

Shoppable ID		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	Medicare HMO/PPO	Consumer Health Network: PPO	Correctional Medical Services, Inc.
1		85027			Complete Blood Count, Automated	I/P/O/P	35.37	10.18	13.44	10.89	26.53	10.38	10.00	6.47	6.47	33.60	28.30
2		80053			Blood Test, Comprehensive Group Of Blood Chemicals	I/P/O/P	209.12	60.21	79.47	10.56	156.84	61.40	14.60	10.56	10.56	198.66	167.30
3		80061			Blood Test, Lipids (Cholesterol And Triglycerides)	I/P/O/P	79.07	22.76	30.05	13.39	59.30	23.21	15.00	13.39	13.39	63.26	63.26
4		84153			Psa (Prostate Specific Antigen)	I/P/O/P	233.05	67.10	86.56	18.39	174.79	68.42	26.10	18.39	18.39	221.40	186.44
5		80076			Liver Function Blood Test Panel	I/P/O/P	73.87	21.27	28.07	8.17	55.40	21.69	11.30	8.17	8.17	70.18	59.10
6		70450			Ct Scan, Head Or Brain, Without Contrast	I/P/O/P	2586.32	744.63	196.84	121.84	1939.82	759.38	137.02	121.84	121.84	2457.11	2069.14
7		74177			Ct Scan Of Abdomen And Pelvis With Contrast	I/P/O/P	1656.32	476.85	663.54	406.58	1242.24	486.30	196.54	406.58	406.58	1573.50	1325.06
8		81001			Manual Urinalysis Test With Examination Using Microscope	I/P/O/P	39.54	11.38	15.03	3.17	29.66	11.61	4.40	3.17	3.17	37.56	31.63
9		76830			Ultrasound Pelvis Through Vagina	I/P/O/P	638.55	183.84	196.84	121.84	478.91	187.48	57.66	121.84	121.84	806.62	510.84
10		62323			Injection Of Substance Into Spinal Canal Of Lower Back Or Sacrum Using Imaging Guidance	I/P/O/P	3190.13	918.44	1342.55	822.64	2392.60	936.62	300.00	822.64	822.64	3030.62	2552.10
11		85610			Blood Test, Clotting Time	I/P/O/P	15.61	4.49	5.93	4.29	11.71	4.58	5.60	4.29	4.29	14.83	12.49
12		85730			Coagulation Assessment Blood Test	I/P/O/P	5.99	7.91	7.91	6.41	15.61	6.11	9.40	6.01	16.65	19.77	16.65
13		80048			Basic Metabolic Panel	I/P/O/P	165.42	47.62	62.86	8.46	124.07	48.57	11.70	8.46	8.46	157.15	132.34
14		72193			Ct Scan, Pelvis, With Contrast	I/P/O/P	1790.53	515.49	333.60	204.41	1342.90	525.70	192.82	204.41	204.41	1701.00	1432.42
15		93452			Insertion Of Catheter Into Left Heart For Diagnosis	OP	14983.84	4313.85	6165.97	4615.02	11237.88	4399.26	9739.50	3778.17	3778.17	14234.65	11987.07
16		76700			Ultrasound Of Abdomen	I/P/O/P	1127.79	324.69	196.84	121.84	845.84	331.12	70.68	121.84	121.84	1071.40	902.23
17		73721			Mri Scan Of Leg Joint	I/P/O/P	1917.46	552.04	453.81	278.07	1438.10	562.97	278.07	278.07	278.07	1821.59	1533.97
18		59400			Routine Obstetric Care For Vaginal Delivery, Including Pre-And Post-Delivery Care	OP	8639.48	2487.31	3283.00	2660.96	6479.61	2536.55	5615.66	N/A	N/A	8207.51	6911.58
19		77067			Mammography, Screening, Bilateral	I/P/O/P	552.45	159.05	209.93	170.15	414.34	162.20	37.20	N/A	N/A	524.83	441.96
20		43239			Biopsy Of The Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope	I/P/O/P	6334.48	960.00	1725.04	1027.02	2500.86	979.00	550.00	1057.01	1057.01	3167.76	2667.58
21		43235			Diagnostic Examination Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope	I/P/O/P	3334.48	960.00	1725.04	1057.01	2500.86	979.00	300.00	1057.01	1057.01	3167.76	2667.58
22		72110			X-Ray, Lower Back, Minimum Four Views	I/P/O/P	412.00	118.61	198.84	121.84	309.00	120.96	31.00	121.84	121.84	391.40	329.60
23		64483			Injections Of Anesthetic And/Or Steroid Drug Into Lower Or Sacral Spine Nerve Root Using Imaging	I/P/O/P	3231.48	930.34	1682.22	1030.77	2423.61	948.76	300.00	1030.77	1030.77	3069.91	2585.18
24		45385			Removal Of Polyps Or Growths Of Large Bowel Using An Endoscope	I/P/O/P	3044.21	876.43	2275.94	1394.57	2283.16	893.78	550.00	1394.57	1394.57	2992.00	2435.37
25		77066			Mammography Of Both Breasts	I/P/O/P	552.45	159.05	209.93	170.15	414.34	162.20	48.98	N/A	N/A	524.83	441.96
26		45380			Biopsy Of Large Bowel Using An Endoscope	OP	3044.21	876.43	2275.94	1394.57	2283.16	893.78	550.00	1394.57	1394.57	2992.00	2435.37
27		49505			Repair Of Groin Hernia Patient Age 5 Years Or Older	OP	9173.21	2640.97	6809.72	4172.62	6879.91	2693.25	950.00	4172.62	4172.62	8714.55	7338.57
28		97110			Physical Therapy, Therapeutic Exercise	I/P/O/P	168.54	48.52	64.05	51.91	126.41	49.48	109.55	N/A	N/A	160.11	134.83
29		70553			Mri Scan Of Brain Before And After Contrast	I/P/O/P	10228.17	2944.69	663.54	406.58	7671.13	3002.99	477.40	406.58	406.58	9716.76	8182.54
30		81002			Automated Urinalysis Test	I/P/O/P	23.93	6.89	9.09	3.48	17.95	7.03	5.00	3.48	3.48	22.73	19.14
31		66821			Removal Of Recurring Cataract In Lens Capsule Using Laser	OP	2013.17	579.59	1046.06	640.97	1509.88	591.07	550.00	640.97	640.97	1912.51	1610.54
32		72148			Mri Scan Of Lower Spinal Canal	I/P/O/P	1475.29	424.74	453.81	454.39	1106.47	294.50	278.07	278.07	278.07	1180.23	1180.23
33		90832			Psychotherapy, 30 Min	OP	553.49	159.35	337.58	206.85	415.12	162.50	359.77	206.85	206.85	525.82	442.79
34		55700			Biopsy Of Prostate Gland	OP	8823.89	2540.40	3353.08	2717.76	6617.92	2590.69	630.00	N/A	N/A	8382.70	7059.11
35		45391			Ultrasound Examination Of Lower Large Bowel Using An Endoscope	OP	4229.23	1217.60	2275.94	1302.60	3171.92	1241.70	550.00	1394.57	1394.57	4017.77	3383.38
36		77065			Mammography Of One Breast	I/P/O/P	552.45	159.05	209.93	170.15	414.34	162.20	38.44	N/A	N/A	524.83	441.96
37		19120			Removal Of 1 Or More Breast Growth, Open Procedure	OP	13029.97	3751.33	7446.93	4563.07	9772.48	3825.60	650.00	4563.07	4563.07	12378.47	10423.98
38		90834			Psychotherapy, 45 Min	OP	553.49	159.35	337.58	206.85	415.12	162.50	359.77	206.85	206.85	525.82	442.79
39		90837			Psychotherapy, 60 Min	OP	553.49	159.35	337.58	206.85	415.12	162.50	359.77	206.85	206.85	525.82	442.79
40		85025			Complete Blood Cell Count, With Differential White Blood Cells, Automated	I/P/O/P	45.78	13.18	17.40	7.77	34.34	13.44	11.00	7.77	7.77	43.49	36.62
41		84443			Blood Test, Thyroid Stimulating Hormone (Tsh)	I/P/O/P	650.25	187.21	247.10	16.80	487.69	190.91	26.20	16.80	16.80	617.74	520.20
42		90853			Group Psychotherapy	OP	290.27	83.57	193.21	118.39	217.70	85.22	188.68	118.39	118.39	275.76	232.22
43		45378			Diagnostic Examination Of Large Bowel Using An Endoscope	I/P/O/P	3044.21	876.43	1768.73	1083.78	2283.16	893.78	550.00	1083.78	1083.78	2892.00	2435.37
44		90846			Family Psychotherapy, Not Including Patient, 50 Min	OP	482.04	138.78	337.58	206.85	361.53	141.53	313.33	206.85	206.85	457.94	385.63
45		90847			Family Psychotherapy, Including Patient, 50 Min	OP	482.04	138.78	337.58	206.85	361.53	141.53	313.33	206.85	206.85	457.94	385.63
46		99203			New Patient Office Or Other Outpatient Visit, Typically 30 Min	OP	312.12	89.86	118.61	96.13	234.09	91.64	202.88	N/A	N/A	296.51	249.70
47		99204			New Patient Office Or Other Outpatient Visit, Typically 45 Min	OP	478.58	137.78	181.86	147.40	358.94	140.51	311.08	N/A	N/A	454.65	382.86
48		99205			New Patient Office Or Other Outpatient Visit, Typically 60 Min	OP	593.03	170.73	225.35	182.65	444.77	174.11	385.47	N/A	N/A	563.38	474.42
49		99243			Patient Office Consultation, Typically 40 Min	OP	353.74	101.84	134.42	108.95	265.31	103.86	229.93	N/A	N/A	336.05	282.99
50		42820			Removal Of Tonsils And Adenoid Glands Patient Younger Than Age 12	OP	17705.65	5097.46	11259.18	5453.34	13279.24	5198.38	960.00	6899.01	6899.01	16820.37	14164.52
51		47562			Removal Of Gallbladder Using An Endoscope	OP	17445.06	5022.43	11498.26	7045.50	13083.80	5121.87	2400.00	7045.50	7045.50	16572.81	13966.05
52		55866			Surgical Removal Of Prostate And Surrounding Lymph Nodes Using An Endoscope	OP	31122.18	8960.08	20217.35	12388.08	23341.64	9137.47	800.00	12388.08	12388.08	29566.07	24897.74
53		59510			Routine Obstetric Care For Cesarean Delivery, Including Pre-And Post-Delivery Care	I/P/O/P	3080.52	886.88	11770.60	948.80	2310.39	904.44	2002.34	N/A	N/A	2926.49	2464.42
54		59610			Routine Obstetric Care For Vaginal Delivery After Prior Cesarean Delivery Including Pre-And Post-C/I	I/P/O/P	9448.91	2720.34	3590.59	2910.26	7086.68	2774.20	6141.79	N/A	N/A	8976.46	7559.13
55		66984			Removal Of Cataract With Insertion Of Lens	OP	7045.66	2028.45	4389.35	2689.55	5284.25	2068.61	1400.00	2689.55	2689.55	6693.38	5636.53
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	IP	N/A	N/A	33944.78	34323.19	N/A	N/A	22783.24	34323.19	34323.19	N/A	N/A
58		DRG - 473			Cervical Spinal Fusion Without Comorbid Conditions (Cc) Or Major Comorbid Conditions Or Compil	IP	N/A	N/A	42962.00	40529.48	N/A	N/A	28835.46	40529.48	40529.48	N/A	N/A
59		DRG - 743			Uterine And Adnexa Procedures For Non-Malignancy Without Comorbid Conditions (Cc) Or Major C	IP	N/A	N/A	21833.84	25987.56	N/A	N/A	14654.55	25987.56	25987.56	N/A	N/A
60		29826			Shaving Of Shoulder Bone Using An Endoscope	OP	192.97	55.56	73.33	59.43	144.73	56.66	1050.00	N/A	N/A	183.32	154.38
61		29881			Removal Of One Knee Cartilage Using An Endoscope	OP	9786.31	2817.48	6223.16	3014.18	7339.73	2873.26	1050.00	3813.21	3813.21	9296.99	7829.05
62		99244			Patient Office Consultation, Typically 60 Min	OP	530.60	152.76	201.63	163.42	397.95	155.78	344.89	N/A	N/A	504.07	424.48
63		99385			Initial New Patient Preventive Medicine Evaluation (18-39 Years)	OP	384.95	110.83	146.28	118.56	288.71	113.02	250.22	N/A	N/A	365.70	307.96
64		99386			Initial New Patient Preventive Medicine Evaluation (40-64 Years)	OP	436.97	125.80	166.05	134.59	327.73	128.29	284.03	N/A	N/A	415.12	349.58
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		DRG - 216			Cardiac Valve And Other Major Cardiothoracic Procedures With Cardiac Catheterization With Major IP	IP	N/A	N/A	172157.71	129451.26	N/A	N/A	115549.74	129451.26	129451.26	N/A	N/A
68		93000			Electrocardiogram, Routine, With Interpretation And Report	OP	16.72	4.81	6.35	5.15	12.54	4.91	30.00	N/A	N/A	15.88	13.38
69		95810			Sleep Study	OP	3161.10	910.08	1633.27	1000.78	2370.83	928.10	2054.72	1000.78	1000.78	3003.05	2528.88
70		76805			Abdominal Ultrasound Of Pregnant Uterus (Greater Or Equal To 14 Weeks 0 Days) Single Or First I/P	O/P	558.49	160.79	198.84	121.84	418.87	163.97	121.84	121.84	121.84	530.57	446.79
71		86480			Tuberculosis Test	I/P/O/P	573.26	165.04	217.84	176.56	429.95	168.31	95.00	61.98	61.9		

