	10.97	13.71	Contact UH	Contact UH	10.97	13.71	10.97	73.64	15.77
183		93970	Duplex Scan Of Extremity Veins; Complete Bilateral Study	IP/OP	872.10	256.05	275.73	Contact UH	Contact UH	256.05	275.73	185.00	1177.11	317.09
184		96376	Therapeutic, Prophylactic, Or Diagnostic Injection Sequential Intravenous Push Of The Same Substan	IP/OP	223.38	65.58	N/A	Contact UH	Contact UH	65.58	N/A	6.04	212.21	T.B.D
185		90744	Hepatitis B Vaccine (Hepb), Pediatric/Adolescent Intravenous Push Of The Same Substan	IP/OP	84.18	24.72	33.20	79.24	79.24	24.72	33.20	24.72	86.03	38.18
186		93971	Duplex Scan Of Extremity Veins, Unilateral Or Limited Study	IP/OP	397.80	116.79	121.30	Contact UH	Contact UH	116.79	121.30	116.79	1137.96	139.50
187		96471	Immunization Administration	IP/OP	248.88	73.07	81.18	Contact UH	Contact UH	73.07	81.18	49.59	236.44	93.36
188		90632	Hepatitis A Vaccine (Hepaa), Adult Dosage, For Intramuscular Use	IP/OP	270.35	79.37	73.54	Contact UH	Contact UH	79.37	73.54	70.72	256.83	84.57
189		99153	Mod Sedation Services Provided By The Same Physician	OP	369.24	108.41	N/A	Contact UH	Contact UH	108.41	N/A	16.83	350.78	T.B.D
190		93303	Transthoracic Echocardiography	IP/OP	2847.84	836.13	625.45	Contact UH	Contact UH	836.13	625.45	160.00	2705.45	719.27
191		73552	X-Ray, Femur, 2 Views	IP/OP	369.75	108.56	100.44	Contact UH	Contact UH	108.56	100.44	19.84	351.26	115.51
192		96372	Therapeutic, Prophylactic, Or Diagnostic Injection; Subcutaneous Or Intramuscular	IP/OP	195.84	57.50	81.18	Contact UH	Contact UH	57.50	81.18	7.97	186.05	93.36
193		95851	Range Of Motion Measurements And Report	IP/OP	118.32	34.74	N/A	Contact UH	Contact UH	34.74	N/A	34.74	112.40	T.B.D
194		77300	Basic Radiation Dosimetry Calculation	IP/OP	672.18	197.35	151.45	Contact UH	Contact UH	197.35	151.45	43.00	638.57	174.17
195		96366	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis, Each Additional Hour	IP/OP	264.18	77.56	52.63	Contact UH	Contact UH	77.56	52.63	31.48	260.97	60.52
196		94761	Noninvasive Ear Or Pulse Oximetry For Oxygen Saturation; Multiple Determinations	IP/OP	390.66	114.70	N/A	Contact UH	Contact UH	114.70	N/A	26.00	371.13	T.B.D
197		94640	Inhalation Therapy	IP/OP	664.02	194.96	232.01	Contact UH	Contact UH	194.96	232.01	16.00	630.82	266.81
198		77412	Radiation Therapy Delivery	IP/OP	931.26	273.42	299.98	Contact UH	Contact UH	273.42	299.98	80.36	884.70	344.98
199		77063	Screening Digital Breast Tomosynthesis, Bilateral	IP/OP	541.62	159.02	N/A	Contact UH	Contact UH	159.02	N/A	6.20	514.54	T.B.D
200		87591	Infectious Agent Detection, Neisseria Gonorrhoeae	IP/OP	365.16	28.07	35.09	Contact UH	Contact UH	28.07	35.09	2.06	346.90	40.35
201		97535	Self-Care/Home Management Training	IP/OP	215.22	63.19	N/A	Contact UH	Contact UH	63.19	N/A	15.00	204.46	T.B.D