								Devon Health				Clover Health:					
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73		DRG - 115	Extraocular Procedures Except Orbit	IP	N/A	N/A	27011.17	29550.98	N/A	N/A	18129.50	29550.98	29550.98	N/A	N/A		
74		DRG - 117	Intraocular Procedures Without Complications	IP	N/A	N/A	19092.07	24100.48	N/A	N/A	12814.32	24100.48	24100.48	N/A	N/A		
75		DRG - 788	Cesarean Section Without Sterilization Without Complications	IP	N/A	N/A	16872.96	22573.13	N/A	N/A	8487.00	22573.13	22573.13	N/A	N/A		
76		DRG - 906	Hand Procedures For Injuries	IP	N/A	N/A	31014.72	32306.50	N/A	N/A	20816.62	32306.50	32306.50	N/A	N/A		
77		DRG - 482	Hip And Femur Procedures Except Major Joint Without Complications	IP	N/A	N/A	28702.34	30714.96	N/A	N/A	19264.59	30714.96	30714.96	N/A	N/A		
78		DRG - 494	Lower Extremity And Humerus Procedures Except Hip, Foot And Femur Without Complications	IP	N/A	N/A	35310.39	35263.09	N/A	N/A	23699.81	35263.09	35263.09	N/A	N/A		
79		DRG - 502	Soft Tissue Procedures Without Complications	IP	N/A	N/A	23685.15	27261.77	N/A	N/A	15989.12	27261.77	27261.77	N/A	N/A		
80		DRG - 505	Foot Procedures W/O Co/Mcc	IP	N/A	N/A	31549.69	32674.72	N/A	N/A	21175.69	32674.72	32674.72	N/A	N/A		
81		DRG - 512	Shoulder, Elbow Or Forearm Procedures, Except Major Joint Procedures Without Complications	IP	N/A	N/A	29131.73	31010.50	N/A	N/A	19552.79	31010.50	31010.50	N/A	N/A		
82		DRG - 660	Kidney And Ureter Procedures For Non-Neoplasm With Complications	IP	N/A	N/A	23259.28	26968.65	N/A	N/A	15611.29	26968.65	26968.65	N/A	N/A		
83		DRG - 142	Major Head And Neck Procedures Without Complications	IP	N/A	N/A	28093.45	30295.88	N/A	N/A	18855.91	30295.88	30295.88	N/A	N/A		
84		DRG - 250	Percutaneous Cardiovascular Procedures With Coronary Artery Stent	IP	N/A	N/A	38407.64	37394.84	N/A	N/A	25778.64	37394.84	37394.84	N/A	N/A		
85		DRG - 329	Major Small And Large Bowel Procedures With Major Comp	IP	N/A	N/A	80889.21	66633.71	N/A	N/A	54291.65	66633.71	66633.71	N/A	N/A		
86		DRG - 355	Hernia Procedures Except Inguinal And Femoral Without Complications	IP	N/A	N/A	23669.31	27250.87	N/A	N/A	15886.49	27250.87	27250.87	N/A	N/A		
87		DRG - 419	Laparoscopic Cholecystectomy Without C.D.E. Without Complications	IP	N/A	N/A	24035.35	27502.80	N/A	N/A	16132.17	27502.80	27502.80	N/A	N/A		
88		DRG - 479	Biopsies Of Musculoskeletal System And Connective Tissue Without Complications	IP	N/A	N/A	32712.92	33475.33	N/A	N/A	21966.43	33475.33	33475.33	N/A	N/A		
89		DRG - 448	Multiple Level Spinal Fusion Except Cervical Without Mcc	IP	N/A	N/A	74629.60	62325.40	N/A	N/A	50090.29	62325.40	62325.40	N/A	N/A		
90		DRG - 451	Single Level Spinal Fusion Except Cervical Without Mcc	IP	N/A	N/A	56848.58	50087.23	N/A	N/A	38155.93	50087.23	50087.23	N/A	N/A		
91		72131	Ct Scan, Lumbar Spine	IP/OP	749.09	215.66	198.84	230.72	561.82	219.93	171.74	121.84	121.84	711.64	599.27		
92		87491	Infectious Agent Detection, Chlamydia Trachomatis	IP/OP	372.46	107.23	141.53	35.09	279.35	109.35	48.50	35.09	35.09	353.84	297.97		
93		73700	Ct Scan, Lower Extremities	IP/OP	1856.07	534.36	198.84	121.84	1392.05	544.94	147.56	121.84	121.84	1763.27	1484.86		
94		73630	X-Ray, Foot	IP/OP	847.93	244.12	165.52	261.16	635.95	248.95	17.98	101.42	101.42	805.53	678.34		
95		73560	X-Ray, Knee	IP/OP	819.32	235.88	165.52	101.42	614.49	240.55	16.74	101.42	101.42	778.35	655.46		
96		72190	X-Ray, Pelvis, 3 Views	IP/OP	415.50	119.62	198.84	127.97	311.63	121.99	22.32	121.84	121.84	394.73	332.40		
97		92557	Comprehensive Audiometry Threshold Evaluation And Speech Recognition	IP/OP	553.49	159.35	244.73	149.96	415.12	162.50	65.00	149.96	149.96	525.82	442.79		
98		76512	Ophthalmic Ultrasound, Diagnostic, B-Scan With And Without Quant. A	IP/OP	410.96	118.32	198.84	121.84	308.22	120.66	56.42	121.84	121.84	390.41	328.77		
99		70355	X-Ray, Jaws, Panoramic	IP/OP	331.89	95.55	165.52	101.42	248.92	97.44	22.94	101.42	101.42	315.30	265.51		
100		96415	Chemotherapy Administration, Intravenous Infusion Technique	IP/OP	258.02	74.28	136.94	83.91	193.52	75.75	167.71	83.91	83.91	245.12	206.42		
101		96367	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis; Additional Sequential Infusion Of A N	IP/OP	258.02	74.28	136.94	83.91	193.52	75.75	167.71	83.91	83.91	245.12	206.42		
102		70498	Ct Scan, Neck	IP/OP	1727.06	497.22	333.60	204.41	1295.30	507.06	220.10	204.41	204.41	1640.71	1381.65		
103		76376	3D Rendering With Interpretation And Post Process Supervision	IP/OP	293.39	84.47	111.49	90.36	220.04	86.14	190.70	N/A	N/A	278.72	234.71		
104		92567	Tympanometry	OP	424.48	122.21	71.04	43.53	318.36	124.63	25.00	43.53	43.53	403.26	339.58		
105		92235	Fluorescein Angiography	OP	1064.33	306.42	410.68	251.64	798.25	312.49	53.03	251.64	251.64	1011.11	851.46		
106		76815	Abdominal Ultrasound Of Pregnant Uterus	IP/OP	556.61	160.25	198.84	121.84	417.46	163.42	53.32	121.84	121.84	528.78	445.29		
107		96368	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis; Concurrent Infusion	IP/OP	158.14	45.53	60.09	48.71	118.61	46.43	102.79	N/A	N/A	150.23	126.51		
108		90472	Immunization Administration	IP/OP	177.91	51.22	67.61	54.80	133.43	52.23	115.64	N/A	N/A	169.01	142.33		
109		92603	Diagnostic Analysis Of Cochlear Implant, Age 7 Years Or Older, With Programming	OP	553.49	159.35	244.73	149.96	415.12	162.50	48.00	149.96	149.96	525.82	442.79		
110		92250	Fundus Photography With Interpretation And Report	OP	441.13	127.00	253.06	155.06	330.85	129.52	25.88	155.06	155.06	419.07	352.90		
111		96523	Irrigation Of Implanted Venous Access Device	IP/OP	219.52	63.20	112.20	68.75	164.64	64.45	142.69	68.75	68.75	208.54	175.62		
112		90746	Hepatitis B Vaccine (Heptb), Adult Dosage, 3 Dose Schedule, For Intramuscular Use	IP/OP	259.80	74.80	98.72	80.02	194.85	76.28	61.05	75.15	75.15	246.81	207.84		
113		89051	Cell Count, Miscellaneous Body Fluids	IP/OP	105.08	30.25	39.93	5.60	78.81	30.85	8.60	5.60	5.60	99.83	84.06		
114		73590	X-Ray, Lower Leg	IP/OP	789.40	227.27	165.52	101.42	592.05	231.77	17.98	101.42	101.42	749.93	631.52		
115		72170	X-Ray, Pelvis, 1-2 Views	IP/OP	415.50	119.62	198.84	127.97	311.63	121.99	16.74	121.84	121.84	394.73	332.40		
116		73070	X-Ray, Elbow	IP/OP	785.50	226.15	165.52	101.42	589.13	230.62	17.98	101.42	101.42	746.23	628.40		
117		72125	Ct Scan, Neck Spine Without Contrast	IP/OP	1370.21	394.48	198.84	121.84	1027.66	402.29	171.74	121.84	121.84	1301.70	1096.17		
118		73030	X-Ray, Shoulder	IP/OP	776.40	223.53	165.52	101.42	582.30	227.95	19.22	101.42	101.42	737.58	621.12		
119		73060	X-Ray, Humerus	IP/OP	786.80	226.52	165.52	242.33	590.10	231.00	18.60	101.42	101.42	747.46	629.44		
120		72100	X-Ray, Lumbar Spine, 2-3 Views	IP/OP	604.73	174.10	198.84	121.84	453.55	177.55	22.94	121.84	121.84	574.49	483.78		
121		73120	Hepatitis B Surface Antibody (Hbsab)	IP/OP	668.46	192.45	198.84	205.89	501.35	196.26	16.74	121.84	121.84	635.04	534.77		
122		73610	X-Ray, Ankle	IP/OP	306.92	88.36	165.52	94.53	230.19	90.11	17.98	101.42	101.42	291.57	245.54		
123		73110	X-Ray, Wrist	IP/OP	474.68	136.66	165.52	101.42	356.01	139.37	17.98	101.42	101.42	450.95	379.74		
124		73090	X-Ray, Forearm	IP/OP	785.50	226.15	165.52	241.93	589.13	230.62	18.60	101.42	101.42	746.23	628.40		
125		93312	Echocardiography, Transesophageal	IP/OP	2824.69	813.23	1039.26	636.80	2118.52	829.33	1836.05	636.80	636.80	2683.46	2259.75		
126		97140	Manual Therapy Techniques, 1 Or More Regions, Each 15 Minutes	IP/OP	219.52	63.20	83.42	67.61	164.64	64.45	142.69	N/A	N/A	208.54	175.62		
127		92611	Motion Fluoroscopic Evaluation Of Swallowing Function By Cine Or Video Recording	IP/OP	1039.36	299.23	394.96	320.12	779.52	305.16	77.00	N/A	N/A	987.39	831.49		
128		73562	X-Ray, Knee, 3 Views	IP/OP	330.33	95.10	165.52	101.42	247.75	96.98	19.22	101.42	101.42	313.81	264.26		
129		96374	Therapeutic, Prophylactic, Or Diagnostic Injection; Intravenous Push, Single Or Initial Substance/Dn	IP/OP	780.30	224.65	404.56	247.89	585.23	229.10	507.20	247.89	247.89	741.29	624.24		
130		92950	Cardiopulmonary Resuscitation	IP/OP	1430.55	411.86	410.68	251.64	1072.91	420.01	116.00	251.64	251.64	1359.02	1144.44		
131		77386	Intensity Modulated Radiation Therapy Delivery Complex	IP/OP	2482.39	714.68	943.31	764.58	1861.79	728.83	424.00	N/A	N/A	2358.27	1985.91		
132		93990	Duplex Scan Of Hemodialysis Access	IP/OP	405.76	116.82	198.84	121.84	304.32	119.13	263.74	121.84	121.84	385.47	324.61		
133		93926	Duplex Scan Of Lower Extremity Arteries Or Arterial Bypass Grafts; Unilateral Or Limited Study	IP/OP	405.76	116.82	198.84	124.97	304.32	119.13	263.74	121.84	121.84	385.47	324.61		
134		84703	Blood Test, Human Chorionic Gonadotropin (Hcg)	IP/OP	183.11	52.72	69.58	7.52	137.33	53.76	11.60	7.52	7.52	173.95	146.49		
135		93978	Duplex Scan Of Aorta, Inferior Vena Cava, Iliac Vasculature, Or Bypass Grafts; Complete Study	IP/OP	934.28	268.98	453.81	278.07	700.71	274.30	607.28	278.07	278.07	887.57	747.92		
136		93925	Duplex Scan Of Lower Extremity Arteries Or Arterial Bypass Grafts; Complete Bilateral Study	IP/OP	887.46	255.50	453.81	278.07	665.60	260.56	576.85	278.07	278.07	843.09	709.97		
137		92587	Distortion Product Evoked Otoacoustic Emissions	IP/OP	1065.37	306.72	410.68	328.13	799.03	312.79	48.00	251.64	251.64	1012.10	852.30		
138		92134	Scanning Computerized Ophthalmic Diagnostic Imaging, Posterior Segment; Retina	IP/OP	228.89	65.90	112.20	68.75	171.67	67.20	16.10	68.75	68.75	217.45	183.11		
139		96411	Chemotherapy Administration; Intravenous, Push Technique, Each Additional Substance/Drug	OP	395.35	113.82	136.94	83.91	296.51	116.07	256.98	83.91	83.91	375.58	316.28		
140		82805	Blood Gasses With O2 Saturation	IP/OP	515.00	148.27	195.70	158.62	386.25	151.20	41.00	78.77	78.77	489.25	412.00		
141		94664	Demonstration And/Or Evaluation Of Patient Utilization Of An Aerosol Generator, Nebulizer, Metered	IP/OP	819.84	236.03	416.49	255.20	614.88	240.71	532.90	255.20	255.20	778.85	655.87		
142		94667	Manipulation Chest Wall	IP/OP	525.40	151.26	253.06	155.06	394.05	154.26	341.51	155.06	155.06	499.13	420.32		
143		94660	Continuous Positive Airway Pressure Ventilation (Cpap)	IP/OP	784.46	225.85	416.49	255.20	588.35	230.32	509.90	255.20	255.20	745.24	627.57		

Notes:

Inpatient charges are not separately billable and are included in the DRG rate.

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:	Aetna Health Plan:	Aetna Health Plan:	Devon Health	WellPoint	Amerihealth: HMO	Amerihealth:	Clover Health:	Consumer Health	Correctional Medical	
						Better Health	Commercial	Medicare	Services (FKA Americare)		and PPO	Medicare	HMO/PPO		Network: PPO	Services, In.
145		97597	Debridement	IP/OP	740.76	213.26		381.59	233.82	555.57	217.49	481.49	233.82	233.82	703.72	592.61
146		90651	Hpv Vaccine	IP/OP	1151.67	331.57		437.63	354.71	863.75	338.13	200.63	N/A	N/A	1094.09	921.34
147		96413	Chemotherapy Administration, Intravenous Infusion Technique; Up To 1 Hour	IP/OP	1264.09	363.93		628.22	389.34	948.07	371.14	821.66	384.94	384.94	1200.89	1011.27
148		92570	Acoustic Immitance Testing	OP	553.49	159.35		244.73	170.47	415.12	162.50	25.00	149.96	149.96	526.82	442.79
149		92133	Scanning Computerized Ophthalmic Diagnostic Imaging, Optic Nerve	OP	228.89	65.90		112.20	70.50	171.67	67.20	16.10	68.75	68.75	217.45	183.11
150		90675	Rabies Vaccine, For Intramuscular Use	IP/OP	1624.80	467.78		586.82	500.44	1218.60	477.04	310.08	319.75	319.75	1543.56	1299.84
151		96417	Chemotherapy Administration, Intravenous Infusion Technique	IP/OP	258.02	74.28		136.94	79.47	193.52	75.75	167.71	83.91	83.91	245.12	206.42
152		92083	Visual Field Examination	IP/OP	441.13	127.00		253.06	155.06	330.85	129.52	286.73	155.06	155.06	419.07	352.90
153		92136	Ophthalmic Biometry	OP	441.13	127.00		253.06	155.06	330.85	129.52	286.73	155.06	155.06	419.07	352.90
154		96401	Chemotherapy Administration, Subcutaneous Or Intramuscular; Non-Hormonal Anti-Neoplastic	IP/OP	511.88	147.37		136.94	157.66	363.91	150.29	332.72	83.91	83.91	486.29	409.50
155		96402	Chemotherapy Administration, Subcutaneous Or Intramuscular; Hormonal Anti-Neoplastic	OP	321.48	92.55		136.94	83.91	241.11	94.39	208.96	83.91	83.91	305.41	257.18
156		90734	Meningococcal Conjugate Vaccine	IP/OP	294.44	84.77		111.89	90.69	220.83	86.45	119.93	N/A	N/A	279.72	235.55
157		96365	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis; Initial, Up To 1 Hour	IP/OP	845.85	243.52		404.56	260.52	634.39	248.34	549.80	247.89	247.89	803.56	676.68
158		90670	Pneumococcal Conjugate Vaccine, 13 Valent (Pcv13), For Intramuscular Use	IP/OP	874.12	251.66		332.17	269.23	655.59	256.64	176.11	N/A	N/A	830.41	699.30
159		77336	Continuing Medical Physics Consultation	IP/OP	1521.06	437.91		255.64	468.49	1140.80	446.58	21.00	156.64	156.64	1445.01	1216.85
160		92602	Diagnostic Analysis Of Cochlear Implant, Patient Younger Than 7 Yrs Of Age; Subsequent Reprog	OP	553.49	159.35		244.73	149.96	415.12	162.50	48.00	149.96	149.96	525.82	442.79
161		92025	Computerized Corneal Topography	OP	219.52	63.20		112.20	68.75	164.64	64.45	142.69	68.75	68.75	208.54	175.62
162		93923	Complete Bilateral Noninvasive Physiologic Studies Of Upper Or Lower Extremity Arteries, 3 Or Mo	IP/OP	1045.60	301.03		410.68	251.64	784.20	306.99	679.64	251.64	251.64	993.32	836.48
163		82948	Glucose Test	IP/OP	45.62	13.13		17.34	5.04	34.22	13.39	3.00	5.04	5.04	43.34	36.50
164		94150	Vital Capacity, Total (Separate Procedure)	IP/OP	588.87	169.54		244.73	149.96	441.65	172.89	382.77	149.96	149.96	559.43	471.10
165		94060	Bronchodilation Responsiveness	IP/OP	1064.33	306.42		709.72	434.88	798.25	312.49	691.81	434.88	434.88	1011.11	851.46
166		90732	Pneumococcal Polysaccharide Vaccine	IP/OP	438.53	126.25		166.64	135.07	328.90	133.47	93.71	133.47	133.47	416.60	350.82
167		92584	Electrocochleography	OP	1018.55	293.24		244.73	149.96	763.91	299.05	77.00	149.96	149.96	967.62	814.84
168		92550	Tympanometry And Reflex Threshold Measurements	OP	553.49	159.35		410.68	170.47	415.12	162.50	25.00	251.64	251.64	525.82	442.79
169		92626	Evaluation Of Auditory Function, First Hour	OP	553.49	159.35		244.73	149.96	415.12	162.50	25.00	149.96	149.96	525.82	442.79
170		92579	Visual Reinforcement Audiometry (Vra)	IP/OP	956.13	275.27		410.68	251.64	717.10	280.72	65.00	251.64	251.64	908.32	764.90
171		92582	Conditioning Play Audiometry	OP	956.13	275.27		244.73	149.96	717.10	280.72	65.00	149.96	149.96	908.32	764.90
172		90686	Influenza Virus Vaccine	IP/OP	73.43	21.14		27.90	22.62	55.07	21.56	23.82	N/A	N/A	69.76	58.74
173		92604	Diagnostic Analysis Of Cochlear Implant, Age 7 Yrs Or Older	OP	553.49	159.35		244.73	149.96	415.12	162.50	48.00	149.96	149.96	525.82	442.79
174		90715	Tetanus, Diphtheria Toxoids And Acellular Pertussis Vaccine (Tdap), 7 Years+	IP/OP	355.48	102.34		135.08	109.49	266.61	104.37	45.61	39.69	39.69	337.71	284.38
175		86901	Blood Typing Rhd	IP/OP	190.39	54.81		71.04	2.99	142.79	55.90	5.40	2.99	2.99	180.87	152.31
176		93922	Limited Bilateral Noninvasive Physiologic Studies Of Upper Or Lower Extremity Arteries	IP/OP	557.65	160.55		253.06	155.06	418.24	163.73	362.47	155.06	155.06	529.77	446.12
177		36415	Routine Venipuncture	IP/OP	62.42	17.97		23.72	9.34	46.82	18.33	1.00	9.34	9.34	59.30	49.94
178		92610	Evaluation Of Oral And Pharyngeal Swallowing Function	IP/OP	275.71	79.38		104.77	84.92	206.78	80.95	77.00	N/A	N/A	261.92	220.57
179		92522	Evaluation Of Speech Sound Production	IP/OP	590.96	170.13		224.56	182.01	443.21	173.50	48.00	N/A	N/A	561.40	472.76
180		93880	Duplex Scan Of Extracranial Arteries; Complete Bilateral Study	IP/OP	894.74	257.60		453.81	278.07	671.06	262.70	278.07	278.07	278.07	850.00	715.79
181		97802	Medical Nutrition Therapy	OP	109.24	31.45		41.51	33.65	81.93	32.07	71.01	N/A	N/A	103.78	87.39
182		86703	Antibody; Hiv-1 And Hiv-2, Single Result	IP/OP	79.07	22.76		30.05	13.71	59.30	23.21	19.50	13.71	13.71	75.12	63.26
183		93970	Duplex Scan Of Extremity Veins; Complete Bilateral Study	IP/OP	889.54	256.10		453.81	278.07	667.16	261.17	578.20	278.07	278.07	845.06	711.63
184		96376	Therapeutic, Prophylactic, Or Diagnostic Injection Sequential Intravenous Push Of The Same Subst	IP/OP	227.85	65.60		86.58	70.18	170.89	66.90	148.10	N/A	N/A	216.46	182.28
185		90744	Hepatitis B Vaccine (Hepb), Pediatric/Adolescent Dosage, 3 Dose Schedule	IP/OP	85.86	24.72		32.63	26.44	64.40	25.21	29.40	33.20	33.20	81.57	68.69
186		93971	Duplex Scan Of Extremity Veins; Unilateral Or Limited Study	IP/OP	405.76	116.82		198.84	121.84	304.32	119.13	263.74	121.84	121.84	385.47	324.61
187		90471	Immunization Administration	IP/OP	253.86	73.09		136.94	83.91	190.40	74.53	165.01	83.91	83.91	241.17	203.09
188		90632	Hepatitis A Vaccine (Hepa), Adult Dosage, For Intramuscular Use	IP/OP	275.76	79.39		104.79	73.54	206.82	80.96	70.72	73.54	73.54	261.97	220.61
189		99153	Mod Sedation Services Provided By The Same Physician	OP	376.62	108.43		143.12	116.00	282.47	110.58	244.80	N/A	N/A	357.79	301.30
190		93303	Transthoracic Echocardiography	IP/OP	2904.80	836.29		1039.26	636.80	2178.60	852.85	160.00	636.80	636.80	2759.56	2323.84
191		73552	X-Ray, Femur, 2 Views	IP/OP	377.15	108.58		165.52	101.42	282.86	110.73	19.84	101.42	101.42	358.29	301.72
192		96372	Therapeutic, Prophylactic, Or Diagnostic Injection; Subcutaneous Or Intramuscular	IP/OP	199.76	57.51		136.94	83.91	149.82	58.65	129.84	83.91	83.91	189.77	159.81
193		95851	Range Of Motion Measurements And Report	IP/OP	120.69	34.75		45.86	37.17	90.52	35.43	78.45	N/A	N/A	114.66	96.55
194		77300	Basic Radiation Dosimetry Calculation	IP/OP	685.62	197.39		255.64	156.64	514.22	201.30	43.00	156.64	156.64	651.34	548.50
195		96366	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis, Each Additional Hour	IP/OP	269.46	77.58		89.06	54.57	202.10	79.11	175.15	54.57	54.57	255.99	215.57
196		94761	Noninvasive Ear Or Pulse Oximetry For Oxygen Saturation; Multiple Determinations	IP/OP	398.47	114.72		151.42	122.73	298.85	116.99	259.01	N/A	N/A	378.55	318.78
197		94640	Inhalation Therapy	IP/OP	677.30	194.99		416.49	255.20	507.98	198.86	440.25	255.20	255.20	643.44	541.84
198		77412	Radiation Therapy Delivery	IP/OP	949.89	273.47		1050.91	292.57	712.42	278.89	135.00	643.94	643.94	902.40	759.91
199		77063	Screening Digital Breast Tomosynthesis, Bilateral	IP/OP	552.45	159.05		209.93	170.15	414.34	162.20	6.20	N/A	N/A	524.83	441.96
200		87591	Infectious Agent Detection, Neisseria Gonorrhoeae	IP/OP	372.46	107.23		141.53	35.09	279.35	109.35	48.50	35.09	35.09	353.84	297.97
201		97535	Self-Care/Home Management Training	IP/OP	219.52	63.20		83.42	67.61	164.64	64.45	142.69	N/A	N/A	208.54	175.62
202		70551	Mri, Brain Without Contrast	IP/OP	5852.25	1684.86		453.81	1802.49	4389.19	1718.22	294.50	278.07	278.07	5559.64	4681.80
203		97162	Physical Therapy Evaluation, Complex, 30 Minutes	IP/OP	398.47	114.72		151.42	122.73	298.85	116.99	259.01	N/A	N/A	378.55	318.78
204		92507	Therapy Speech And/Or Auditory	IP/OP	240.33	69.19		91.33	74.02	180.25	70.56	45.00	N/A	N/A	228.31	192.26
205		92612	Flexible Endoscopic Evaluation Of Swallowing By Cine Or Video Recording	IP/OP	996.70	286.95		378.75	306.98	747.53	292.63	300.00	N/A	N/A	946.87	797.36
206		71250	Ct Scan, Thorax Without Contrast	IP/OP	1073.69	309.12		198.84	121.84	805.27	315.24	171.74	121.84	121.84	1020.01	858.95
207		76705	Ultrasound Of Abdomen, Limited	IP/OP	816.71	235.13		198.84	121.84	612.53	239.79	51.46	121.84	121.84	775.87	653.37
208		95813	Electroencephalogram (Eeg) Extended Monitoring; 61-119 Minutes	IP/OP	852.09	245.32		410.68	251.64	639.07	250.17	553.86	251.64	251.64	809.49	681.67
209		93005	Electrocardiogram	IP/OP	225.77	65.00		112.20	68.75	169.33	66.29	30.00	68.75	68.75	214.48	180.62
210		95819	Electroencephalogram (Eeg)	IP/OP	1079.94	310.91		410.68	332.62	809.96	317.07	701.96	251.64	251.64	1025.94	863.95
211		94727	Gas Dilution	IP/OP	588.87	169.54		410.68	251.64	441.65	172.89	382.77	251.64	251.64	559.43	471.10
212		94760	Noninvasive Ear Or Pulse Oximetry For Oxygen Saturation	IP/OP	296.51	85.37		112.67	91.33	222.38	87.06	192.73	N/A	N/A	281.68	237.21
213		94644	Continuous Inhalation Therapy With Aerosol Medication For Acute Airway Obstruction; First Hour	IP/OP	485.87	139.88		253.06	155.06	364.40	142.65	315.82	155.06	155.06	461.58	388.70
214		94645	Continuous Inhalation Therapy With Aerosol Medication For Acute Airway Obstruction; Each Additio	IP/OP	161.26	46.43		61.28	49.67	120.95	47.35	104.82	N/A	N/A	153.20	129.01
215		94003	Ventilation Assist And Management; Hospital Inpatient/Observation, Each Subsequent Day	IP/OP	1039.36	299.23		1175.01	719.98	779.52	305.16	675.58	719.98	719.98	987.39	831.49
216		94002	Ventilation Assist And Management; Hospital Inpatient/Observation, Initial Day	IP/OP	2062.07	593.67		11								