202		70551	Mri, Brain Without Contrast	IP/OP	5737.50	1684.53	275.73	Contact UH	Contact UH	1684.53	275.73	275.73	5450.63	317.09
203		97162	Physical Therapy Evaluation, Complex, 30 Minutes	IP/OP	390.66	114.70	N/A	Contact UH	Contact UH	114.70	N/A	32.34	371.13	T.B.D
204		92507	Therapy Speech And/Or Auditory	IP/OP	235.62	69.18	N/A	Contact UH	Contact UH	69.18	N/A	25.58	223.84	T.B.D
205		92612	Flexible Endoscopic Evaluation Of Swallowing By Cine Or Video Recording	IP/OP	977.16	286.89	N/A	Contact UH	Contact UH	286.89	N/A	286.89	928.30	T.B.D
206		71250	Ct Scan, Thorax Without Contrast	IP/OP	1052.64	309.06	121.30	Contact UH	Contact UH	309.06	121.30	121.30	1000.01	139.50
207		76705	Ultrasound Of Abdomen, Limited	IP/OP	800.70	235.09	121.30	Contact UH	Contact UH	235.09	121.30	51.46	760.67	139.50

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	United Healthcare	United Healthcare	United HealthCare:	United HealthCare:	Fidelis: Medicaid	Fidelis: Medicare	Minimum Negotiated Rate	Maximum Negotiated Rate	Discounted Cash Price
						Community Plan: Medicaid	Community Plan: Medicare	Commercial / PPO	Oxford					
208		95813	Electroencephalogram (Eeg) Extended Monitoring; 61-119 Minutes	IP/OP	835.38	245.27	355.21	Contact UH	Contact UH	245.27	355.21	125.00	793.61	408.49
209		93005	Electrocardiogram	IP/OP	221.34	64.99	67.76	Contact UH	Contact UH	64.99	67.76	30.00	210.27	77.92
210		95819	Electroencephalogram (Eeg)	IP/OP	1058.76	310.85	355.21	Contact UH	Contact UH	310.85	355.21	115.00	1005.82	408.49
211		94727	Gas Dilution	IP/OP	577.32	169.50	178.47	Contact UH	Contact UH	169.50	178.47	27.00	548.45	205.24
212		94760	Noninvasive Ear Or Pulse Oximetry For Oxygen Saturation	IP/OP	290.70	85.35	N/A	Contact UH	Contact UH	85.35	N/A	10.00	276.17	T.B.D
213		94644	Continuous Inhalation Therapy With Aerosol Medication For Acute Airway Obstruction; First Hour	IP/OP	476.34	139.85	147.04	Contact UH	Contact UH	139.85	147.04	5.04	452.52	169.10
214		94645	Continuous Inhalation Therapy With Aerosol Medication For Acute Airway Obstruction; Each Additional Hour	IP/OP	158.10	46.42	N/A	Contact UH	Contact UH	46.42	N/A	46.42	150.20	T.B.D
215		94003	Ventilation Assist And Management; Hospital Inpatient/Observation, Each Subsequent Day	IP/OP	1018.98	299.17	754.12	Contact UH	Contact UH	299.17	754.12	17.33	1510.50	867.24
216		94002	Ventilation Assist And Management; Hospital Inpatient/Observation, Initial Day	IP/OP	2021.64	593.55	754.12	Contact UH	Contact UH	593.55	754.12	17.33	1920.56	867.24
217		94681	Oxygen Uptake, Expired Gas Analysis	IP/OP	978.18	287.19	355.21	Contact UH	Contact UH	287.19	355.21	54.00	929.27	408.49
218		94010	Spirometry	IP/OP	577.32	169.50	178.47	Contact UH	Contact UH	169.50	178.47	27.00	548.45	205.24
219		93888	Transcranial Doppler Study Of The Intracranial Arteries; Limited Study	IP/OP	1308.66	384.22	121.30	Contact UH	Contact UH	384.22	121.30	121.30	1243.23	139.50