Shoppable ID	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, Inc.
217		94681	Oxygen Uptake, Expired Gas Analysis	I/P/O/P	897.74	287.25	709.72	434.88	748.31	292.94	648.53	434.88	434.88	947.85	798.19
218		94010	Spirometry	I/P/O/P	588.87	169.64	410.68	251.64	441.65	172.89	382.77	251.64	251.64	559.43	471.10
219		93888	Transcranial Doppler Study Of The Intracranial Arteries; Limited Study	I/P/O/P	1334.83	384.30	198.84	121.84	1001.12	391.91	867.64	121.84	121.84	1268.09	1067.86
220		77417	Therapeutic Radiology Port Image(S)	I/P/O/P	398.47	114.72	151.42	122.73	298.85	116.99	4.00	N/A	N/A	378.55	318.78
221		94729	Diffusing Capacity	I/P/O/P	398.47	114.72	151.42	122.73	298.85	116.99	259.01	N/A	N/A	378.55	318.78
222		77085	Bone Density Study, Dual-Energy X-Ray Absorptiometry	I/P/O/P	454.65	130.89	198.84	121.84	340.99	133.49	295.52	121.84	121.84	431.92	363.72
223		77334	Therapy Devices, Design And Construction; Complex	I/P/O/P	1531.47	440.91	712.14	436.36	1148.60	449.64	106.00	436.36	436.36	1454.90	1225.18
224		94668	Manipulation Of Chest Wall	I/P/O/P	256.98	73.98	253.06	155.06	192.74	75.45	167.04	155.06	155.06	244.13	205.58
225		87536	Infectious Agent Detection; Hiv-1, Quant	I/P/O/P	388.96	111.98	147.80	119.80	291.72	114.20	117.60	85.10	85.10	369.51	311.17
226		76642	Ultrasound Of Breast	I/P/O/P	452.57	130.29	165.52	101.42	339.43	132.87	42.16	101.42	101.42	429.94	362.06
227		96360	Intravenous Infusion, Hydration; Initial, 31 Minutes To 1 Hour	I/P/O/P	784.46	225.85	404.56	247.89	588.35	230.32	509.90	247.89	247.89	745.24	627.57
228		93458	Catheter Placement In Coronary Artery(S) For Coronary Angiography	I/P/O/P	14983.84	4313.85	6165.97	3778.17	11237.88	4399.26	9739.50	3778.17	3778.17	14234.65	11987.07
229		76770	Ultrasound Of Retroperitoneal, Complete	I/P/O/P	523.32	150.66	198.84	121.84	392.49	153.65	68.82	121.84	121.84	497.15	418.66
230		93975	Vascular Study	I/P/O/P	964.45	277.67	453.81	278.07	723.34	283.16	626.89	278.07	278.07	916.23	771.56
231		76536	Ultrasound Of Head And Neck	I/P/O/P	665.86	191.70	198.84	121.84	499.40	195.50	50.84	121.84	121.84	632.57	532.69
232		76775	Ultrasound Of Retroperitoneal, Limited	I/P/O/P	915.55	263.59	198.84	121.84	686.66	268.81	51.46	121.84	121.84	869.77	732.44
233		74018	X-Ray, Abdomen	I/P/O/P	351.14	101.09	165.52	101.42	263.36	103.09	228.24	101.42	101.42	333.58	280.91
234		86900	Blood Typing Abo	I/P/O/P	268.42	77.28	253.06	82.67	201.32	78.81	4.80	2.99	2.99	255.00	214.74
235		87186	Susceptibility Studies, Antimicrobial Agent	I/P/O/P	2817.40	811.13	1070.61	867.76	2113.05	827.19	13.50	8.65	8.65	2676.53	2253.92
236		96375	Therapeutic, Prophylactic, Or Diagnostic Injection; Sequential Intravenous Push Of A New Substan	I/P/O/P	203.92	58.71	89.06	54.57	152.94	59.87	132.55	54.57	54.57	193.72	163.14
237		86923	Compatibility Test Each Unit; Electronic	I/P/O/P	487.95	140.48	324.03	198.55	365.96	143.26	20.00	198.55	198.55	463.55	390.36
238		86920	Compatibility Test Each Unit; Immediate Spin Technique	I/P/O/P	469.22	135.09	324.03	144.52	351.92	137.76	20.00	198.55	198.55	446.76	375.38
239		99152	Mod Sedation Services Provided By The Same Physician	OP	311.08	89.56	118.21	95.81	233.31	91.33	202.20	N/A	N/A	295.53	248.86
240		97161	Physical Therapy Evaluation: Low Complexity 20 Minutes	I/P/O/P	219.52	63.20	83.42	67.61	164.64	64.45	142.69	N/A	N/A	208.54	175.62
241		71046	C-Reactive Protein;	I/P/O/P	335.01	96.45	165.52	101.42	251.26	98.36	217.76	101.42	101.42	318.26	268.01
242		87040	Culture, Bacterial, Blood	I/P/O/P	96.72	27.56	36.37	10.32	71.79	28.10	16.10	10.32	10.32	90.93	76.58
243		97165	Occupational Therapy Evaluation, Low Complexity, 30 Minutes	I/P/O/P	219.52	63.20	83.42	67.61	164.64	64.45	142.69	N/A	N/A	208.54	175.62
244		97166	Occupational Therapy Evaluation, Mod Complexity 45 Minutes	I/P/O/P	442.17	127.30	168.02	136.19	331.63	129.82	287.41	N/A	N/A	420.06	353.74
245		73502	X-Ray, Hip, 2-3 Views	I/P/O/P	361.54	104.09	165.52	101.42	271.16	106.15	19.84	101.42	101.42	343.46	289.23
246		86850	Antibody Screen, Rbc, Each Serum Technique	I/P/O/P	220.56	63.50	99.11	9.77	165.42	64.76	7.80	9.77	9.77	209.53	176.45
247		72040	X-Ray, Neck, Spine, 2-3 Views	I/P/O/P	343.42	98.87	165.52	101.42	257.57	100.83	21.08	101.42	101.42	326.25	274.74
248		80307	Drug Tests	I/P/O/P	1325.47	381.60	503.68	62.14	994.10	389.16	33.85	62.14	62.14	1259.20	1060.38
249		83690	Blood Test, Lipase	I/P/O/P	86.35	24.86	32.81	6.89	64.76	25.35	10.80	6.89	6.89	82.03	69.08
250		82550	Blood Test, Creatine Kinase (Ck)	I/P/O/P	50.98	14.68	19.37	6.51	38.24	14.97	1.70	6.51	6.51	48.43	40.78
251		93306	Echocardiography, With Doppler	I/P/O/P	2028.78	584.09	1039.26	636.80	1521.59	595.65	265.00	636.80	636.80	1927.34	1623.02
252		97018	Application Of A Modality To 1 Or More Areas; Paraffin Bath	OP	120.69	34.75	45.86	37.17	90.52	35.43	78.45	N/A	N/A	114.66	96.55
253		77002	X-Ray, Guidance Of Needle Placement	I/P/O/P	1167.85	336.22	443.78	359.70	875.89	342.88	759.10	N/A	N/A	1109.46	934.28
254		96361	Intravenous Infusion, Hydration; Each Additional Hour	I/P/O/P	225.77	65.00	89.06	54.57	169.33	66.29	146.75	54.57	54.57	214.48	180.62
255		71045	X-Ray, Chest, 1 View	I/P/O/P	348.53	100.34	165.52	101.42	261.40	102.33	226.54	101.42	101.42	331.10	278.82
256		92526	Therapy Swallowing Dysfunction And/Or Oral Function For Feeding	I/P/O/P	208.08	59.91	79.07	64.09	156.06	61.09	36.00	N/A	N/A	197.68	166.46
257		97129	Therapeutic Interventions, 15 Minutes	I/P/O/P	197.68	56.91	75.12	60.89	148.26	58.04	128.49	N/A	N/A	187.80	158.14
258		82248	Bilirubin; Direct	I/P/O/P	78.03	22.46	29.65	5.02	58.52	22.91	6.90	5.02	5.02	74.13	62.42
259		86706	Hepatitis B Surface Antibody	I/P/O/P	100.92	29.05	38.35	10.74	75.69	29.63	14.80	10.74	10.74	95.87	80.74
260		83036	Hemoglobin; Glycosylated (A1C)	I/P/O/P	117.57	33.85	44.68	36.21	88.18	34.52	14.80	9.71	9.71	111.69	94.06
261		97164	Re-Evaluation Of Physical Therapy Established Plan Of Care	I/P/O/P	219.52	63.20	83.42	67.61	164.64	64.45	142.69	N/A	N/A	208.54	175.62
262		97150	Therapeutic Procedure, Group	I/P/O/P	219.52	63.20	83.42	67.61	164.64	64.45	142.69	N/A	N/A	208.54	175.62
263		97112	Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes	I/P/O/P	219.52	63.20	83.42	67.61	164.64	64.45	142.69	N/A	N/A	208.54	175.62
264		97760	Orthotic(S) Management And Training	I/P/O/P	168.54	48.52	64.05	51.91	126.41	49.48	109.55	N/A	N/A	160.11	134.83
265		93454	Catheter Placement In Coronary Artery(S) For Coronary Angiography	I/P/O/P	14983.84	4313.85	6165.97	4615.02	11237.88	4399.26	9739.50	3778.17	3778.17	14234.65	11987.07
266		84702	Gonadotropin, Chorionic (Hcg); Quantitative	I/P/O/P	159.18	45.83	60.49	15.05	119.39	46.74	19.00	15.05	15.05	151.22	127.34
267		97163	Physical Therapy Evaluation: High Complexity	I/P/O/P	780.30	224.65	296.51	240.33	585.23	229.10	507.20	N/A	N/A	741.29	624.24
268		97530	Therapeutic Activities	I/P/O/P	219.52	63.20	83.42	67.61	164.64	64.45	142.69	N/A	N/A	208.54	175.62
269		97168	Re-Evaluation Of Occupational Therapy Established Plan Of Care	I/P/O/P	219.52	63.20	83.42	67.61	164.64	64.45	142.69	N/A	N/A	208.54	175.62
270		87086	Culture, Bacterial, Urine	I/P/O/P	138.37	39.84	52.58	42.62	103.78	40.63	13.00	8.07	8.07	131.45	110.70
271		87150	Culture Typing, Dna/Rna Probe	I/P/O/P	3009.88	866.54	1143.75	927.04	2257.41	883.70	30.56	35.09	35.09	2859.39	2407.90
272		72070	X-Ray, Thoracic Spine, 2 Views	I/P/O/P	415.50	119.62	198.84	121.84	311.63	121.99	22.32	121.84	121.84	394.73	332.40
273		93798	Cardiac Rehabilitation With Ecg Monitor	I/P/O/P	424.48	122.21	245.18	150.23	318.36	124.63	275.91	150.23	150.23	403.26	339.58
274		73564	X-Ray, Knee, 4 Or More Views	I/P/O/P	445.29	128.20	198.84	137.15	333.97	130.74	21.70	121.84	121.84	423.03	366.23
275		93350	Echocardiography, Transthoracic	I/P/O/P	2748.74	791.36	1039.26	636.80	2061.56	807.03	1786.68	636.80	636.80	2611.30	2198.99
276		97116	Therapeutic Procedure, Gait Training	I/P/O/P	325.65	93.75	123.75	100.30	244.24	95.61	211.67	N/A	N/A	309.37	260.52
277		92523	Evaluation Of Speech Sound Production	I/P/O/P	590.95	170.13	224.56	182.01	443.21	173.50	48.00	N/A	N/A	561.40	472.76
278		83540	Blood Test, Iron	I/P/O/P	757.41	218.06	287.82	6.47	568.06	222.38	10.10	6.47	6.47	719.54	605.93
279		84439	Blood Test, Free T4	I/P/O/P	384.95	110.83	146.28	9.02	288.71	113.02	13.70	9.02	9.02	365.70	307.96
280		82728	Blood Test, Ferritin	I/P/O/P	593.03	170.73	225.35	13.63	444.77	174.11	21.30	13.63	13.63	563.38	474.42
281		93308	Echocardiography, Transthoracic, Follow-Up Or Limited Study	I/P/O/P	1507.54	434.02	453.81	278.07	1130.66	442.61	979.90	278.07	278.07	1432.16	1206.03
282		86592	Syphilis Test	I/P/O/P	97.80	28.16	37.16	4.27	73.35	28.71	6.70	4.27	4.27	92.91	78.24
283		83605	Blood Test, Lactic Acid	I/P/O/P	975.90	280.96	370.84	300.58	731.93	286.52	16.50	11.57	11.57	927.11	780.72
284		84100	Blood Test, Phosphorus	I/P/O/P	88.43	25.46	33.60	4.74	66.32	25.96	1.70	4.74	4.74	84.01	70.74
285		93017	Cardiovascular Stress Test	I/P/O/P	1195.42	344.16	410.68	251.64	896.57	350.98	150.00	251.64	251.64	1135.65	966.34
286		76856	Ultrasound Of Pelvis	I/P/O/P	639.85	184.21	198.84	197.07	479.89	187.86	57.66	121.84	121.84	607.86	511.88
287		70496	Ct Scan, Head Or Brain	I/P/O/P	1760.36	506.81	333.60	204.41	1320.27	516.84	220.10	204.41	204.41	1672.34	1408.29
288		74170	Ct Scan, Abdomen With And Without Contrast	I/P/O/P	4796.24	1380.84	333.60	204.41	3597.18	1408.18	238.08	204.41	204.41	4556.43	3836.99

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

Shoppable	N/A								Devon Health							
ID	Indicator	Billing Code	Description	Location Provided	Gross Charge	Aetna Health Plan: Better Health	Aetna Health Plan: Commercial	Aetna Health Plan: Medicare	Services (FKA Americare)	WellPoint	Amerihealth: HMO and PPO	Amerihealth: Medicare	Clover Health: Medicare HMO/PPO	Consumer Health Network: PPO	Correctional Medical Services, In.	
289		70486	Ct Scan, Maxillofacial Without Contrast	I/P/OP	1206.86	347.45	198.84	371.71	905.15	354.33	144.46	121.84	121.84	1146.52	965.49	
290		71260	Ct Scan, Thorax With Contrast	I/P/OP	1656.32	476.85	333.60	510.15	1242.24	486.30	200.88	204.41	204.41	1573.50	1325.06	
291		88341	Immunohistochemistry Or Immunocytochemistry, Per Specimen	I/P/OP	499.39	143.77	189.77	153.81	374.54	146.62	324.60	N/A	N/A	474.42	399.51	
292		87077	Culture, Bacterial; Aerobic Isolate	I/P/OP	82.19	23.66	31.23	8.08	61.64	24.13	8.90	8.08	8.08	78.08	65.75	
293		76937	Ultrasound Guided Vascular Access	I/P/OP	616.96	177.62	234.44	190.02	462.72	181.14	401.02	N/A	N/A	586.11	493.57	
294		77001	Fluoroscopic Guidance For Vein Dvc	I/P/OP	502.51	144.67	190.95	154.77	376.88	147.54	326.63	N/A	N/A	477.38	402.01	
295		83615	Lactate Dehydrogenase (Ld), (Ldh)	I/P/OP	84.27	24.26	32.02	6.04	63.20	24.74	1.70	6.04	6.04	80.06	67.42	
296		85652	Sedimentation Rate, Erythrocyte, Automated	I/P/OP	63.46	18.27	24.11	2.70	47.60	18.63	3.70	2.70	2.70	60.29	50.77	
297		82306	Gonadotropin, Chorionic (Hcg); Quantitative	I/P/OP	583.66	168.04	221.79	29.60	437.75	171.36	44.90	29.60	29.60	554.48	466.93	
298		86803	Hepatitis C Antibody	I/P/OP	371.42	106.93	141.14	14.27	278.57	109.05	19.70	14.27	14.27	352.85	297.14	
299		80202	Blood Test, Vancomycin	I/P/OP	196.64	56.61	74.72	13.54	147.48	57.73	19.00	13.54	13.54	186.81	157.31	
300		86704	Hepatitis B Core Antibody (Hbcab); Total	I/P/OP	125.89	36.24	47.84	12.05	94.42	36.96	16.70	12.05	12.05	119.60	100.71	
301		84484	Blood Test, Troponin	I/P/OP	199.76	57.51	75.91	12.47	149.82	58.65	12.00	12.47	12.47	189.77	159.81	
302		84145	Procalcitonin (Pct)	I/P/OP	1117.39	321.70	424.61	27.22	838.04	328.07	16.88	27.22	27.22	1061.52	893.91	
303		86140	C-Reactive Protein	I/P/OP	63.46	18.27	24.11	5.18	47.60	18.63	8.10	5.18	5.18	60.29	50.77	

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Shoppable		Coventry Health Care												Managed Care	
ID	Indicator	Billing Code	Description	Location Provided	Gross Charge	FirstHealth	First Trenton	Horizon Plan: Indemnity	Horizon Plan: Medicare Advantage	Horizon Plan: Managed	Horizon Plan: NJ Health	Horizon Plan: PPO	Incorporated	Multiplan, Inc	QualCare
1		85027	Complete Blood Count, Automated	I/POP	35.37	24.76	31.83	13.54	10.61	13.54	9.41	13.54	31.83	28.30	26.53
2		80053	Blood Test, Comprehensive Group Of Blood Chemicals	I/POP	209.12	146.38	188.21	80.05	62.74	80.05	28.22	80.05	188.21	167.30	156.84
3		80061	Blood Test, Lipids (Cholesterol And Triglycerides)	I/POP	79.07	55.35	71.16	30.27	23.72	30.27	29.40	30.27	71.16	63.26	59.30
4		84153	Psa (Prostate Specific Antigen)	I/POP	233.05	163.14	209.75	89.21	69.92	89.21	48.02	89.21	209.75	186.44	174.79
5		80076	Liver Function Blood Test Panel	I/POP	73.87	51.71	66.48	28.28	22.16	28.28	13.72	28.28	66.48	59.10	55.40
6		70450	Ct Scan, Head Or Brain, Without Contrast	I/POP	2586.43	1810.50	2327.79	244.05	121.84	244.05	269.50	244.05	2327.79	2069.14	1939.82
7		74177	Ct Scan Of Abdomen And Pelvis With Contrast	I/POP	1656.32	1159.42	1490.69	814.38	406.58	814.38	295.27	814.38	1490.69	1325.06	1242.24
8		81001	Manual Urinalysis Test With Examination Using Microscope	I/POP	39.54	27.68	35.59	15.14	11.86	15.14	4.27	15.14	35.59	31.63	29.66
9		76830	Ultrasound Pelvis Through Vagina	I/POP	638.55	446.99	574.70	244.05	121.84	244.05	144.45	244.05	574.70	510.84	478.91
10		62323	Injection Of Substance Into Spinal Canal Of Lower Back Or Sacrum Using Imaging Guidance	I/POP	3190.13	2233.09	2871.12	1647.75	822.64	1647.75	216.31	1647.75	2871.12	2552.10	2392.60
11		85610	Blood Test, Clotting Time	I/POP	15.61	10.93	14.05	5.98	4.68	5.98	5.88	5.98	14.05	12.49	11.71
12		85730	Coagulation Assessment Blood Test	I/POP	20.81	14.57	18.73	7.97	6.24	7.97	5.88	7.97	18.73	16.65	15.61
13		80048	Basic Metabolic Panel	I/POP	165.42	115.79	148.88	63.32	49.63	63.32	18.23	63.32	148.88	132.34	124.07
14		72193	Ct Scan, Pelvis, With Contrast	I/POP	1790.53	1253.37	1611.48	409.43	204.41	409.43	321.62	409.43	1611.48	1432.42	1342.90
15		93452	Insertion Of Catheter Into Left Heart For Diagnosis	OP	14983.84	10488.69	13485.46	7567.67	3778.17	7567.67	1222.42	7567.67	13485.46	11987.07	11237.88
16		76700	Ultrasound Of Abdomen	I/POP	1127.79	789.45	1015.01	244.05	121.84	244.05	129.36	244.05	1015.01	902.23	845.84
17		73721	Mri Scan Of Leg Joint	I/POP	1917.46	1342.22	1725.71	556.97	278.07	556.97	646.80	556.97	1725.71	1533.97	1438.10
18		59400	Routine Obstetric Care For Vaginal Delivery, Including Pre-And Post-Delivery Care	I/POP	8639.48	6047.64	7775.53	3307.19	2591.84	3307.19	1331.10	3307.19	7775.53	6911.58	6479.61
19		77067	Mammography, Screening, Bilateral	I/POP	552.45	386.72	497.21	211.48	165.74	211.48	129.36	211.48	497.21	441.96	414.34
20		43239	Biopsy Of The Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope	I/POP	3334.48	2334.14	3001.03	2117.19	1057.01	2117.19	523.46	2117.19	3001.03	2667.58	2500.86
21		43235	Diagnostic Examination Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope	I/POP	3334.48	2334.14	3001.03	2117.19	1057.01	2117.19	394.11	2117.19	3001.03	2667.58	2500.86
22		72110	X-Ray, Lower Back, Minimum Four Views	I/POP	412.00	288.40	370.80	244.05	121.84	244.05	53.90	244.05	370.80	329.60	309.00
23		64483	Injections Of Anesthetic And/Or Steroid Drug Into Lower Or Sacral Spine Nerve Root Using Imaging	I/POP	3231.48	2262.04	2908.33	2064.63	1030.77	2064.63	365.17	2064.63	2908.33	2585.18	2423.61
24		45385	Removal Of Polyps Or Growths Of Large Bowel Using An Endoscope	I/POP	3044.21	2130.95	2739.79	2793.32	1394.57	2793.32	707.31	2793.32	2739.79	2435.37	2283.16
25		77066	Mammography Of Both Breasts	I/POP	552.45	386.72	497.21	211.48	165.74	211.48	160.27	211.48	497.21	441.96	414.34
26		45380	Biopsy Of Large Bowel Using An Endoscope	OP	3044.21	2130.95	2739.79	2793.32	1394.57	2793.32	522.52	2793.32	2739.79	2435.37	2283.16
27		49505	Repair Of Groin Hernia Patient Age 5 Years Or Older	OP	9173.21	6421.25	8255.89	8357.76	4172.62	8357.76	528.63	8357.76	8255.89	7338.57	6879.91
28		97110	Physical Therapy, Therapeutic Exercise	I/POP	168.54	117.98	151.69	64.52	50.56	64.52	15.50	64.52	151.69	134.83	126.41
29		70553	Mri Scan Of Brain Before And After Contrast	I/POP	10228.17	7159.72	9205.35	814.38	406.58	814.38	1066.42	814.38	9205.35	8182.54	7671.13
30		81002	Automated Urinalysis Test	I/POP	23.93	16.75	21.54	9.16	7.18	9.16	1.96	9.16	21.54	19.14	17.95
31		66821	Removal Of Recurring Cataract In Lens Capsule Using Laser	OP	2013.17	1409.22	1811.85	1283.86	640.97	1283.86	394.11	1283.86	1811.85	1610.54	1509.88
32		72148	Mri Scan Of Lower Spinal Canal	I/POP	1475.29	1032.70	1327.76	556.97	278.07	556.97	646.80	556.97	1327.76	1180.23	1106.47
33		90832	Psychotherapy, 30 Min	OP	553.49	387.44	498.14	414.32	206.85	414.32	68.21	414.32	498.14	442.79	415.12
34		55700	Biopsy Of Prostate Gland	OP	8823.89	6176.72	7941.50	3377.79	2647.17	3377.79	109.62	3377.79	7941.50	7059.11	6617.92
35		45391	Ultrasound Examination Of Lower Large Bowel Using An Endoscope	OP	4229.23	2960.46	3806.31	2793.32	1394.57	2793.32	497.15	2793.32	3806.31	3383.38	3171.92
36		77065	Mammography Of One Breast	I/POP	552.45	386.72	497.21	211.48	165.74	211.48	126.34	211.48	497.21	441.96	414.34
37		19120	Removal Of 1 Or More Breast Growth, Open Procedure	OP	13029.97	9120.98	11726.97	9139.83	4563.07	9139.83	469.30	9139.83	11726.97	10423.98	9772.48
38		90834	Psychotherapy, 45 Min	OP	553.49	387.44	498.14	414.32	206.85	414.32	90.26	414.32	498.14	442.79	415.12
39		90837	Psychotherapy, 60 Min	OP	553.49	387.44	498.14	414.32	206.85	414.32	90.26	414.32	498.14	442.79	415.12
40		85025	Complete Blood Cell Count, With Differential White Blood Cells, Automated	I/POP	45.78	32.05	41.20	17.52	13.73	17.52	9.80	17.52	41.20	36.62	34.34
41		84443	Blood Test, Thyroid Stimulating Hormone (Tsh)	I/POP	650.25	455.18	585.23	248.92	195.08	248.92	49.00	248.92	585.23	520.20	487.69
42		90853	Group Psychotherapy	OP	290.27	203.19	261.24	237.14	118.39	237.14	27.50	237.14	261.24	232.22	217.70
43		45378	Diagnostic Examination Of Large Bowel Using An Endoscope	I/POP	3044.21	2130.95	2739.79	2170.81	1083.78	2170.81	433.52	2170.81	2739.79	2435.37	2283.16
44		90846	Family Psychotherapy, Not Including Patient, 50 Min	OP	482.04	337.43	433.84	414.32	206.85	414.32	24.50	414.32	433.84	385.63	361.53
45		90847	Family Psychotherapy, Including Patient, 50 Min	OP	482.04	337.43	433.84	414.32	206.85	414.32	113.94	414.32	433.84	385.63	361.53
46		99203	New Patient Office Or Other Outpatient Visit, Typically 30 Min	OP	312.12	218.48	280.91	119.48	93.64	119.48	61.14	119.48	280.91	249.70	234.09
47		99204	New Patient Office Of Other Outpatient Visit, Typically 45 Min	OP	478.58	335.01	430.72	183.20	143.57	183.20	92.31	183.20	430.72	382.86	358.94
48		99205	New Patient Office Of Other Outpatient Visit, Typically 60 Min	OP	593.03	415.12	533.73	227.01	177.91	227.01	115.60	227.01	533.73	474.42	444.77
49		99243	Patient Office Consultation, Typically 40 Min	OP	353.74	247.62	318.37	135.41	106.12	135.41	64.70	135.41	318.37	282.99	265.31
50		42820	Removal Of Tonsils And Adenoid Glands Patient Younger Than Age 12	OP	17705.65	12393.96	15935.09	13818.72	6899.01	13818.72	309.29	13818.72	15935.09	14164.52	13279.24
51		47562	Removal Of Gallbladder Using An Endoscope	OP	17445.06	12211.54	15700.55	14112.14	7045.50	14112.14	591.92	14112.14	15700.55	13956.05	13083.80
52		55866	Surgical Removal Of Prostate And Surrounding Lymph Nodes Using An Endoscope	OP	31122.18	21785.53	28009.96	24813.32	12388.08	24813.32	1762.61	24813.32	28009.96	24897.74	23341.64
53		59510	Routine Obstetric Care For Cesarean Delivery, Including Pre-And Post-Delivery Care	I/POP	3080.52	2156.36	2772.47	1179.22	924.16	1179.22	1560.78	1179.22	2772.47	2464.42	2310.39
54		59610	Routine Obstetric Care For Vaginal Delivery After Prior Cesarean Delivery Including Pre-And Post-C	I/POP	9448.91	6614.24	8504.02	3617.04	2834.67	3617.04	N/A	3617.04	8504.02	7559.13	7086.68
55		66984	Removal Of Cataract With Insertion Of Lens	OP	7045.66	4931.96	6341.09	5387.17	2689.55	5387.17	1338.93	5387.17	6341.09	5636.53	5284.25
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 IP	IP	N/A	N/A	N/A	77187.23	34323.19	33362.66	N/A	35672.23	N/A	N/A	N/A
58		DRG - 473	Cervical Spinal Fusion Without Comorbid Conditions (Cc) Or Major Comorbid Conditions Or Compli	IP	N/A	N/A	N/A	102347.06	40529.48	44237.50	N/A	47299.90	N/A	N/A	N/A
59		DRG - 743	Uterine And Adnexa Procedures For Non-Malignancy Without Comorbid Conditions (Cc) Or Major C	IP	N/A	N/A	N/A	47259.46	25987.56	20426.97	N/A	21841.05	N/A	N/A	N/A
60		29826	Shaving Of Shoulder Bone Using An Endoscope	OP	192.97	135.08	173.67	73.87	57.89						

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Shoppable		N/A		Coventry Health Care															Managed Care			
ID	Indicator	Billing Code	Description	Location Provided	Gross Charge	(FKA CCN and FirstHealth)	First Trenton Indemnity	Horizon Plan: Indemnity	Horizon Plan: Medicare Advantage	Horizon Plan: Managed	Horizon Plan: NJ Health	Horizon Plan: PPO	Incorporated	Multiplan, Inc	QualCare							
145		97597	Debridement	IP/OP	740.76	518.53	666.68	468.34	233.82	468.34	848.25	468.34	666.68	592.61	555.57							
146		90651	Hpv Vaccine	IP/OP	1151.67	806.17	1036.50	440.86	345.50	440.86	N/A	440.86	1036.50	921.34	863.75							
147		96413	Chemotherapy Administration, Intravenous Infusion Technique; Up To 1 Hour	IP/OP	1264.09	884.86	1137.68	771.03	384.94	771.03	571.59	1137.68	1011.27	948.07								
148		92570	Acoustic Immittance Testing	OP	553.49	387.44	498.14	300.37	149.96	300.37	46.33	300.37	498.14	442.79	415.12							
149		92133	Scanning Computerized Ophthalmic Diagnostic Imaging, Optic Nerve	OP	228.89	160.22	206.00	137.71	68.75	137.71	206.00	137.71	206.00	183.11	171.67							
150		90675	Rabies Vaccine, For Intramuscular Use	IP/OP	1624.80	1137.36	1462.32	720.22	359.57	720.22	N/A	720.22	1462.32	1299.84	1218.60							
151		96417	Chemotherapy Administration, Intravenous Infusion Technique	IP/OP	258.02	180.61	232.22	168.07	83.91	168.07	589.86	168.07	232.22	206.42	193.52							
152		92083	Visual Field Examination	IP/OP	441.13	308.79	397.02	310.59	155.06	310.59	99.81	310.59	397.02	352.90	330.85							
153		92136	Ophthalmic Biometry	OP	441.13	308.79	397.02	310.59	155.06	310.59	104.40	310.59	397.02	352.90	330.85							
154		96401	Chemotherapy Administration, Subcutaneous Or Intramuscular; Non-Hormonal Anti-Neoplastic	IP/OP	511.88	358.32	460.69	168.07	83.91	168.07	200.97	168.07	460.69	409.50	383.91							
155		96402	Chemotherapy Administration, Subcutaneous Or Intramuscular; Hormonal Anti-Neoplastic	OP	321.48	225.04	289.33	168.07	83.91	168.07	164.43	168.07	289.33	257.18	241.11							
156		90734	Meningococcal Conjugate Vaccine	IP/OP	294.44	206.11	265.00	112.71	88.33	112.71	N/A	112.71	265.00	235.55	220.83							
157		96365	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis; Initial, Up To 1 Hour	IP/OP	845.85	592.10	761.27	496.52	247.89	496.52	97.25	496.52	761.27	676.68	634.39							
158		90670	Pneumococcal Conjugate Vaccine, 13 Valent (Pcv13), For Intramuscular Use	IP/OP	874.12	611.88	786.71	334.61	262.24	334.61	N/A	786.71	699.30	655.59								
159		77336	Continuing Medical Physics Consultation	IP/OP	1521.06	1064.74	1368.95	313.75	156.64	313.75	103.21	1368.95	1216.85	1140.80								
160		92602	Diagnostic Analysis Of Cochlear Implant, Patient Younger Than 7 Yrs Of Age; Subsequent Reprog	OP	553.49	387.44	498.14	300.37	149.96	300.37	608.13	300.37	498.14	442.79	415.12							
161		92025	Computerized Corneal Topography	OP	219.52	153.66	197.57	137.71	68.75	137.71	N/A	197.57	175.62	164.64								
162		93923	Complete Bilateral Noninvasive Physiologic Studies Of Upper Or Lower Extremity Arteries, 3 Or Mo	IP/OP	1045.60	731.92	941.04	504.03	251.64	504.03	715.14	504.03	941.04	836.48	784.20							
163		82948	Glucose Test	IP/OP	45.62	31.93	41.06	17.46	13.69	17.46	2.94	41.06	36.50	34.22								
164		94150	Vital Capacity, Total (Separate Procedure)	IP/OP	588.87	412.21	529.98	300.37	149.96	300.37	169.65	300.37	529.98	471.10	441.65							
165		94060	Bronchodilation Responsiveness	IP/OP	1064.33	745.03	957.90	871.06	434.88	871.06	566.37	871.06	957.90	851.46	798.25							
166		90732	Pneumococcal Polysaccharide Vaccine	IP/OP	438.53	306.97	394.68	167.87	131.56	167.87	122.67	167.87	394.68	350.82	328.90							
167		92584	Electrocochleography	OP	1018.55	712.99	916.70	300.37	149.96	300.37	113.17	300.37	916.70	814.84	763.91							
168		92550	Tympanometry And Reflex Threshold Measurements	OP	553.49	387.44	498.14	300.37	149.96	300.37	504.03	498.14	442.79	415.12								
169		92626	Evaluation Of Auditory Function, First Hour	OP	553.49	387.44	498.14	300.37	149.96	300.37	118.00	300.37	498.14	442.79	415.12							
170		92579	Visual Reinforcement Audiometry (Vra)	IP/OP	956.13	669.29	860.52	504.03	251.64	504.03	276.66	504.03	860.52	764.90	717.10							
171		92582	Conditioning Play Audiometry	OP	956.13	669.29	860.52	300.37	149.96	300.37	284.49	300.37	860.52	764.90	717.10							
172		90686	Influenza Virus Vaccine	IP/OP	73.43	51.40	66.09	28.11	22.03	28.11	N/A	66.09	58.74	55.07								
173		92604	Diagnostic Analysis Of Cochlear Implant, Age 7 Yrs Or Older	OP	553.49	387.44	498.14	300.37	149.96	300.37	261.00	300.37	498.14	442.79	415.12							
174		90715	Tetanus, Diphtheria Toxoids And Acellular Pertussis Vaccine (Tdap), 7 Years+	IP/OP	355.48	248.84	319.93	136.08	106.64	136.08	N/A	319.93	284.38	266.61								
175		86901	Blood Typing Rhd	IP/OP	190.39	133.27	171.35	87.19	43.53	87.19	3.92	87.19	171.35	152.31	142.79							
176		93922	Limited Bilateral Noninvasive Physiologic Studies Of Upper Or Lower Extremity Arteries	IP/OP	557.65	390.36	501.89	310.59	155.06	310.59	574.20	310.59	501.89	446.12	418.24							
177		36415	Routine Venipuncture	IP/OP	62.42	43.69	56.18	23.89	18.73	23.89	3.88	23.89	56.18	49.94	46.82							
178		92610	Evaluation Of Oral And Pharyngeal Swallowing Function	IP/OP	275.71	193.00	248.14	105.54	82.71	105.54	168.74	248.14	220.57	206.78								
179		92522	Evaluation Of Speech Sound Production	IP/OP	590.95	413.67	531.86	226.22	177.29	226.22	103.23	531.86	472.76	443.21								
180		93880	Duplex Scan Of Extracranial Arteries; Complete Bilateral Study	IP/OP	894.74	626.32	805.27	556.97	278.07	556.97	973.53	805.27	715.79	671.06								
181		97802	Medical Nutrition Therapy	OP	109.24	76.47	98.32	41.82	32.77	41.82	57.42	41.82	98.32	87.39	81.93							
182		86703	Antibody; Hiv-1 And Hiv-2, Single Result	IP/OP	79.07	55.35	71.16	30.27	23.72	30.27	41.16	30.27	71.16	63.26	59.30							
183		93970	Duplex Scan Of Extremity Veins; Complete Bilateral Study	IP/OP	889.54	622.68	800.59	556.97	278.07	556.97	1177.11	556.97	800.59	711.63	667.16							
184		96376	Therapeutic, Prophylactic, Or Diagnostic Injection Sequential Intravenous Push Of The Same Subst	IP/OP	227.85	159.50	205.07	87.22	68.36	87.22	6.04	87.22	205.07	182.28	170.89							
185		90744	Hepatitis B Vaccine (Hepb), Pediatric/Adolescent Dosage, 3 Dose Schedule	IP/OP	85.86	60.10	77.27	32.87	25.76	32.87	86.03	32.87	77.27	68.69	64.40							
186		93971	Duplex Scan Of Extremity Veins; Unilateral Or Limited Study	IP/OP	405.76	284.03	365.18	244.05	121.84	244.05	1137.96	365.18	324.61	304.32								
187		90471	Immunization Administration	IP/OP	253.86	177.70	228.47	168.07	83.91	168.07	49.59	168.07	228.47	203.09	190.40							
188		90632	Hepatitis A Vaccine (Hepa), Adult Dosage, For Intramuscular Use	IP/OP	275.76	193.03	248.18	105.56	82.73	105.56	207.08	248.18	220.61	206.82								
189		99153	Mod Sedation Services Provided By The Same Physician	OP	376.62	263.63	338.96	144.17	112.99	144.17	16.83	338.96	301.30	282.47								
190		93303	Transthoracic Echocardiography	IP/OP	2904.80	2033.36	2614.32	1275.51	636.80	1275.51	736.02	2614.32	2323.84	2178.60								
191		73552	X-Ray, Femur, 2 Views	IP/OP	377.15	264.01	339.44	203.14	101.42	203.14	35.28	339.44	301.72	282.86								
192		96372	Therapeutic, Prophylactic, Or Diagnostic Injection; Subcutaneous Or Intramuscular	IP/OP	199.76	139.83	179.78	168.07	83.91	168.07	7.97	179.78	159.81	149.82								
193		95851	Range Of Motion Measurements And Report	IP/OP	120.69	84.48	108.62	46.20	36.21	46.20	88.74	46.20	108.62	96.55	90.52							
194		77300	Basic Radiation Dosimetry Calculation	IP/OP	685.62	479.93	617.06	313.75	156.64	313.75	101.92	617.06	548.50	514.22								
195		96366	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis, Each Additional Hour	IP/OP	269.46	188.62	242.51	109.30	54.57	109.30	31.48	109.30	242.51	215.57	202.10							
196		94761	Noninvasive Ear Or Pulse Oximetry For Oxygen Saturation; Multiple Determinations	IP/OP	398.47	278.93	358.62	152.53	119.54	152.53	73.08	358.62	318.78	298.85								
197		94640	Inhalation Therapy	IP/OP	677.30	474.11	609.57	511.17	255.20	511.17	96.57	511.17	609.57	541.84	507.98							
198		77412	Radiation Therapy Delivery	IP/OP	949.89	664.92	854.90	1289.81	643.94	1289.81	80.36	1289.81	854.90	759.91	712.42							
199		77063	Screening Digital Breast Tomosynthesis, Bilateral	IP/OP	552.45	386.72	497.21	211.48	165.74	211.48	59.45	211.48	497.21	441.96	414.34							
200		87591	Infectious Agent Detection, Neisseria Gonorrhoeae	IP/OP	372.46	260.72	335.21	142.58	111.74	142.58	73.89	335.21	297.97	279.35								
201		97535	Self-Care/Home Management Training	IP/OP	219.52	153.66	197.57	84.03	65.86	84.03	N/A	84.03	197.57	175.62	164.64							
202		70551	Mri, Brain Without Contrast	IP/OP	5852.25	4096.58	5267.03	556.97	278.07	556.97	646.80	556.97	5267.03	4681.80	4389.19							
203		97162	Physical Therapy Evaluation, Complex, 30 Minutes	IP/OP	398.47	278.93	358.62	152.53	119.54	152.53	32.34	358.62	318.78	298.85								
204		92507	Therapy Speech And/Or Auditory	IP/OP	240.33	168.23	216.30	92.00	72.10	92.00	25.58	92.00	216.30	192.26	180.25							
205		926																				