220		77417	Therapeutic Radiology Port Image(S)	IP/OP	390.66	114.70	N/A	Contact UH	Contact UH	114.70	N/A	4.00	371.13	T.B.D
221		94729	Diffusing Capacity	IP/OP	390.66	114.70	N/A	Contact UH	Contact UH	114.70	N/A	30.00	371.13	T.B.D
222		77085	Bone Density Study, Dual-Energy X-Ray Absorptiometry	IP/OP	445.74	130.87	121.30	Contact UH	Contact UH	130.87	121.30	48.96	423.45	139.50
223		77334	Therapy Devices, Design And Construction; Complex	IP/OP	1501.44	440.82	417.58	Contact UH	Contact UH	440.82	417.58	106.00	1426.37	480.22
224		94668	Manipulation Of Chest Wall	IP/OP	251.94	73.97	147.04	Contact UH	Contact UH	73.97	147.04	15.00	294.52	169.10
225		87536	Infectious Agent Detection; Hiv-1, Quant	IP/OP	381.34	111.96	85.10	Contact UH	Contact UH	111.96	85.10	81.16	362.27	97.87
226		76642	Ultrasound Of Breast	IP/OP	443.70	130.27	100.44	Contact UH	Contact UH	130.27	100.44	42.16	421.52	115.51
227		96360	Intravenous Infusion, Hydration, Initial, 31 Minutes To 1 Hour	IP/OP	769.08	225.80	240.33	Contact UH	Contact UH	225.80	240.33	225.80	730.63	276.38
228		93458	Catheter Placement In Coronary Artery(S) For Coronary Angiography	IP/OP	14690.04	4313.00	3668.96	6552.86	6552.86	4313.00	3668.96	1521.60	13955.54	4219.30
229		76770	Ultrasound Of Retroperitoneal, Complete	IP/OP	513.06	150.63	121.30	Contact UH	Contact UH	150.63	121.30	68.62	487.41	139.50
230		93975	Vascular Study	IP/OP	945.54	277.61	275.73	Contact UH	Contact UH	277.61	275.73	225.00	898.26	317.09
231		76536	Ultrasound Of Head And Neck	IP/OP	652.80	191.66	121.30	Contact UH	Contact UH	191.66	121.30	50.84	620.16	139.50
232		76775	Ultrasound Of Retroperitoneal, Limited	IP/OP	897.60	263.54	121.30	Contact UH	Contact UH	263.54	121.30	51.46	852.72	139.50
233		74018	X-Ray, Abdomen	IP/OP	344.25	101.07	100.44	Contact UH	Contact UH	101.07	100.44	31.99	327.04	115.51
234		86900	Blood Typing Abo	IP/OP	263.16	2.39	2.99	Contact UH	Contact UH	2.39	2.99	2.39	294.52	3.44
235		87186	Susceptibility Studies, Antimicrobial Agent	IP/OP	2762.16	6.92	8.65	Contact UH	Contact UH	6.92	8.65	6.92	2624.05	9.95
236		96375	Therapeutic, Prophylactic, Or Diagnostic Injection; Sequential Intravenous Push Of A New Substance	IP/OP	199.92	58.70	52.63	Contact UH	Contact UH	58.70	52.63	11.73	189.92	60.52
237		86923	Compatibility Test Each Unit; Electronic	IP/OP	478.38	12.00	195.47	Contact UH	Contact UH	12.00	195.47	12.00	454.46	224.79
238		86920	Compatibility Test Each Unit; Immediate Spin Technique	IP/OP	460.02	12.00	195.47	Contact UH	Contact UH	12.00	195.47	12.00	437.02	224.79
239		99152	Mod Sedation Services Provided By The Same Physician	OP	304.98	89.54	N/A	Contact UH	Contact UH	89.54	N/A	78.80	289.73	T.B.D
240		97161	Physical Therapy Evaluation: Low Complexity 20 Minutes	IP/OP	215.22	63.19	N/A	Contact UH	Contact UH	63.19	N/A	32.34	204.46	T.B.D