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

Shoppable		N/A				Coventry Health Care										Managed Care			
ID	Indicator	Billing Code	Description	Location Provided	Gross Charge	(FKA CCN and FirstHealth)	First Trenton Indemnity	Horizon Plan: Indemnity	Horizon Plan: Medicare Advantage	Horizon Plan: Managed	Horizon Plan: NJ Health	Horizon Plan: PPO	Incorporated	Multiplan, Inc	QualCare				
217		94681	Oxygen Uptake, Expired Gas Analysis	IP/OP	997.74	698.42	897.97	871.06	434.88	871.06	234.90	871.06	897.97	798.19	748.31				
218		94010	Spirometry	IP/OP	588.87	412.21	529.98	504.03	251.64	504.03	414.99	504.03	529.98	471.10	441.65				
219		93888	Transcranial Doppler Study Of The Intracranial Arteries; Limited Study	IP/OP	1334.83	934.38	1201.35	244.05	121.84	244.05	357.57	244.05	1201.35	1067.86	1001.12				
220		77417	Therapeutic Radiology Port Image(S)	IP/OP	398.47	278.93	358.62	152.53	119.54	152.53	21.56	152.53	358.62	318.78	298.85				
221		94729	Diffusing Capacity	IP/OP	398.47	278.93	358.62	152.53	119.54	152.53	81.51	152.53	358.62	318.78	298.85				
222		77085	Bone Density Study, Dual-Energy X-Ray Absorptiometry	IP/OP	454.65	318.26	409.19	244.05	121.84	244.05	48.96	244.05	409.19	363.72	340.99				
223		77334	Therapy Devices, Design And Construction; Complex	IP/OP	1531.47	1072.03	1378.32	874.03	436.36	874.03	286.16	874.03	1378.32	1225.18	1148.60				
224		94668	Manipulation Of Chest Wall	IP/OP	256.98	179.89	231.28	310.59	155.06	310.59	109.62	310.59	231.28	205.58	192.74				
225		87536	Infectious Agent Detection; Hiv-1, Quant	IP/OP	388.96	272.27	350.06	148.89	116.69	148.89	229.32	148.89	350.06	311.17	291.72				
226		76642	Ultrasound Of Breast	IP/OP	452.57	316.80	407.31	203.14	101.42	203.14	77.50	203.14	407.31	362.06	339.43				
227		96360	Intravenous Infusion, Hydration; Initial, 31 Minutes To 1 Hour	IP/OP	784.46	549.12	706.01	496.52	247.89	496.52	368.01	496.52	706.01	627.57	588.35				
228		93458	Catheter Placement In Coronary Artery(S) For Coronary Angiography	IP/OP	14983.84	10488.69	13485.46	7567.67	3778.17	7567.67	1521.60	7567.67	13485.46	11987.07	11237.88				
229		76770	Ultrasound Of Retroperitoneal, Complete	IP/OP	523.32	366.32	470.99	244.05	121.84	244.05	129.36	244.05	470.99	418.66	392.49				
230		93975	Vascular Study	IP/OP	964.45	675.12	868.01	566.97	278.07	566.97	845.64	566.97	868.01	771.56	723.34				
231		76536	Ultrasound Of Head And Neck	IP/OP	665.86	466.10	599.27	244.05	121.84	244.05	80.24	244.05	599.27	532.69	499.40				
232		76775	Ultrasound Of Retroperitoneal, Limited	IP/OP	915.55	640.89	824.00	244.05	121.84	244.05	129.36	244.05	824.00	732.44	686.66				
233		74018	X-Ray, Abdomen	IP/OP	351.14	245.80	316.03	203.14	101.42	203.14	31.99	203.14	316.03	280.91	263.36				
234		86900	Blood Typing Abo	IP/OP	268.42	187.89	241.58	310.59	155.06	310.59	3.92	310.59	241.58	214.74	201.32				
235		87186	Susceptibility Studies, Antimicrobial Agent	IP/OP	2817.40	1972.18	2535.66	1078.50	845.22	1078.50	21.56	1078.50	2535.66	2253.92	2113.05				
236		96375	Therapeutic, Prophylactic, Or Diagnostic Injection; Sequential Intravenous Push Of A New Substan	IP/OP	203.92	142.74	183.53	109.30	54.57	109.30	11.73	109.30	183.53	163.14	152.94				
237		86923	Compatibility Test Each Unit; Electronic	IP/OP	487.95	341.57	439.16	397.70	198.55	397.70	19.25	397.70	439.16	390.36	365.96				
238		86920	Compatibility Test Each Unit; Immediate Spin Technique	IP/OP	469.22	328.45	422.30	397.70	198.55	397.70	25.93	397.70	422.30	375.38	351.92				
239		99152	Mod Sedation Services Provided By The Same Physician	OP	311.08	217.76	279.97	119.08	93.32	119.08	78.80	119.08	279.97	248.86	233.31				
240		97161	Physical Therapy Evaluation: Low Complexity 20 Minutes	IP/OP	219.52	153.66	197.57	84.03	65.86	84.03	32.34	84.03	197.57	175.62	164.64				
241		71046	C-Reactive Protein;	IP/OP	335.01	234.51	301.51	203.14	101.42	203.14	36.87	203.14	301.51	268.01	251.26				
242		87040	Culture, Bacterial, Blood	IP/OP	95.72	67.00	86.15	36.64	28.72	36.64	17.64	36.64	86.15	76.58	71.79				
243		97165	Occupational Therapy Evaluation, Low Complexity, 30 Minutes	IP/OP	219.52	153.66	197.57	84.03	65.86	84.03	31.35	84.03	197.57	175.62	164.64				
244		97166	Occupational Therapy Evaluation, Mod Complexity 45 Minutes	IP/OP	442.17	309.52	397.95	169.26	132.65	169.26	31.35	169.26	397.95	353.74	331.63				
245		73502	X-Ray, Hip, 2-3 Views	IP/OP	361.54	253.08	325.39	203.14	101.42	203.14	45.00	203.14	325.39	289.23	271.16				
246		86850	Antibody Screen, Rbc, Each Serum Technique	IP/OP	220.56	154.39	198.50	121.64	60.73	121.64	8.23	121.64	198.50	176.45	165.42				
247		72040	X-Ray, Neck, Spine, 2-3 Views	IP/OP	343.42	240.39	309.08	203.14	101.42	203.14	34.79	203.14	309.08	274.74	257.57				
248		80307	Drug Tests	IP/OP	1325.47	927.83	1192.92	507.39	397.64	507.39	124.26	507.39	1192.92	1060.38	994.10				
249		83690	Blood Test, Lipase	IP/OP	86.35	60.45	77.72	33.05	25.91	33.05	8.82	33.05	77.72	69.08	64.76				
250		82550	Blood Test, Creatine Kinase (Ck)	IP/OP	50.98	35.69	45.88	19.52	15.29	19.52	9.41	19.52	45.88	40.78	38.24				
251		93306	Echocardiography, With Doppler	IP/OP	2028.78	1420.15	1825.90	1275.51	636.80	1275.51	1545.12	1275.51	1825.90	1623.02	1521.59				
252		97018	Application Of A Modality To 1 Or More Areas; Paraffin Bath	OP	120.69	84.48	108.62	46.20	36.21	46.20	N/A	46.20	108.62	96.55	90.52				
253		77002	X-Ray, Guidance Of Needle Placement	IP/OP	1167.85	817.50	1051.07	447.05	350.36	447.05	56.13	447.05	1051.07	934.28	875.89				
254		96361	Intravenous Infusion, Hydration; Each Additional Hour	IP/OP	225.77	158.04	203.19	109.30	54.57	109.30	151.38	109.30	203.19	180.62	169.33				
255		71045	X-Ray, Chest, 1 View	IP/OP	348.53	243.97	313.68	203.14	101.42	203.14	24.01	203.14	313.68	278.82	261.40				
256		92526	Therapy Swallowing Dysfunction And/Or Oral Function For Feeding	IP/OP	208.08	145.66	187.27	79.65	62.42	79.65	N/A	79.65	187.27	166.46	156.06				
257		97129	Therapeutic Interventions, 15 Minutes	IP/OP	197.68	138.38	177.91	75.67	59.30	75.67	34.48	75.67	177.91	158.14	148.26				
258		82248	Bilirubin; Direct	IP/OP	78.03	54.62	70.23	29.87	23.41	29.87	17.64	29.87	70.23	62.42	58.52				
259		86706	Hepatitis B Surface Antibody	IP/OP	100.92	70.64	90.83	38.63	30.28	38.63	25.48	38.63	90.83	80.74	75.69				
260		83036	Hemoglobin; Glycosylated (A1C)	IP/OP	117.57	82.30	105.81	45.01	35.27	45.01	12.94	45.01	105.81	94.06	88.18				
261		97164	Re-Evaluation Of Physical Therapy Established Plan Of Care	IP/OP	219.52	153.66	197.57	84.03	65.86	84.03	21.98	84.03	197.57	175.62	164.64				
262		97150	Therapeutic Procedure, Group	IP/OP	219.52	153.66	197.57	84.03	65.86	84.03	N/A	84.03	197.57	175.62	164.64				
263		97112	Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes	IP/OP	219.52	153.66	197.57	84.03	65.86	84.03	14.64	84.03	197.57	175.62	164.64				
264		97760	Orthotic(S) Management And Training	IP/OP	168.54	117.98	151.69	64.52	50.56	64.52	33.98	64.52	151.69	134.83	126.41				
265		93454	Catheter Placement In Coronary Artery(S) For Coronary Angiography	IP/OP	14983.84	10488.69	13485.46	7567.67	3778.17	7567.67	1261.18	7567.67	13485.46	11987.07	11237.88				
266		84702	Gonadotropin, Chorionic (Hcg); Quantitative	IP/OP	159.18	111.43	143.26	60.93	47.75	60.93	22.32	60.93	143.26	127.34	119.39				
267		97163	Physical Therapy Evaluation: High Complexity	IP/OP	780.30	546.21	702.27	298.70	234.09	298.70	32.34	298.70	702.27	624.24	585.23				
268		97530	Therapeutic Activities	IP/OP	219.52	153.66	197.57	84.03	65.86	84.03	36.10	84.03	197.57	175.62	164.64				
269		97168	Re-Evaluation Of Occupational Therapy Established Plan Of Care	IP/OP	219.52	153.66	197.57	84.03	65.86	84.03	20.72	84.03	197.57	175.62	164.64				
270		87086	Culture, Bacterial, Urine	IP/OP	138.37	96.86	124.53	52.97	41.51	52.97	11.76	52.97	124.53	110.70	103.78				
271		87150	Culture Typing, Dna/Rna Probe	IP/OP	3009.88	2106.92	2708.89	1152.18	902.96	1152.18	38.96	1152.18	2708.89	2407.90	2257.41				
272		72070	X-Ray, Thoracic Spine, 2 Views	IP/OP	415.50	290.85	373.95	244.05	121.84	244.05	36.55	244.05	373.95	332.40	311.63				
273		93798	Cardiac Rehabilitation With Ecg Monitor	IP/OP	424.48	297.14	382.03	300.91	150.23	300.91	177.48	300.91	382.03	339.58	318.36				
274		73564	X-Ray, Knee, 4 Or More Views	IP/OP	445.29	311.70	400.76	244.05	121.84	244.05	48.51	244.05	400.76	356.23	333.97				
275		93350	Echocardiography, Transthoracic	IP/OP	2748.74	1924.12	2473.87	1275.51	636.80	1275.51	1299.78	1275.51	2473.87	2198.99	2061.66				
276		97116	Therapeutic Procedure, Gait Training	IP/OP	325.65	227.96	293.09	124.66	97.70	124.66	293.09	124.66	293.09	260.52	244.24				
277		92523	Evaluation Of Speech Sound Production	IP/OP	590.95	413.67	531.86	226.22	177.29	226.22	214.86	226.22	531.86	472.76	443.21				
278		83540	Blood Test, Iron	IP/OP	757.41	530.19	681.67	289.94	227.22	289.94	8.82	289.94	681.67	605.93	568.06				
279		84439	Blood Test, Free T4	IP/OP	384.93	269.47	346.46	147.36	115.49	147.36	19.60	147.36	346.46	307.96	288.71				
280		82728	Blood Test, Ferritin	IP/OP	593.03	415.12	533.73	227.01	177.91	227.01	31.36	227.01	533.73	474.42	444.77				
281		93308	Echocardiography, Transthoracic, Follow-Up Or Limited Study	IP/OP	1507.54	1055.28	1356.79	556.97	278.07	556.97	1177.11	556.97	1356.79	1206.03	1130.66				
282		86592	Syphilis Test	IP/OP	97.80	68.46	88.02	37.44	29.34	37.44	2.94	37.44	88.02	78.24	73.35				
283		83605	Blood Test, Lactic Acid	IP/OP	975.90	683.13	878.31	373.57	292.77	373.57	29.40	373.57	878.31	780.72	731.93				
284		84100	Blood Test, Phosphorus	IP/OP	88.43	61.90	79.59	33.85	26.53	33.85	5.88	33.85	79.59	70.74	66.32				
285		9																	

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Shoppable ID	N/A Indicator	Billing Code	Description	Location Provided	Coventry Health Care (FKA CCN and FirstHealth)		First Trenton Indemnity	Horizon Plan: Indemnity	Horizon Plan: Medicare Advantage	Horizon Plan: Managed	Horizon Plan: NJ Health	Horizon Plan: PPO	Managed Care		Multiplan, Inc	QualCare
					Gross Charge								Incorporated			
289		70486	Ct Scan, Maxillofacial Without Contrast	IP/OP	1206.86	844.80	1086.17	244.05	121.84	244.05	269.50	244.05	1086.17		965.49	905.15
290		71260	Ct Scan, Thorax With Contrast	IP/OP	1656.32	1159.42	1490.69	409.43	204.41	409.43	334.96	409.43	1490.69		1325.06	1242.24
291		88341	Immunohistochemistry Or Immunocytochemistry, Per Specimen	IP/OP	499.39	349.57	449.45	191.17	149.82	191.17	58.41	191.17	449.45		399.51	374.54
292		87077	Culture, Bacterial; Aerobic Isolate	IP/OP	82.19	57.53	73.97	31.46	24.66	31.46	8.92	31.46	73.97		65.75	61.64
293		76937	Ultrasound Guided Vascular Access	IP/OP	616.96	431.87	555.26	236.17	185.09	236.17	56.84	236.17	555.26		493.57	462.72
294		77001	Fluoroscopic Guidance For Vein Dvc	IP/OP	502.51	351.76	452.26	192.36	150.75	192.36	56.13	192.36	452.26		402.01	376.88
295		83615	Lactate Dehydrogenase (Ld), (Ldh)	IP/OP	84.27	58.99	75.84	32.26	25.28	32.26	8.23	32.26	75.84		67.42	63.20
296		85652	Sedimentation Rate, Erythrocyte, Automated	IP/OP	63.46	44.42	57.11	24.29	19.04	24.29	4.43	24.29	57.11		50.77	47.60
297		82306	Gonadotropin, Chorionic (Hcg); Quantitative	IP/OP	583.66	408.56	525.29	223.43	175.10	223.43	58.80	223.43	525.29		466.93	437.75
298		86803	Hepatitis C Antibody	IP/OP	371.42	259.99	334.28	142.18	111.43	142.18	40.96	142.18	334.28		297.14	278.57
299		80202	Blood Test, Vancomycin	IP/OP	196.64	137.65	176.98	75.27	58.99	75.27	23.52	75.27	176.98		157.31	147.48
300		86704	Hepatitis B Core Antibody (Hbcab); Total	IP/OP	125.89	88.12	113.30	48.19	37.77	48.19	25.48	48.19	113.30		100.71	94.42
301		84484	Blood Test, Troponin	IP/OP	199.76	139.83	179.78	76.47	59.93	76.47	77.62	76.47	179.78		159.81	149.82
302		84145	Procalcitonin (Pct)	IP/OP	1117.39	782.17	1005.65	427.74	335.22	427.74	29.73	427.74	1005.65		893.91	838.04
303		86140	C-Reactive Protein	IP/OP	63.46	44.42	57.11	24.29	19.04	24.29	5.88	24.29	57.11		50.77	47.60