241		71046	C-Reactive Protein;	IP/OP	328.44	96.43	100.44	Contact UH	Contact UH	96.43	100.44	36.87	312.02	115.51
242		87040	Culture, Bacterial, Blood	IP/OP	93.84	27.55	10.32	Contact UH	Contact UH	27.55	10.32	10.32	89.15	11.87
243		97165	Occupational Therapy Evaluation, Low Complexity, 30 Minutes	IP/OP	215.22	63.19	N/A	Contact UH	Contact UH	63.19	N/A	31.35	204.46	T.B.D
244		97166	Occupational Therapy Evaluation, Mod Complexity 45 Minutes	IP/OP	433.50	127.28	N/A	Contact UH	Contact UH	127.28	N/A	31.35	411.83	T.B.D
245		73502	X-Ray, Hip, 2-3 Views	IP/OP	354.45	104.07	100.44	Contact UH	Contact UH	104.07	100.44	19.84	336.73	115.51
246		86850	Antibody Screen, Rbc, Each Serum Technique	IP/OP	216.24	7.82	9.77	Contact UH	Contact UH	7.82	9.77	7.80	205.43	11.24
247		72040	X-Ray, Neck, Spine, 2-3 Views	IP/OP	336.69	98.85	100.44	Contact UH	Contact UH	98.85	100.44	21.08	319.86	115.51
248		80307	Drug Tests	IP/OP	1299.48	49.71	62.14	Contact UH	Contact UH	49.71	62.14	9.28	1234.51	71.46
249		83690	Blood Test, Lipase	IP/OP	84.66	5.51	6.89	Contact UH	Contact UH	5.51	6.89	5.51	80.43	7.92
250		82550	Blood Test, Creatine Kinase (Ck)	IP/OP	49.98	5.21	6.51	Contact UH	Contact UH	5.21	6.51	1.70	47.48	7.49
251		93306	Echocardiography, With Doppler	IP/OP	1989.00	583.97	625.45	Contact UH	Contact UH	583.97	625.45	265.00	1889.55	719.27
252		97018	Application Of A Modality To 1 Or More Areas; Paraffin Bath	OP	118.32	34.74	N/A	Contact UH	Contact UH	34.74	N/A	18.00	112.40	T.B.D
253		77002	X-Ray, Guidance Of Needle Placement	IP/OP	1144.95	336.16	N/A	Contact UH	Contact UH	336.16	N/A	56.13	1087.70	T.B.D
254		96361	Intravenous Infusion, Hydration; Each Additional Hour	IP/OP	221.34	64.99	52.63	Contact UH	Contact UH	64.99	52.63	52.63	210.27	60.52
255		71045	X-Ray, Chest, 1 View	IP/OP	341.70	100.32	100.44	Contact UH	Contact UH	100.32	100.44	24.01	324.62	115.51
256		92526	Therapy Swallowing Dysfunction And/Or Oral Function For Feeding	IP/OP	204.00	59.89	N/A	Contact UH	Contact UH	59.89	N/A	36.00	193.80	T.B.D
257		97129	Therapeutic Interventions, 15 Minutes	IP/OP	193.80	56.90	N/A	Contact UH	Contact UH	56.90	N/A	22.46	184.11	T.B.D
258		82248	Bilirubin; Direct	IP/OP	76.50	4.02	5.02	Contact UH	Contact UH	4.02	5.02	4.02	72.68	5.77
259		86706	Hepatitis B Surface Antibody	IP/OP	98.94	8.59	10.74	Contact UH	Contact UH	8.59	10.74	7.49	93.99	12.35
260		83036	Hemoglobin; Glycosylated (A1c)	IP/OP	115.26	7.77	9.71	Contact UH	Contact UH	7.77	9.71	7.77	109.50	11.17
261		97164	Re-Evaluation Of Physical Therapy Established Plan Of Care	IP/OP	215.22	63.19	N/A	Contact UH	Contact UH	63.19	N/A	21.98	204.46	T.B.D
262		97150	Therapeutic Procedure, Group	IP/OP	215.22	63.19	N/A	Contact UH	Contact UH	63.19	N/A	8.00	204.46	T.B.D
263		97112	Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes	IP/OP	215.22	63.19	N/A	Contact UH	Contact UH	63.19	N/A	14.64	204.46	T.B.D
264		97760	Orthotic(S) Management And Training	IP/OP	165.24	48.51	N/A	Contact UH	Contact UH	48.51	N/A	33.98	156.98	T.B.D
265		93454	Catheter Placement In Coronary Artery(S) For Coronary Angiography	IP/OP	14690.04	4313.00	3668.96	6552.86	6552.86	4313.00	3668.96	1261.18	13955.54	4219.30
266		84702	Gonadotropin, Chorionic (Hcg); Quantitative	IP/OP	156.06	12.04	15.05	Contact UH	Contact UH	12.04	15.05	2.26	148.26	17.31
267		97163	Physical Therapy Evaluation: High Complexity	IP/OP	765.00	224.60	N/A	Contact UH	Contact UH	224.60	N/A	32.34	726.75	T.B.D
268		97530	Therapeutic Activities	IP/OP	215.22	63.19	N/A	Contact UH	Contact UH	63.19	N/A	17.00	204.46	T.B.D
269		97168	Re-Evaluation Of Occupational Therapy Established Plan Of Care	IP/OP	215.22	63.19	N/A	Contact UH	Contact UH	63.19	N/A	20.72	204.46	T.B.D
270		87086	Culture, Bacterial, Urine	IP/OP	135.66	6.46	8.07	Contact UH	Contact UH	6.46	8.07	6.46	128.88	9.28
271		87150	Culture Typing, Dna/Rna Probe	IP/OP	2950.86	28.07	35.09	Contact UH	Contact UH	28.07	35.09	28.07	2803.32	40.35
272		72070	X-Ray, Thoracic Spine, 2 Views	IP/OP	407.35	119.60	121.30	Contact UH	Contact UH	119.60	121.30	22.32	386.98	139.50
273		93798	Cardiac Rehabilitation With Ecg Monitor	IP/OP	416.16	122.18	143.63	Contact UH	Contact UH	122.18	143.63	122.18	395.35	165.17
274		73564	X-Ray, Knee, 4 Or More Views	IP/OP	436.56	128.17	121.30	Contact UH	Contact UH	128.17	121.30	21.70	414.73	139.50
275		93350	Echocardiography, Transthoracic	IP/OP	2694.84	791.21	625.45	Contact UH	Contact UH	791.21	625.45	150.00	2560.10	719.27
276		97116	Therapeutic Procedure, Gait Training	IP/OP	319.26	93.73	N/A	Contact UH	Contact UH	93.73	N/A	15.00	303.30	T.B.D

University Hospital
 Shoppable Services
 Filename: 221775306_UniversityHospital_ShoppableServices.pdf
 Updated 3/10/2026, using 1/6/2026 CDM

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	United Healthcare	United Healthcare	United HealthCare:	United HealthCare:	Fidelis: Medicaid	Fidelis: Medicare	Minimum Negotiated Rate	Maximum Negotiated Rate	Discounted Cash Price
						Community Plan: Medicaid	Community Plan: Medicare	Commercial / PPO	Oxford					
277		92523	Evaluation Of Speech Sound Production	IP/OP	579.36	170.10	N/A	Contact UH	Contact UH	170.10	N/A	48.00	550.39	T.B.D
278		83540	Blood Test, Iron	IP/OP	742.56	5.18	6.47	Contact UH	Contact UH	5.18	6.47	5.18	705.43	7.44
279		84439	Blood Test, Free T4	IP/OP	377.40	110.80	9.02	Contact UH	Contact UH	110.80	9.02	5.99	358.53	10.37
280		82728	Blood Test, Ferritin	IP/OP	581.40	10.90	13.63	Contact UH	Contact UH	10.90	13.63	10.90	552.33	15.67
281		93308	Echocardiography, Transthoracic, Follow-Up Or Limited Study	IP/OP	1477.98	433.93	275.73	Contact UH	Contact UH	433.93	275.73	75.00	1404.08	317.09