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

Shoppable	N/A	Billing Code	Description	Location	Gross Charge	Three Rivers Provider	United Healthcare	United Healthcare	United Healthcare	United Healthcare	Fidelis: Medicaid	Fidelis:	Minimum	Maximum	Discounted Cash
ID	Indicator			Provided		Network	Community Plan:	Community Plan:	HealthCare:	HealthCare:	Medicaid	Medicare	Negotiated Rate	Negotiated Rate	Price
1		85027	Complete Blood Count, Automated	I/OP	35.37	33.60	10.18	6.47	Contact UH	Contact UH	10.18	6.47	6.29	33.60	7.44
2		80053	Blood Test, Comprehensive Group Of Blood Chemicals	I/OP	209.12	198.66	8.45	10.56	Contact UH	Contact UH	8.45	10.56	8.45	198.66	12.14
3		80061	Blood Test, Lipids (Cholesterol And Triglycerides)	I/OP	79.07	75.12	10.71	13.39	Contact UH	Contact UH	10.71	13.39	10.71	75.12	15.40
4		84153	Psa (Prostate Specific Antigen)	I/OP	233.05	221.40	14.71	18.39	Contact UH	Contact UH	14.71	18.39	13.18	221.40	21.15
5		80076	Liver Function Blood Test Panel	I/OP	73.87	70.18	6.54	8.17	Contact UH	Contact UH	6.54	8.17	6.54	70.18	9.40
6		70450	Ct Scan, Head Or Brain, Without Contrast	I/OP	2586.43	2457.11	744.63	121.84	Contact UH	Contact UH	744.63	121.84	121.84	2457.11	140.12
7		74177	Ct Scan Of Abdomen And Pelvis With Contrast	I/OP	1656.32	1573.50	476.85	406.58	Contact UH	Contact UH	476.85	406.58	196.54	1573.50	467.57
8		81001	Manual Urinalysis Test With Examination Using Microscope	I/OP	39.54	37.56	2.54	3.17	Contact UH	Contact UH	2.54	3.17	2.54	37.56	3.65
9		76830	Ultrasound Pelvis Through Vagina	I/OP	638.55	606.62	183.84	121.84	Contact UH	Contact UH	183.84	121.84	57.66	606.62	140.12
10		62323	Injection Of Substance Into Spinal Canal Of Lower Back Or Sacrum Using Imaging Guidance	I/OP	3190.13	3030.62	918.44	822.64	1871.51	1929.00	918.44	822.64	216.31	3030.62	946.04
11		85610	Blood Test, Clotting Time	I/OP	15.61	14.83	3.43	4.29	Contact UH	Contact UH	3.43	4.29	3.43	14.83	4.93
12		85730	Coagulation Assessment Blood Test	I/OP	20.81	19.77	5.99	6.01	Contact UH	Contact UH	5.99	6.01	5.69	19.77	6.91
13		80048	Basic Metabolic Panel	I/OP	165.42	157.15	6.77	8.46	Contact UH	Contact UH	6.77	8.46	6.77	157.15	9.73
14		72193	Ct Scan, Pelvis, With Contrast	I/OP	1790.53	1701.00	515.49	204.41	Contact UH	Contact UH	515.49	204.41	192.82	1701.00	236.07
15		93452	Insertion Of Catheter Into Left Heart For Diagnosis	OP	14983.84	14234.65	4313.85	3778.17	6552.86	6750.00	4313.85	3778.17	1222.42	14234.65	4344.90
16		76700	Ultrasound Of Abdomen	I/OP	1127.79	1071.40	324.69	121.84	Contact UH	Contact UH	324.69	121.84	70.68	1071.40	140.12
17		73721	Mri Scan Of Leg Joint	I/OP	1917.46	1821.59	552.04	278.07	Contact UH	Contact UH	552.04	278.07	278.07	1821.59	319.78
18		59400	Routine Obstetric Care For Vaginal Delivery, Including Pre-And Post-Delivery Care	I/OP	8639.48	8207.51	2487.31	N/A	Contact UH	Contact UH	2487.31	N/A	1331.10	8207.51	T.B.D
19		77067	Mammography, Screening, Bilateral	I/OP	552.45	524.83	159.05	N/A	Contact UH	Contact UH	159.05	N/A	37.20	524.83	T.B.D
20		43239	Biopsy Of The Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope	I/OP	3334.48	3167.76	960.00	1057.01	2567.79	2646.00	960.00	1057.01	523.46	3167.76	1215.56
21		43235	Diagnostic Examination Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope	I/OP	3334.48	3167.76	960.00	1057.01	2567.79	2646.00	960.00	1057.01	300.00	3167.76	1215.56
22		72110	X-Ray, Lower Back, Minimum Four Views	I/OP	412.00	391.40	118.61	121.84	Contact UH	Contact UH	118.61	121.84	31.00	391.40	140.12
23		64843	Injections Of Anesthetic And/Or Steroid Drug Into Lower Or Sacral Spine Nerve Root Using Imaging	I/OP	3231.48	3069.91	930.34	1030.77	1871.51	1929.00	930.34	1030.77	300.00	3069.91	1185.39
24		45385	Removal Of Polyps Or Growths Of Large Bowel Using An Endoscope	I/OP	3044.21	2892.00	876.43	1394.57	2567.79	2646.00	876.43	1394.57	550.00	2892.00	1603.76
25		77066	Mammography Of Both Breasts	I/OP	552.45	524.83	159.05	N/A	Contact UH	Contact UH	159.05	N/A	48.98	524.83	T.B.D
26		45380	Biopsy Of Large Bowel Using An Endoscope	OP	3044.21	2892.00	876.43	1394.57	2567.79	2646.00	876.43	1394.57	522.52	2892.00	1603.76
27		49505	Repair Of Groin Hernia Patient Age 5 Years Or Older	OP	9173.21	8714.55	2640.97	4172.62	3596.76	3705.00	2640.97	4172.62	528.63	8714.55	4798.51
28		97110	Physical Therapy, Therapeutic Exercise	I/OP	168.54	160.11	48.52	N/A	Contact UH	Contact UH	48.52	N/A	15.50	160.11	T.B.D
29		70553	Mri Scan Of Brain Before And After Contrast	I/OP	10228.17	9716.76	2944.69	406.58	Contact UH	Contact UH	2944.69	406.58	406.58	9716.76	467.57
30		81002	Automated Urinalysis Test	I/OP	23.93	22.73	2.78	3.48	Contact UH	Contact UH	2.78	3.48	1.96	22.73	4.00
31		66821	Removal Of Recurring Cataract In Lens Capsule Using Laser	OP	2013.17	1912.51	579.59	640.97	1871.51	1929.00	579.59	640.97	394.11	1929.00	737.12
32		72148	Mri Scan Of Lower Spinal Canal	I/OP	1475.29	1401.53	424.74	278.07	Contact UH	Contact UH	424.74	278.07	278.07	1401.53	319.78
33		90832	Psychotherapy, 30 Min	OP	553.49	525.82	159.35	206.85	Contact UH	Contact UH	159.35	206.85	68.21	525.82	237.88
34		55700	Biopsy Of Prostate Gland	OP	8823.89	8382.70	2540.40	N/A	2567.79	2646.00	2540.40	N/A	109.62	8382.70	T.B.D
35		45391	Ultrasound Examination Of Lower Large Bowel Using An Endoscope	OP	4229.23	4017.77	1217.60	1394.57	2567.79	2646.00	1217.60	1394.57	497.15	4017.77	1603.76
36		77065	Mammography Of One Breast	I/OP	552.45	524.83	159.05	N/A	Contact UH	Contact UH	159.05	N/A	38.44	524.83	T.B.D
37		19120	Removal Of 1 Or More Breast Growth, Open Procedure	OP	13029.97	12378.47	3751.33	4563.07	2859.28	2946.00	3751.33	4563.07	469.30	12378.47	5247.53
38		90834	Psychotherapy, 45 Min	OP	553.49	525.82	159.35	206.85	Contact UH	Contact UH	159.35	206.85	90.26	525.82	237.88
39		90837	Psychotherapy, 60 Min	OP	553.49	525.82	159.35	206.85	Contact UH	Contact UH	159.35	206.85	90.26	525.82	237.88
40		85025	Complete Blood Cell Count, With Differential White Blood Cells, Automated	I/OP	45.78	43.49	6.22	7.77	Contact UH	Contact UH	6.22	7.77	6.22	43.49	8.94
41		84443	Blood Test, Thyroid Stimulating Hormone (Tsh)	I/OP	650.25	617.74	13.44	16.80	Contact UH	Contact UH	13.44	16.80	11.68	617.74	19.32
42		90853	Group Psychotherapy	OP	290.27	275.76	83.57	118.39	Contact UH	Contact UH	83.57	118.39	27.50	275.76	136.15
43		45378	Diagnostic Examination Of Large Bowel Using An Endoscope	I/OP	3044.21	2892.00	876.43	1083.78	2567.79	2646.00	876.43	1083.78	433.52	2892.00	1246.35
44		90846	Family Psychotherapy, Not Including Patient, 50 Min	OP	482.04	457.94	138.78	206.85	Contact UH	Contact UH	138.78	206.85	24.50	457.94	237.88
45		90847	Family Psychotherapy, Including Patient, 50 Min	OP	482.04	457.94	138.78	206.85	Contact UH	Contact UH	138.78	206.85	113.94	457.94	237.88
46		99203	New Patient Office Or Other Outpatient Visit, Typically 30 Min	OP	312.12	296.51	89.86	N/A	Contact UH	Contact UH	89.86	N/A	61.14	296.51	T.B.D
47		99204	New Patient Office Of Other Outpatient Visit, Typically 45 Min	OP	478.58	454.65	137.78	N/A	Contact UH	Contact UH	137.78	N/A	92.31	454.65	T.B.D
48		99205	New Patient Office Of Other Outpatient Visit, Typically 60 Min	OP	593.03	563.38	170.73	N/A	Contact UH	Contact UH	170.73	N/A	115.60	563.38	T.B.D
49		99243	Patient Office Consultation, Typically 40 Min	OP	353.74	336.05	101.84	N/A	Contact UH	Contact UH	101.84	N/A	64.70	336.05	T.B.D
50		42820	Removal Of Tonsils And Adenoid Glands Patient Younger Than Age 12	OP	17705.65	16820.37	5097.46	6899.01	2859.28	2946.00	5097.46	6899.01	309.29	16820.37	7933.86
51		47562	Removal Of Gallbladder Using An Endoscope	OP	17445.06	16572.81	5022.43	7045.50	4843.06	4990.00	5022.43	7045.50	591.92	16572.81	8102.33
52		55866	Surgical Removal Of Prostate And Surrounding Lymph Nodes Using An Endoscope	OP	31122.18	29566.07	8960.08	12388.08	6018.29	6200.00	8960.08	12388.08	800.00	29566.07	14246.29
53		59510	Routine Obstetric Care For Cesarean Delivery, Including Pre-And Post-Delivery Care	I/OP	3080.52	2926.49	886.88	N/A	Contact UH	Contact UH	886.88	N/A	886.88	2926.49	T.B.D
54		59610	Routine Obstetric Care For Vaginal Delivery After Prior Cesarean Delivery Including Pre-And Post-Delivery Care	I/OP	9448.91	8976.46	2720.34	N/A	Contact UH	Contact UH	2720.34	N/A	2720.34	8976.46	T.B.D
55		66984	Removal Of Cataract With Insertion Of Lens	OP	7045.66	6693.38	2028.45	2689.55	2859.28	2946.00	2028.45	2689.55	1338.93	6693.38	3092.98
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	T.B.D
57		DRG - 470	Major Joint Replacement Or Reattachment Of Lower Extremity Without Major Comorbid Conditions IP	IP	N/A	N/A	N/A	34323.19	35509.12	34635.33	N/A	34323.19	22783.24	77187.23	34323.19
58		DRG - 473	Cervical Spinal Fusion Without Comorbid Conditions (Cc) Or Major Comorbid Conditions Or Complications IP	IP	N/A	N/A	N/A	40529.48	44941.89	43835.98	N/A	40529.48	28835.46	102347.06	40529.48
59		DRG - 743	Uterine And Adnexa Procedures For Non-Malignancy Without Comorbid Conditions (Cc) Or Major CIP	IP	N/A	N/A	N/A	25987.56	22840.05	22278.01	N/A	25987.56	14654.55	47259.46	25987.56
60		29826	Shaving Of Shoulder Bone Using An Endoscope	OP	192.97	183.32	55.56	N/A	1835.46	1892.00	55.56	N/A	55.56	1892.00	T.B.D
61		29881	Removal Of One Knee Cartilage Using An Endoscope	OP	9786.31	9296.99	2817.48	3813.21	3596.76	3705.00	2817.48	3813.21	741.24	9296.99	4385.19
62		99244	Patient Office Consultation, Typically 60 Min	OP	530.60	504.07	152.76	N/A	Contact UH	Contact UH	152.76	N/A	91.10	504.07	T.B.D
63		99385	Initial New Patient Preventive Medicine Evaluation (18-39 Years)	OP	384.95	365.70	110.83	N/A	Contact UH	Contact UH	110.83	N/A	84.30	365.70	T.B.D
64		99386	Initial New Patient Preventive Medicine Evaluation (40-64 Years)	OP	436.97	415.12	125.80	N/A	Contact UH	Contact UH	125.80	N/A	84.30	415.12	T.B.D
65	N/A	80055	Obstetric Blood Test Panel	OP	N/A	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	N/A	Contact UH	Contact UH	N/A	N/A	N/A	N/A	T.B.D
67		DRG - 216	Cardiac Valve And Other Major Cardiothoracic Procedures With Cardiac Catheterization With Major IP	IP	N/A	N/A	N/A	129451.26	180091.57	175659.96	N/A	129451.26	78485.00	393299.99	129451.26
68		93000	Electrocardiogram, Routine, With Interpretation And Report	OP	16.72	15.88	4.81	N/A	Contact UH	Contact UH	4.81	N/A	4.81	229.68	T.B.D
69		95810	Sleep Study	OP	3161.10	3003.05	910.08	1000.78	Contact UH	Contact UH	910.08	1000.78	910.08	3928.05	1150.90
70		76805	Abdominal Ultrasound Of Pregnant Uterus (Greater Or Equal To 14 Weeks 0 Days) Single Or First I/OP	I/OP	558.49	530.57	160.79	121.84	Contact UH	Contact UH	160.79	121.84	62.00	530.57	140.12
71		86480	Tuberculosis Test	I/OP	573.26	544.60	165.04	61.98	Contact UH	Contact UH	165.04	61.98	61.98	544.60	71.28
72		83735	Blood Test, Magnesium	I/OP	133.17	126.51	5.36	6.70	Contact UH	Contact UH	5.36	6.70	5.36	126.51	7.71

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

Shoppable	N/A			Location		Three Rivers Provider	United Healthcare	United Healthcare										
ID	Indicator	Billing Code	Description	Provided	Gross Charge	Network	Community Plan:	Community Plan:	United HealthCare:	United HealthCare:	Fidelis: Medicaid	Fidelis: Medicare	Minimum	Maximum	Discounted Cash			
							Medicaid	Medicare	Commercial / PPO	Oxford			Negotiated Rate	Negotiated Rate	Price			
73		DRG - 115	Extraocular Procedures Except Orbit	IP	N/A	N/A	N/A	N/A	29550.98	27560.66	N/A	N/A	18129.50	61329.11	29550.98			
74		DRG - 117	Intraocular Procedures Without Complications	IP	N/A	N/A	N/A	N/A	24100.48	19971.92	N/A	N/A	24100.48	40081.32	24100.48			
75		DRG - 788	Cesarean Section Without Sterilization Without Complications	IP	N/A	N/A	N/A	N/A	22573.13	11416.00	N/A	N/A	22573.13	35220.53	22573.13			
76		DRG - 906	Hand Procedures For Injuries	IP	N/A	N/A	N/A	N/A	32306.50	32444.02	N/A	N/A	32306.50	32306.50	32306.50			
77		DRG - 482	Hip And Femur Procedures Except Major Joint Without Complications	IP	N/A	N/A	N/A	N/A	30714.96	30025.08	N/A	N/A	30714.96	19264.59	30714.96			
78		DRG - 494	Lower Extremity And Humerus Procedures Except Hip, Foot And Femur Without Complications	IP	N/A	N/A	N/A	N/A	35263.09	36937.66	N/A	N/A	35263.09	23699.81	35263.09			
79		DRG - 502	Soft Tissue Procedures Without Complications	IP	N/A	N/A	N/A	N/A	27261.77	24776.67	N/A	N/A	27261.77	15997.12	27261.77			
80		DRG - 505	Foot Procedures W/O Cc/Mcc	IP	N/A	N/A	N/A	N/A	32674.72	33003.66	N/A	N/A	32674.72	21175.69	32674.72			
81		DRG - 512	Shoulder, Elbow Or Forearm Procedures, Except Major Joint Procedures Without Complications	IP	N/A	N/A	N/A	N/A	31010.50	30474.26	N/A	N/A	31010.50	19552.79	31010.50			
82		DRG - 660	Kidney And Ureter Procedures For Non-Neoplasm With Complications	IP	N/A	N/A	N/A	N/A	26968.65	24331.18	N/A	N/A	26968.65	15611.29	26968.65			
83		DRG - 142	Major Head And Neck Procedures Without Complications	IP	N/A	N/A	N/A	N/A	30295.88	23988.13	N/A	N/A	30295.88	18855.91	30295.88			
84		DRG - 250	Percutaneous Cardiovascular Procedures With Coronary Artery Stent	IP	N/A	N/A	N/A	N/A	37394.84	40177.64	N/A	N/A	37394.84	25778.64	37394.84			
85		DRG - 329	Major Small And Large Bowel Procedures With Major Comp	IP	N/A	N/A	N/A	N/A	66633.71	84616.97	N/A	N/A	66633.71	54291.65	66633.71			
86		DRG - 355	Hernia Procedures Except Inguinal And Femoral Without Complications	IP	N/A	N/A	N/A	N/A	27250.87	24760.11	N/A	N/A	27250.87	15886.49	27250.87			
87		DRG - 419	Laparoscopic Cholecystectomy Without C.D.E. Without Complications	IP	N/A	N/A	N/A	N/A	27502.80	25143.01	N/A	N/A	27502.80	16132.17	27502.80			
88		DRG - 479	Biopsies Of Musculoskeletal System And Connective Tissue Without Complications	IP	N/A	N/A	N/A	N/A	33475.33	34220.49	N/A	N/A	33475.33	21956.43	33475.33			
89		DRG - 448	Multiple Level Spinal Fusion Except Cervical Without Mcc	IP	N/A	N/A	N/A	N/A	62325.40	78068.89	N/A	N/A	62325.40	50090.29	62325.40			
90		DRG - 451	Single Level Spinal Fusion Except Cervical Without Mcc	IP	N/A	N/A	N/A	N/A	50087.23	59468.43	N/A	N/A	50087.23	38155.93	50087.23			
91		72131	Ct Scan, Lumbar Spine	IP/OP	749.09	711.64	215.66	121.84	Contact UH	Contact UH	215.66	121.84	121.84	711.64	140.12			
92		87491	Infectious Agent Detection, Chlamydia Trachomatis	IP/OP	372.46	353.84	35.09	35.09	Contact UH	Contact UH	35.09	35.09	35.09	353.84	40.35			
93		73700	Ct Scan, Lower Extremities	IP/OP	1856.07	1763.27	534.36	121.84	Contact UH	Contact UH	534.36	121.84	121.84	1763.27	140.12			
94		73630	X-Ray, Foot	IP/OP	847.93	805.53	244.12	101.42	Contact UH	Contact UH	244.12	101.42	17.98	805.53	116.63			
95		73560	X-Ray, Knee	IP/OP	819.32	778.35	235.88	101.42	Contact UH	Contact UH	235.88	101.42	16.74	778.35	116.63			
96		72190	X-Ray, Pelvis, 3 Views	IP/OP	415.50	394.73	119.62	121.84	Contact UH	Contact UH	119.62	121.84	22.32	394.73	140.12			
97		92557	Comprehensive Audiometry Threshold Evaluation And Speech Recognition	IP/OP	553.49	525.82	159.35	149.96	Contact UH	Contact UH	159.35	149.96	65.00	525.82	172.45			
98		76512	Ophthalmic Ultrasound, Diagnostic, B-Scan With And Without Quant. A	IP/OP	410.96	390.41	118.32	121.84	Contact UH	Contact UH	118.32	121.84	56.42	390.41	140.12			
99		70355	X-Ray, Jaws, Panoramic	IP/OP	331.89	315.30	95.55	101.42	Contact UH	Contact UH	95.55	101.42	22.94	315.30	116.63			
100		96415	Chemotherapy Administration, Intravenous Infusion Technique	IP/OP	258.02	245.12	74.28	83.91	Contact UH	Contact UH	74.28	83.91	74.28	362.79	96.50			
101		96367	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis; Additional Sequential Infusion Of A N	IP/OP	258.02	245.12	74.28	83.91	Contact UH	Contact UH	74.28	83.91	46.98	245.12	96.50			
102		70498	Ct Scan, Neck	IP/OP	1727.06	1640.71	497.22	204.41	Contact UH	Contact UH	497.22	204.41	204.41	1640.71	235.07			
103		76376	3D Rendering With Interpretation And Post Process Supervision	IP/OP	293.39	278.72	84.47	N/A	Contact UH	Contact UH	84.47	N/A	84.47	278.72	T.B.D			
104		92567	Tympanometry	OP	424.48	403.26	122.21	43.53	Contact UH	Contact UH	122.21	43.53	25.00	403.26	50.06			
105		92235	Fluorescein Angiography	OP	1064.33	1011.11	306.42	251.64	Contact UH	Contact UH	306.42	251.64	53.03	1011.11	289.39			
106		76815	Abdominal Ultrasound Of Pregnant Uterus	IP/OP	556.61	528.78	160.25	121.84	Contact UH	Contact UH	160.25	121.84	53.32	528.78	140.12			
107		96368	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis; Concurrent Infusion	IP/OP	158.14	150.23	45.53	N/A	Contact UH	Contact UH	45.53	N/A	29.23	150.23	T.B.D			
108		90472	Immunization Administration	IP/OP	177.91	169.01	51.22	N/A	Contact UH	Contact UH	51.22	N/A	28.71	169.01	T.B.D			
109		92603	Diagnostic Analysis Of Cochlear Implant, Age 7 Years Or Older, With Programming	OP	553.49	525.82	159.35	149.96	Contact UH	Contact UH	159.35	149.96	48.00	525.82	172.45			
110		92250	Fundus Photography With Interpretation And Report	OP	441.13	419.07	127.00	155.06	Contact UH	Contact UH	127.00	155.06	25.88	419.07	178.32			
111		96523	Irrigation Of Implanted Venous Access Device	IP/OP	219.52	208.54	63.20	68.75	Contact UH	Contact UH	63.20	68.75	63.20	208.54	79.06			
112		90746	Hepatitis B Vaccine (Hepb), Adult Dosage, 3 Dose Schedule, For Intramuscular Use	IP/OP	259.80	246.81	74.80	75.15	181.23	Contact UH	186.00	74.80	75.15	246.81	86.42			
113		89051	Cell Count, Miscellaneous Body Fluids	IP/OP	105.08	99.83	4.48	5.60	Contact UH	Contact UH	4.48	5.60	1.76	99.83	6.44			
114		73590	X-Ray, Lower Leg	IP/OP	789.40	749.93	227.27	101.42	Contact UH	Contact UH	227.27	101.42	17.98	749.93	116.63			
115		72170	X-Ray, Pelvis, 1-2 Views	IP/OP	415.50	394.73	119.62	121.84	Contact UH	Contact UH	119.62	121.84	16.74	394.73	140.12			
116		73070	X-Ray, Elbow	IP/OP	785.50	746.23	226.15	101.42	Contact UH	Contact UH	226.15	101.42	17.98	746.23	116.63			
117		72125	Ct Scan, Neck Spine Without Contrast	IP/OP	1370.21	1301.70	394.48	121.84	Contact UH	Contact UH	394.48	121.84	121.84	1301.70	140.12			
118		73030	X-Ray, Shoulder	IP/OP	776.40	737.58	223.53	101.42	Contact UH	Contact UH	223.53	101.42	19.22	737.58	116.63			
119		73060	X-Ray, Humerus	IP/OP	786.80	747.46	226.52	101.42	Contact UH	Contact UH	226.52	101.42	18.60	747.46	116.63			
120		72100	X-Ray, Lumbar Spine, 2-3 Views	IP/OP	604.73	574.49	174.10	121.84	Contact UH	Contact UH	174.10	121.84	22.94	574.49	140.12			
121		73120	Hepatitis B Surface Antibody (Hbsab)	IP/OP	668.46	635.04	192.45	121.84	Contact UH	Contact UH	192.45	121.84	16.74	635.04	140.12			
122		73610	X-Ray, Ankle	IP/OP	306.92	291.57	88.36	101.42	Contact UH	Contact UH	88.36	101.42	17.98	291.57	116.63			
123		73110	X-Ray, Wrist	IP/OP	474.68	450.95	136.66	101.42	Contact UH	Contact UH	136.66	101.42	17.98	450.95	116.63			
124		73090	X-Ray, Forearm	IP/OP	785.50	746.23	226.15	101.42	Contact UH	Contact UH	226.15	101.42	18.60	746.23	116.63			
125		93312	Echocardiography, Transeophageal	IP/OP	2824.69	2683.46	813.23	636.80	Contact UH	Contact UH	813.23	636.80	636.80	2683.46	732.32			
126		97140	Manual Therapy Techniques, 1 Or More Regions, Each 15 Minutes	IP/OP	219.52	208.54	63.20	N/A	Contact UH	Contact UH	63.20	N/A	12.06	208.54	T.B.D			
127		92611	Motion Fluoroscopic Evaluation Of Swallowing Function By Cine Or Video Recording	IP/OP	1039.36	987.39	299.23	N/A	Contact UH	Contact UH	299.23	N/A	77.00	987.39	T.B.D			
128		73562	X-Ray, Knee, 3 Views	IP/OP	330.33	313.81	95.10	101.42	Contact UH	Contact UH	95.10	101.42	19.22	313.81	116.63			
129		96374	Therapeutic, Prophylactic, Or Diagnostic Injection; Intravenous Push, Single Or Initial Substance/D	IP/OP	780.30	741.29	224.65	247.89	Contact UH	Contact UH	224.65	247.89	25.30	741.29	285.07			
130		92950	Cardiopulmonary Resuscitation	IP/OP	1430.55	1359.02	411.86	251.64	1835.46	Contact UH	1892.00	411.86	251.64	116.00	289.39			
131		77386	Intensity Modulated Radiation Therapy Delivery Complex	IP/OP	2482.39	2358.27	714.68	N/A	Contact UH	Contact UH	714.68	N/A	352.84	2358.27	T.B.D			
132		93990	Duplex Scan Of Hemodialysis Access	IP/OP	405.76	385.47	116.82	121.84	Contact UH	Contact UH	116.82	121.84	116.82	819.54	140.12			
133		93926	Duplex Scan Of Lower Extremity Arteries Or Arterial Bypass Grafts; Unilateral Or Limited Study	IP/OP	405.76	385.47	116.82	121.84	Contact UH	Contact UH	116.82	121.84	116.82	571.59	140.12			
134		84703	Blood Test, Human Chorionic Gonadotropin (Hcg)	IP/OP	183.11	173.95	6.02	7.52	Contact UH	Contact UH	6.02	7.52	5.88	173.95	8.65			
135		93978	Duplex Scan Of Aorta, Inferior Vena Cava, Iliac Vasculature, Or Bypass Grafts; Complete Study	IP/OP	934.28	887.57	268.98	278.07	Contact UH	Contact UH	268.98	278.07	268.98	1044.00	319.78			
136		93925	Duplex Scan Of Lower Extremity Arteries Or Arterial Bypass Grafts; Complete Bilateral Study	IP/OP	887.46	843.09	255.50	278.07	Contact UH	Contact UH	255.50	278.07	255.50	936.99	319.78			
137		92587	Distortion Product Evoked Otoacoustic Emissions	IP/OP	1065.37	1012.10	306.72	251.64	Contact UH	Contact UH	306.72	251.64	48.00	1012.10	289.39			
138		92134	Scanning Computerized Ophthalmic Diagnostic Imaging, Posterior Segment; Retina	IP/OP	228.89	217.45	65.90	68.75	Contact UH	Contact UH	65.90	68.75	16.10	217.45	79.06			
139		96411	Chemotherapy Administration; Intravenous, Push Technique, Each Additional Substance/Drug	OP	395.35	375.58	113.82	83.91	Contact UH	Contact UH	113.82	83.91	83.91	850.86	96.50			
140		82805	Blood Gasses With O2 Saturation	IP/OP	515.00	489.25	148.27	78.77	Contact UH	Contact UH	148.27	78.77	29.05	489.25	90.59			
141		94664	Demonstration And/Or Evaluation Of Patient Utilization Of An Aerosol Generator, Nebulizer, Metered	IP/OP	819.84	778.85	236.03	255.20	Contact UH	Contact UH	236.03	255.20	167.04	778.85	293.48			
142		94667	Manipulation Chest Wall	IP/OP	525.40	499.13	151.26	155.06	Contact UH	Contact UH	151.26	155.06	151.26	499.13	178.32			
143		94660	Continuous Positive Airway Pressure Ventilation (Cpap)															

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

Shoppable	N/A	Billing Code	Description	Location	Gross Charge	Three Rivers Provider	United Healthcare	United Healthcare	United Healthcare	United Healthcare	Fidelis: Medicaid	Fidelis:	Minimum	Maximum	Discounted Cash
ID	Indicator			Provided		Network	Community Plan:	Community Plan:	HealthCare:	HealthCare:	Medicaid	Medicare	Negotiated Rate	Negotiated Rate	Price
145		97597	Debridement	I/OP	740.76	703.72	213.26	233.82	1835.46	1892.00	213.26	233.82	213.26	1892.00	268.89
146		90651	Hpv Vaccine	I/OP	1151.67	1094.09	331.57	N/A	Contact UH	Contact UH	331.57	N/A	200.63	1094.09	T.B.D
147		96413	Chemotherapy Administration, Intravenous Infusion Technique; Up To 1 Hour	I/OP	1264.09	1200.89	363.93	384.94	Contact UH	Contact UH	363.93	384.94	363.93	1200.89	442.68
148		92570	Acoustic Immittance Testing	OP	553.49	525.82	159.35	149.96	Contact UH	Contact UH	159.35	149.96	25.00	525.82	172.45
149		92133	Scanning Computerized Ophthalmic Diagnostic Imaging, Optic Nerve	OP	228.89	217.45	65.90	68.75	Contact UH	Contact UH	65.90	68.75	16.10	217.45	79.06
150		90675	Rabies Vaccine, For Intramuscular Use	I/OP	1624.80	1543.56	467.78	319.75	836.21	863.00	467.78	319.75	310.08	1543.56	367.71
151		96417	Chemotherapy Administration, Intravenous Infusion Technique	I/OP	258.02	245.12	74.28	83.91	Contact UH	Contact UH	74.28	83.91	74.28	589.86	96.50
152		92083	Visual Field Examination	I/OP	441.13	419.07	127.00	155.06	Contact UH	Contact UH	127.00	155.06	99.81	419.07	178.32
153		92136	Ophthalmic Biometry	OP	441.13	419.07	127.00	155.06	Contact UH	Contact UH	127.00	155.06	104.40	419.07	178.32
154		96401	Chemotherapy Administration, Subcutaneous Or Intramuscular; Non-Hormonal Anti-Neoplastic	I/OP	511.88	486.29	147.37	83.91	Contact UH	Contact UH	147.37	83.91	83.91	486.29	96.50
155		96402	Chemotherapy Administration, Subcutaneous Or Intramuscular; Hormonal Anti-Neoplastic	OP	321.48	305.41	92.55	83.91	Contact UH	Contact UH	92.55	83.91	83.91	305.41	96.50
156		90734	Meningococcal Conjugate Vaccine	I/OP	294.44	279.72	84.77	N/A	Contact UH	Contact UH	84.77	N/A	84.77	279.72	T.B.D
157		96365	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis; Initial, Up To 1 Hour	I/OP	845.85	803.56	243.52	247.89	Contact UH	Contact UH	243.52	247.89	97.25	803.56	285.07
158		90670	Pneumococcal Conjugate Vaccine, 13 Valent (Pcv13), For Intramuscular Use	I/OP	874.12	830.41	251.66	N/A	664.33	685.00	251.66	N/A	176.11	830.41	T.B.D
159		77336	Continuing Medical Physics Consultation	I/OP	1521.06	1445.01	437.91	156.64	Contact UH	Contact UH	437.91	156.64	21.00	1445.01	180.14
160		92602	Diagnostic Analysis Of Cochlear Implant, Patient Younger Than 7 Yrs Of Age; Subsequent Reprogramming	OP	553.49	525.82	159.35	149.96	Contact UH	Contact UH	159.35	149.96	48.00	608.13	172.45
161		92025	Computerized Corneal Topography	OP	219.52	208.54	63.20	68.75	Contact UH	Contact UH	63.20	68.75	63.20	208.54	79.06
162		93923	Complete Bilateral Noninvasive Physiologic Studies Of Upper Or Lower Extremity Arteries, 3 Or More Limbs	I/OP	1045.60	993.32	301.03	251.64	Contact UH	Contact UH	301.03	251.64	251.64	993.32	289.39
163		82948	Glucose Test	I/OP	45.62	43.34	4.03	5.04	Contact UH	Contact UH	4.03	5.04	2.94	43.34	5.80
164		94150	Vital Capacity, Total (Separate Procedure)	I/OP	588.87	559.43	169.54	149.96	Contact UH	Contact UH	169.54	149.96	149.96	559.43	172.45
165		94060	Bronchodilation Responsiveness	I/OP	1064.33	1011.11	306.42	434.88	Contact UH	Contact UH	306.42	434.88	306.42	1011.11	500.11
166		90732	Pneumococcal Polysaccharide Vaccine	I/OP	438.53	416.60	126.25	133.47	343.70	355.00	126.25	133.47	93.71	416.60	153.49
167		92584	Electrocochleography	OP	1018.55	967.62	293.24	149.96	Contact UH	Contact UH	293.24	149.96	77.00	967.62	172.45
168		92550	Tympanometry And Reflex Threshold Measurements	OP	553.49	525.82	159.35	251.64	Contact UH	Contact UH	159.35	251.64	25.00	525.82	289.39
169		92626	Evaluation Of Auditory Function, First Hour	OP	553.49	525.82	159.35	149.96	Contact UH	Contact UH	159.35	149.96	25.00	525.82	172.45
170		92579	Visual Reinforcement Audiometry (Vra)	I/OP	956.13	908.32	275.27	251.64	Contact UH	Contact UH	275.27	251.64	65.00	908.32	289.39
171		92582	Conditioning Play Audiometry	OP	956.13	908.32	275.27	149.96	Contact UH	Contact UH	275.27	149.96	65.00	908.32	172.45
172		90686	Influenza Virus Vaccine	I/OP	73.43	69.76	21.14	N/A	57.56	60.00	21.14	N/A	21.14	69.76	T.B.D
173		92604	Diagnostic Analysis Of Cochlear Implant, Age 7 Yrs Or Older	OP	553.49	525.82	159.35	149.96	Contact UH	Contact UH	159.35	149.96	48.00	525.82	172.45
174		90715	Tetanus, Diphtheria Toxoids And Acellular Pertussis Vaccine (Tdap), 7 Years+	I/OP	355.48	337.71	102.34	39.69	Contact UH	Contact UH	102.34	39.69	39.69	337.71	45.64
175		86901	Blood Typing Rhd	I/OP	190.39	180.87	2.39	2.99	Contact UH	Contact UH	2.39	2.99	2.39	180.87	3.44
176		93922	Limited Bilateral Noninvasive Physiologic Studies Of Upper Or Lower Extremity Arteries	I/OP	557.65	529.77	160.55	155.06	Contact UH	Contact UH	160.55	155.06	155.06	574.20	178.32
177		36415	Routine Venipuncture	I/OP	62.42	59.30	4.55	9.34	Contact UH	Contact UH	4.55	9.34	1.00	59.30	10.74
178		92610	Evaluation Of Oral And Pharyngeal Swallowing Function	I/OP	275.71	261.92	79.38	N/A	Contact UH	Contact UH	79.38	N/A	77.00	261.92	T.B.D
179		92522	Evaluation Of Speech Sound Production	I/OP	590.95	561.40	170.13	N/A	Contact UH	Contact UH	170.13	N/A	48.00	561.40	T.B.D
180		93880	Duplex Scan Of Extracranial Arteries; Complete Bilateral Study	I/OP	894.74	850.00	257.60	278.07	Contact UH	Contact UH	257.60	278.07	257.60	973.53	319.78
181		97802	Medical Nutrition Therapy	OP	109.24	103.78	31.45	N/A	Contact UH	Contact UH	31.45	N/A	31.45	103.78	T.B.D
182		86703	Antibody; Hiv-1 And Hiv-2, Single Result	I/OP	79.07	75.12	10.97	13.71	Contact UH	Contact UH	10.97	13.71	10.97	75.12	15.77
183		93970	Duplex Scan Of Extremity Veins; Complete Bilateral Study	I/OP	889.54	845.06	256.10	278.07	Contact UH	Contact UH	256.10	278.07	256.10	1177.11	319.78
184		96376	Therapeutic, Prophylactic, Or Diagnostic Injection Sequential Intravenous Push Of The Same Substance	I/OP	227.85	216.46	65.60	N/A	Contact UH	Contact UH	65.60	N/A	6.04	216.46	T.B.D
185		90744	Hepatitis B Vaccine (Hepb), Pediatric/Adolescent Dosage, 3 Dose Schedule	I/OP	85.86	81.57	24.72	33.20	79.24	83.00	24.72	33.20	24.72	86.03	38.18
186		93971	Duplex Scan Of Extremity Veins; Unilateral Or Limited Study	I/OP	405.76	385.47	116.82	121.84	Contact UH	Contact UH	116.82	121.84	116.82	1137.96	140.12
187		90471	Immunization Administration	I/OP	253.86	241.17	73.09	83.91	Contact UH	Contact UH	73.09	83.91	49.59	241.17	96.50
188		90632	Hepatitis A Vaccine (Hepa), Adult Dosage, For Intramuscular Use	I/OP	275.76	261.97	79.39	73.54	Contact UH	Contact UH	79.39	73.54	70.72	261.97	84.57
189		99153	Mod Sedation Services Provided By The Same Physician	OP	376.62	357.79	108.43	N/A	Contact UH	Contact UH	108.43	N/A	16.83	357.79	T.B.D
190		93303	Trans thoracic Echocardiography	I/OP	2904.80	2759.56	836.29	636.80	Contact UH	Contact UH	836.29	636.80	160.00	2759.56	732.32
191		73552	X-Ray, Femur, 2 Views	I/OP	377.15	358.29	108.58	101.42	Contact UH	Contact UH	108.58	101.42	19.84	358.29	116.63
192		96372	Therapeutic, Prophylactic, Or Diagnostic Injection; Subcutaneous Or Intramuscular	I/OP	199.76	189.77	57.51	83.91	Contact UH	Contact UH	57.51	83.91	7.97	189.77	96.50
193		95851	Range Of Motion Measurements And Report	I/OP	120.69	114.66	34.75	N/A	Contact UH	Contact UH	34.75	N/A	34.75	114.66	T.B.D
194		77300	Basic Radiation Dosimetry Calculation	I/OP	685.62	651.34	197.39	156.64	Contact UH	Contact UH	197.39	156.64	43.00	651.34	180.14
195		96366	Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis, Each Additional Hour	I/OP	269.46	255.99	77.58	54.57	Contact UH	Contact UH	77.58	54.57	31.48	255.99	62.76
196		94761	Noninvasive Ear Or Pulse Oximetry For Oxygen Saturation; Multiple Determinations	I/OP	398.47	378.55	114.72	N/A	Contact UH	Contact UH	114.72	N/A	73.08	378.55	T.B.D
197		94640	Inhalation Therapy	I/OP	677.30	643.44	194.99	255.20	Contact UH	Contact UH	194.99	255.20	96.57	643.44	293.48
198		77412	Radiation Therapy Delivery	I/OP	949.89	902.40	273.47	643.94	Contact UH	Contact UH	273.47	643.94	80.36	1289.81	740.53
199		77063	Screening Digital Breast Tomosynthesis, Bilateral	I/OP	552.45	524.83	159.05	N/A	Contact UH	Contact UH	159.05	N/A	6.20	524.83	T.B.D
200		87591	Infectious Agent Detection, Neisseria Gonorrhoeae	I/OP	372.46	353.84	28.07	35.09	Contact UH	Contact UH	28.07	35.09	2.06	353.84	40.35
201		97535	Self-Care/Home Management Training	I/OP	219.52	208.54	63.20	N/A	Contact UH	Contact UH	63.20	N/A	63.20	208.54	T.B.D
202		70551	Mri, Brain Without Contrast	I/OP	5852.25	5559.64	1684.86	278.07	Contact UH	Contact UH	1684.86	278.07	278.07	5559.64	319.78
203		97162	Physical Therapy Evaluation, Complex, 30 Minutes	I/OP	398.47	378.55	114.72	N/A	Contact UH	Contact UH	114.72	N/A	32.34	378.55	T.B.D
204		92507	Therapy Speech And/Or Auditory	I/OP	240.33	228.31	69.19	N/A	Contact UH	Contact UH	69.19	N/A	25.58	228.31	T.B.D
205		92612	Flexible Endoscopic Evaluation Of Swallowing By Cine Or Video Recording	I/OP	996.70	946.87	286.95	N/A	Contact UH	Contact UH	286.95	N/A	286.95	946.87	T.B.D
206		71250	Ct Scan, Thorax Without Contrast	I/OP	1073.69	1020.01	309.12	121.84	Contact UH	Contact UH	309.12	121.84	121.84	1020.01	140.12
207		76705	Ultrasound Of Abdomen, Limited	I/OP	816.71	775.87	235.13	121.84	Contact UH	Contact UH	235.13	121.84	51.46	775.87	140.12
208		95813	Electroencephalogram (Eeg) Extended Monitoring; 61-119 Minutes	I/OP	852.09	809.49	245.32	251.64	Contact UH	Contact UH	245.32	251.64	245.32	809.49	289.39
209		93005	Electrocardiogram	I/OP	225.77	214.48	65.00	68.75	Contact UH	Contact UH	65.00	68.75	30.00	214.48	79.06
210		95819	Electroencephalogram (Eeg)	I/OP	1079.94	1025.94	310.91	251.64	Contact UH	Contact UH	310.91	251.64	251.64	1025.94	289.39
211		94727	Gas Dilution	I/OP	588.87	559.43	169.54	251.64	Contact UH	Contact UH	169.54	251.64	63.55	559.43	289.39
212		94760	Noninvasive Ear Or Pulse Oximetry For Oxygen Saturation	I/OP	296.51	281.68	85.37	N/A	Contact UH	Contact UH	85.37	N/A	85.37	281.68	T.B.D
213		94644	Continuous Inhalation Therapy With Aerosol Medication For Acute Airway Obstruction; First Hour	I/OP	485.87	461.58	139.88	155.06	Contact UH	Contact UH	139.88	155.06	39.15	461.58	178.32
214		94645	Continuous Inhalation Therapy With Aerosol Medication For Acute Airway Obstruction; Each Additional Hour	I/OP	161.26	153.20	46.43	N/A	Contact UH	Contact UH	46.43	N/A	46.43	153.20	T.B.D
215		94003	Ventilation Assist And Management; Hospital Inpatient/Observation, Each Subsequent Day	I/OP	1039.36	987.39	299.23	719.98	Contact UH	Contact UH	299.23	719.98	92.42	1442.12	827.98
216		94002	Ventilation Assist And Management; Hospital Inpatient/Observation, Initial Day	I/OP	2062.07	1958.97	593.67	719.98	Contact UH	Contact UH	593.67	719.98	128.18	1958.97	827.98