282		86592	Syphilis Test	IP/OP	95.88	3.42	4.27	Contact UH	Contact UH	3.42	4.27	2.94	91.09	4.91
283		83605	Blood Test, Lactic Acid	IP/OP	956.76	9.26	11.57	Contact UH	Contact UH	9.26	11.57	5.99	908.92	13.31
284		84100	Blood Test, Phosphorus	IP/OP	86.70	25.46	4.74	Contact UH	Contact UH	25.46	4.74	0.98	82.37	5.45
285		93017	Cardiovascular Stress Test	IP/OP	1171.98	344.09	355.21	Contact UH	Contact UH	344.09	355.21	150.00	1113.38	408.49
286		76856	Ultrasound Of Pelvis	IP/OP	627.30	184.18	121.30	Contact UH	Contact UH	184.18	121.30	57.66	595.94	139.50
287		70496	Ct Scan, Head Or Brain	IP/OP	1725.84	506.71	203.07	Contact UH	Contact UH	506.71	203.07	203.07	1639.55	233.53
288		74170	Ct Scan, Abdomen With And Without Contrast	IP/OP	4702.20	1380.57	203.07	Contact UH	Contact UH	1380.57	203.07	203.07	4467.09	233.53
289		70486	Ct Scan, Maxillofacial Without Contrast	IP/OP	1183.20	347.39	121.30	Contact UH	Contact UH	347.39	121.30	121.30	1124.04	139.50
290		71260	Ct Scan, Thorax With Contrast	IP/OP	1623.84	476.76	203.07	Contact UH	Contact UH	476.76	203.07	200.88	1542.65	233.53
291		88341	Immunohistochemistry Or Immunocytochemistry, Per Specimen	IP/OP	489.60	143.75	N/A	Contact UH	Contact UH	143.75	N/A	48.51	465.12	T.B.D
292		87077	Culture, Bacterial; Aerobic Isolate	IP/OP	80.58	6.46	8.08	Contact UH	Contact UH	6.46	8.08	6.46	76.55	9.29
293		76937	Ultrasound Guided Vascular Access	IP/OP	604.86	177.59	N/A	Contact UH	Contact UH	177.59	N/A	56.84	574.62	T.B.D
294		77001	Fluoroscopic Guidance For Vein Dvc	IP/OP	492.66	144.64	N/A	Contact UH	Contact UH	144.64	N/A	56.13	468.03	T.B.D
295		83615	Lactate Dehydrogenase (Ld), (Ldh)	IP/OP	82.62	4.83	6.04	Contact UH	Contact UH	4.83	6.04	1.70	78.49	6.95
296		85652	Sedimentation Rate, Erythrocyte, Automated	IP/OP	62.22	2.16	2.70	Contact UH	Contact UH	2.16	2.70	2.16	59.11	3.11
297		82306	Gonadotropin, Chorionic (Hcg), Quantitative	IP/OP	572.22	168.00	29.60	Contact UH	Contact UH	168.00	29.60	19.47	543.61	34.04
298		86803	Hepatitis C Antibody	IP/OP	364.14	11.42	14.27	Contact UH	Contact UH	11.42	14.27	10.18	345.93	16.41
299		80202	Blood Test, Vancomycin	IP/OP	192.78	10.83	13.54	Contact UH	Contact UH	10.83	13.54	10.83	183.14	15.57
300		86704	Hepatitis B Core Antibody (Hbcab), Total	IP/OP	123.42	9.64	12.05	Contact UH	Contact UH	9.64	12.05	8.39	117.25	13.86
301		84484	Blood Test, Troponin	IP/OP	195.84	9.98	12.47	Contact UH	Contact UH	9.98	12.47	9.98	186.05	14.34
302		84145	Procalcitonin (Pct)	IP/OP	1085.48	21.78	27.22	Contact UH	Contact UH	21.78	27.22	16.88	1040.71	31.30
303		86140	C-Reactive Protein	IP/OP	62.22	4.14	5.18	Contact UH	Contact UH	4.14	5.18	4.14	59.11	5.96
304		87340	Infectious Agent Antigen Detection, Hep B	IP/OP	97.92	8.26	10.33	Contact UH	Contact UH	8.26	10.33	7.49	93.02	11.88