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Shoppable	N/A			Location		Three Rivers Provider	United Healthcare	United Healthcare	United Healthcare	United Healthcare		Fidelis:	Minimum	Maximum	Discounted Cash
ID	Indicator	Billing Code	Description	Provided	Gross Charge	Network	Medicaid	Medicare	Commercial / PPO	Oxford	Fidelis: Medicaid	Medicare	Negotiated Rate	Negotiated Rate	Price
217		94681	Oxygen Uptake, Expired Gas Analysis	I/OP	997.74	947.85	287.25	434.88	Contact UH	Contact UH	287.25	434.88	234.90	947.85	500.11
218		94010	Spirometry	I/OP	588.87	559.43	169.54	251.64	Contact UH	Contact UH	169.54	251.64	169.54	559.43	289.39
219		93888	Transcranial Doppler Study Of The Intracranial Arteries; Limited Study	I/OP	1334.83	1268.09	384.30	121.84	Contact UH	Contact UH	384.30	121.84	121.84	1268.09	140.12
220		77417	Therapeutic Radiology Port Image(S)	I/OP	398.47	378.55	114.72	N/A	Contact UH	Contact UH	114.72	N/A	4.00	378.55	T.B.D
221		94729	Diffusing Capacity	I/OP	398.47	378.55	114.72	N/A	Contact UH	Contact UH	114.72	N/A	81.51	378.55	T.B.D
222		77085	Bone Density Study, Dual-Energy X-Ray Absorptiometry	I/OP	454.65	431.92	130.89	121.84	Contact UH	Contact UH	130.89	121.84	48.96	431.92	140.12
223		77334	Therapy Devices, Design And Construction; Complex	I/OP	1531.47	1454.90	440.91	436.36	Contact UH	Contact UH	440.91	436.36	106.00	1454.90	501.81
224		94668	Manipulation Of Chest Wall	I/OP	256.98	244.13	73.98	155.06	Contact UH	Contact UH	73.98	155.06	73.98	310.59	178.32
225		87536	Infectious Agent Detection; Hiv-1, Quant	I/OP	388.96	369.51	111.98	85.10	Contact UH	Contact UH	111.98	85.10	81.17	369.51	97.87
226		76642	Ultrasound Of Breast	I/OP	452.57	429.94	130.29	101.42	Contact UH	Contact UH	130.29	101.42	42.16	429.94	116.63
227		96360	Intravenous Infusion, Hydration; Initial, 31 Minutes To 1 Hour	I/OP	784.46	745.24	225.85	247.89	Contact UH	Contact UH	225.85	247.89	225.85	745.24	285.07
228		93458	Catheter Placement In Coronary Artery(S) For Coronary Angiography	I/OP	14983.84	14234.65	4313.85	3778.17	6552.86	6750.00	4313.85	3778.17	1521.60	14234.65	4344.90
229		76770	Ultrasound Of Retroperitoneal, Complete	I/OP	523.32	497.15	150.66	121.84	Contact UH	Contact UH	150.66	121.84	68.82	497.15	140.12
230		93975	Vascular Study	I/OP	964.45	916.23	277.67	278.07	Contact UH	Contact UH	277.67	278.07	277.67	916.23	319.78
231		76536	Ultrasound Of Head And Neck	I/OP	665.86	632.57	191.70	121.84	Contact UH	Contact UH	191.70	121.84	50.84	632.57	140.12
232		76775	Ultrasound Of Retroperitoneal, Limited	I/OP	915.55	869.77	263.59	121.84	Contact UH	Contact UH	263.59	121.84	51.46	869.77	140.12
233		74018	X-Ray, Abdomen	I/OP	351.14	333.58	101.09	101.42	Contact UH	Contact UH	101.09	101.42	31.99	333.58	116.63
234		86900	Blood Typing Abo	I/OP	268.42	255.00	77.28	2.99	Contact UH	Contact UH	77.28	2.99	2.99	310.59	3.44
235		87186	Susceptibility Studies, Antimicrobial Agent	I/OP	2817.40	2676.53	811.13	8.65	Contact UH	Contact UH	811.13	8.65	8.65	2676.53	9.95
236		96375	Therapeutic, Prophylactic, Or Diagnostic Injection; Sequential Intravenous Push Of A New Substance	I/OP	203.92	193.72	58.71	54.57	Contact UH	Contact UH	58.71	54.57	11.73	193.72	62.76
237		86923	Compatibility Test Each Unit; Electronic	I/OP	487.95	463.55	12.00	198.55	Contact UH	Contact UH	12.00	198.55	12.00	463.55	228.33
238		86920	Compatibility Test Each Unit; Immediate Spin Technique	I/OP	469.22	445.76	135.09	198.55	Contact UH	Contact UH	135.09	198.55	20.00	445.76	228.33
239		99152	Mod Sedation Services Provided By The Same Physician	OP	311.08	295.53	89.56	N/A	Contact UH	Contact UH	89.56	N/A	78.80	295.53	T.B.D
240		97161	Physical Therapy Evaluation: Low Complexity 20 Minutes	I/OP	219.52	208.54	63.20	N/A	Contact UH	Contact UH	63.20	N/A	32.34	208.54	T.B.D
241		71046	C-Reactive Protein;	I/OP	335.01	318.26	96.45	101.42	Contact UH	Contact UH	96.45	101.42	36.87	318.26	116.63
242		87040	Culture, Bacterial, Blood	I/OP	95.72	90.93	8.26	10.32	Contact UH	Contact UH	8.26	10.32	8.26	90.93	11.87
243		97165	Occupational Therapy Evaluation, Low Complexity, 30 Minutes	I/OP	219.52	208.54	63.20	N/A	Contact UH	Contact UH	63.20	N/A	31.35	208.54	T.B.D
244		97166	Occupational Therapy Evaluation, Mod Complexity 45 Minutes	I/OP	442.17	420.06	127.30	N/A	Contact UH	Contact UH	127.30	N/A	31.35	420.06	T.B.D
245		73502	X-Ray, Hip, 2-3 Views	I/OP	361.54	343.46	104.09	101.42	Contact UH	Contact UH	104.09	101.42	19.84	343.46	116.63
246		86850	Antibody Screen, Rbc, Each Serum Technique	I/OP	220.56	209.53	7.82	9.77	Contact UH	Contact UH	7.82	9.77	7.80	209.53	11.24
247		72040	X-Ray, Neck, Spine, 2-3 Views	I/OP	343.42	326.25	98.87	101.42	Contact UH	Contact UH	98.87	101.42	21.08	326.25	116.63
248		80307	Drug Tests	I/OP	1325.47	1259.20	49.71	62.14	Contact UH	Contact UH	49.71	62.14	9.28	1259.20	71.46
249		83690	Blood Test, Lipase	I/OP	86.35	82.03	5.51	6.89	Contact UH	Contact UH	5.51	6.89	5.51	82.03	7.92
250		82550	Blood Test, Creatine Kinase (Ck)	I/OP	50.98	48.43	5.21	6.51	Contact UH	Contact UH	5.21	6.51	1.70	48.43	7.49
251		93306	Echocardiography, With Doppler	I/OP	2028.78	1927.34	584.09	636.80	Contact UH	Contact UH	584.09	636.80	265.00	1927.34	732.32
252		97018	Application Of A Modality To 1 Or More Areas; Paraffin Bath	OP	120.69	114.66	34.75	N/A	Contact UH	Contact UH	34.75	N/A	34.75	114.66	T.B.D
253		77002	X-Ray, Guidance Of Needle Placement	I/OP	1167.85	1109.46	336.22	N/A	Contact UH	Contact UH	336.22	N/A	56.13	1109.46	T.B.D
254		96361	Intravenous Infusion, Hydration; Each Additional Hour	I/OP	225.77	214.48	65.00	54.57	Contact UH	Contact UH	65.00	54.57	54.57	214.48	62.76
255		71045	X-Ray, Chest, 1 View	I/OP	348.53	331.10	100.34	101.42	Contact UH	Contact UH	100.34	101.42	24.01	331.10	116.63
256		92526	Therapy Swallowing Dysfunction And/Or Oral Function For Feeding	I/OP	208.08	197.68	59.91	N/A	Contact UH	Contact UH	59.91	N/A	36.00	197.68	T.B.D
257		97129	Therapeutic Interventions, 15 Minutes	I/OP	197.68	187.80	56.91	N/A	Contact UH	Contact UH	56.91	N/A	22.46	187.80	T.B.D
258		82248	Bilirubin; Direct	I/OP	78.03	74.13	4.02	5.02	Contact UH	Contact UH	4.02	5.02	4.02	74.13	5.77
259		86706	Hepatitis B Surface Antibody	I/OP	100.92	95.87	8.59	10.74	Contact UH	Contact UH	8.59	10.74	7.49	95.87	12.35
260		83036	Hemoglobin; Glycosylated (A1C)	I/OP	117.57	111.69	33.85	9.71	Contact UH	Contact UH	33.85	9.71	9.71	111.69	11.17
261		97164	Re-Evaluation Of Physical Therapy Established Plan Of Care	I/OP	219.52	208.54	63.20	N/A	Contact UH	Contact UH	63.20	N/A	21.98	208.54	T.B.D
262		97150	Therapeutic Procedure, Group	I/OP	219.52	208.54	63.20	N/A	Contact UH	Contact UH	63.20	N/A	63.20	208.54	T.B.D
263		97112	Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes	I/OP	219.52	208.54	63.20	N/A	Contact UH	Contact UH	63.20	N/A	14.64	208.54	T.B.D
264		97760	Orthotic(S) Management And Training	I/OP	168.54	160.11	48.52	N/A	Contact UH	Contact UH	48.52	N/A	33.98	160.11	T.B.D
265		93454	Catheter Placement In Coronary Artery(S) For Coronary Angiography	I/OP	14983.84	14234.65	4313.85	3778.17	6552.86	6750.00	4313.85	3778.17	1261.18	14234.65	4344.90
266		84702	Gonadotropin, Chorionic (Hcg); Quantitative	I/OP	159.18	151.22	12.04	15.05	Contact UH	Contact UH	12.04	15.05	2.27	151.22	17.31
267		97163	Physical Therapy Evaluation: High Complexity	I/OP	780.30	741.29	224.65	N/A	Contact UH	Contact UH	224.65	N/A	32.34	741.29	T.B.D
268		97530	Therapeutic Activities	I/OP	219.52	208.54	63.20	N/A	Contact UH	Contact UH	63.20	N/A	36.10	208.54	T.B.D
269		97168	Re-Evaluation Of Occupational Therapy Established Plan Of Care	I/OP	219.52	208.54	63.20	N/A	Contact UH	Contact UH	63.20	N/A	20.72	208.54	T.B.D
270		87086	Culture, Bacterial, Urine	I/OP	138.37	131.45	39.84	8.07	Contact UH	Contact UH	39.84	8.07	8.07	131.45	9.28
271		87150	Culture Typing, Dna/Rna Probe	I/OP	3009.88	2859.39	866.54	35.09	Contact UH	Contact UH	866.54	35.09	30.56	2859.39	40.35
272		72070	X-Ray, Thoracic Spine, 2 Views	I/OP	415.50	394.73	119.62	121.84	Contact UH	Contact UH	119.62	121.84	22.32	394.73	140.12
273		93798	Cardiac Rehabilitation With Ecg Monitor	I/OP	424.48	403.26	122.21	150.23	Contact UH	Contact UH	122.21	150.23	122.21	403.26	172.76
274		73564	X-Ray, Knee, 4 Or More Views	I/OP	445.29	423.03	128.20	121.84	Contact UH	Contact UH	128.20	121.84	21.70	423.03	140.12
275		93350	Echocardiography, Transthoracic	I/OP	2748.74	2611.30	791.36	636.80	Contact UH	Contact UH	791.36	636.80	2611.30	732.32	T.B.D
276		97116	Therapeutic Procedure, Gait Training	I/OP	325.65	309.37	93.75	N/A	Contact UH	Contact UH	93.75	N/A	93.75	309.37	T.B.D
277		92523	Evaluation Of Speech Sound Production	I/OP	590.95	561.40	170.13	N/A	Contact UH	Contact UH	170.13	N/A	48.00	561.40	T.B.D
278		83540	Blood Test, Iron	I/OP	757.41	719.54	5.18	6.47	Contact UH	Contact UH	5.18	6.47	5.18	719.54	7.44
279		84439	Blood Test, Free T4	I/OP	384.95	365.70	7.22	9.02	Contact UH	Contact UH	7.22	9.02	5.99	365.70	10.37
280		82728	Blood Test, Ferritin	I/OP	593.03	563.38	10.90	13.63	Contact UH	Contact UH	10.90	13.63	10.90	563.38	15.67
281		93308	Echocardiography, Transthoracic, Follow-Up Or Limited Study	I/OP	1507.54	1432.16	434.02	278.07	Contact UH	Contact UH	434.02	278.07	278.07	1432.16	319.78
282		86592	Syphilis Test	I/OP	97.80	92.91	3.42	4.27	Contact UH	Contact UH	3.42	4.27	2.94	92.91	4.91
283		83605	Blood Test, Lactic Acid	I/OP	975.90	927.11	280.96	11.57	Contact UH	Contact UH	280.96	11.57	5.99	927.11	13.31
284		84100	Blood Test, Phosphorus	I/OP	88.43	84.01	3.79	4.74	Contact UH	Contact UH	3.79	4.74	0.98	84.01	5.45
285		93017	Cardiovascular Stress Test	I/OP	1195.42	1135.65	344.16	251.64	Contact UH	Contact UH	344.16	251.64	150.00	1135.65	289.39
286		76856	Ultrasound Of Pelvis	I/OP	639.85	607.86	184.21	121.84	Contact UH	Contact UH	184.21	121.84	57.66	607.86	140.12
287		70496	Ct Scan, Head Or Brain	I/OP	1760.36	1672.34	506.81	204.41	Contact UH	Contact UH	506.81	204.41	204.41	1672.34	235.07
288		74170	Ct Scan, Abdomen With And Without Contrast	I/OP	4796.24	4556.43	1380.84	204.41	Contact UH	Contact UH	1380.84	204.41	204.41	4556.43	235.07

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

Shoppable	N/A			Location		Three Rivers Provider	United Healthcare	United Healthcare		United Healthcare:	United HealthCare:	Fidelis:	Minimum	Maximum	Discounted Cash
ID	Indicator	Billing Code	Description	Provided	Gross Charge	Network	Community Plan: Medicaid	Community Plan: Medicare	Commercial / PPO	Oxford	Fidelis: Medicaid	Medicare	Negotiated Rate	Negotiated Rate	Price
289		70486	Ct Scan, Maxillofacial Without Contrast	IP/OP	1206.86	1146.52	347.45	121.84	Contact UH	Contact UH	347.45	121.84	121.84	1146.52	140.12
290		71260	Ct Scan, Thorax With Contrast	IP/OP	1656.32	1573.50	476.85	204.41	Contact UH	Contact UH	476.85	204.41	200.88	1573.50	235.07
291		88341	Immunohistochemistry Or Immunocytochemistry, Per Specimen	IP/OP	499.39	474.42	143.77	N/A	Contact UH	Contact UH	143.77	N/A	48.52	474.42	T.B.D
292		87077	Culture, Bacterial, Aerobic Isolate	IP/OP	82.19	78.08	6.46	8.08	Contact UH	Contact UH	6.46	8.08	6.46	78.08	9.29
293		76937	Ultrasound Guided Vascular Access	IP/OP	616.96	586.11	177.62	N/A	Contact UH	Contact UH	177.62	N/A	56.84	586.11	T.B.D
294		77001	Fluoroscopic Guidance For Vein Dvc	IP/OP	502.51	477.38	144.67	N/A	Contact UH	Contact UH	144.67	N/A	56.13	477.38	T.B.D
295		83615	Lactate Dehydrogenase (Ld), (Ldh)	IP/OP	84.27	80.06	4.83	6.04	Contact UH	Contact UH	4.83	6.04	1.70	80.06	6.95
296		85652	Sedimentation Rate, Erythrocyte, Automated	IP/OP	63.46	60.29	2.16	2.70	Contact UH	Contact UH	2.16	2.70	2.16	60.29	3.11
297		82306	Gonadotropin, Chorionic (Hcg), Quantitative	IP/OP	583.66	554.48	23.68	29.60	Contact UH	Contact UH	23.68	29.60	19.47	554.48	34.04
298		86803	Hepatitis C Antibody	IP/OP	371.42	352.85	11.42	14.27	Contact UH	Contact UH	11.42	14.27	10.18	352.85	16.41
299		80202	Blood Test, Vancomycin	IP/OP	196.64	186.81	10.83	13.54	Contact UH	Contact UH	10.83	13.54	10.83	186.81	15.57
300		86704	Hepatitis B Core Antibody (Hbcab); Total	IP/OP	125.89	119.60	9.64	12.05	Contact UH	Contact UH	9.64	12.05	8.39	119.60	13.86
301		84484	Blood Test, Troponin	IP/OP	199.76	189.77	9.98	12.47	Contact UH	Contact UH	9.98	12.47	9.98	189.77	14.34
302		84145	Procalcitonin (Pct)	IP/OP	1117.39	1061.52	21.78	27.22	Contact UH	Contact UH	21.78	27.22	16.88	1061.52	31.30
303		86140	C-Reactive Protein	IP/OP	63.46	60.29	4.14	5.18	Contact UH	Contact UH	4.14	5.18	4.14	60.29	5.96