

Estimated Charges for Common Laboratory Procedures as of July 19, 2018

Procedure	CPT	Estimated Charge
ANTIBODY SCREEN	86850	\$ 34.15
BASIC METABOLIC PANEL	80048	\$ 31.30
BLOOD GAS	82803	\$ 88.12
BLOOD TYPING, ABO TYPE	86900	\$ 11.39
BLOOD TYPING, RH TYPE	86901	\$ 11.39
COLLECT VENOUS BLOOD VENIPUNCTURE	36415	\$ 22.73
COMPLETE (CBC) WITH AUTOMATED DIFFERENTIAL	85025	\$ 28.42
COMPLETE (CBC) WITHOUT DIFFERENTIAL	85027	\$ 22.73
COMPREHENSIVE METABOLIC PANEL	80053	\$ 42.67
CREATINE KINASE (CPK)	82550	\$ 17.04
HCG QUAL PREGNANCY TEST	84703	\$ 28.42
HEPATIC PANEL	80076	\$ 31.30
MAGNESIUM	83735	\$ 17.04
MB FRACTION ONLY	82553	\$ 42.67
MICROSCOPIC URINALYSIS	81015	\$ 14.24
PHOSPHORUS	84105	\$ 28.42
PROTHROMBIN TIME (PT)	85610	\$ 22.73
THROMBOPLASTIN TIME, PARTIAL (PTT)	85730	\$ 22.73
TROPONIN	84484	\$ 71.06
URINALYSIS AUTO WITHOOUT SCOPE	81003	\$ 11.98

Estimated Charges for Common Radiology Procedures as of July 19, 2018

Procedure	CPT	Estimated Charge
BREAST ULTRASOUND COMPLETE	76641	\$ 495
BREAST ULTRASOUND LIMITED	76642	\$ 371
COMPUTED TOMOGRAPHY, ABDOMEN & PELVIS WITH CONTRAST	74177	\$ 578
COMPUTED TOMOGRAPHY, ABDOMEN WITH CONTRAST	74160	\$ 438
COMPUTED TOMOGRAPHY, CHEST, THORAX WITH CONTRAST	71260	\$ 438
COMPUTED TOMOGRAPHY, HEAD SCAN WITHOUT CONTRAST	70450	\$ 196
COMPUTED TOMOGRAPHY, PELVIC/SACRUM WITH CONTRAST	72193	\$ 438
ECHOCARDIOGRAPHY TRANSTHORACIC WITH DOPPLER & COLOR FLOW	93306	\$ 186
EXTREMITY ARTERIAL STUDY, BILATERAL SEGMENT ARTERIAL	93923	\$ 792
EXTREMITY VENOUS STUDY, UNILATERAL OR LIMITED VENOUS DUPLEX	93971	\$ 693
FLUOROSCOPY, GREATER THAN 1 HOUR	76001	\$ 272
MAMMOGRAM BILATERAL DIGITAL	77066	\$ 841
MAMMOGRAM SCREENING DIGITAL	77067	\$ 693
MAMMOGRAM UNILATERAL DIGITAL	77065	\$ 643
PELVIC - TRANSVAGINAL ULTRASOUND	76830	\$ 619
RADIOLOGIC EXAMINATION, ABDOMEN (1 VIEW)	74018	\$ 99
RADIOLOGIC EXAMINATION, CHEST (1 VIEW)	71045	\$ 99
RADIOLOGIC EXAMINATION, CHEST (2 VIEWS)	71046	\$ 124
RADIOLOGIC EXAMINATION, FOOT MINIMUM 3 VIEWS	73630	\$ 148
RADIOLOGIC EXAMINATION, HAND MIN 3 VIEWS	73130	\$ 148
ULTRASOUND PELVIC NON OBSTETRIC	76856	\$ 520

Estimated Charges for Outpatient Surgical Procedures as of July 19, 2018

Procedure	Primary CPT	
	Procedure	Estimated Charge
ARTHRODESIS	28750	\$ 11,600
ARTHROSCOPY KNEE WITH MENISECTOMY	29881	\$ 4,400
BIOPSY LIVER	47000	\$ 2,900
BIOPSY ULTRASOUND GUIDED PROSTATE	55700	\$ 2,800
BLADDER INSTILLATION OF ANTICARCINOGENIC AGENT	51720	\$ 2,000
BREAST BIOPSY	19125	\$ 6,100
CHOLECYSTECTOMY LAPAROSCOPIC	47562	\$ 7,800
COLONOSCOPY	45378	\$ 2,700
COLONOSCOPY WITH BIOPSY	45380	\$ 3,300
CYSTOSCOPY	52000	\$ 2,800
DAVINCI SALPINGECTOMY OOPHERECTOMY	58661	\$ 8,400
ENDOSCOPY, UPPER GASTROINTESTINAL (EGD)	43242	\$ 4,000
EXTRA CORPORAL SHOCKWAVE LITHOTRIPSY	50590	\$ 4,600
HYSTEROSCOPY	58558	\$ 3,800
INSERTION PORTACATH	36561	\$ 5,300
LAPAROSCOPIC TOTAL ABDOMINAL HYSTERECTOMY	58571	\$ 10,200
LEEP PROCEDURE	57522	\$ 3,100
MASTECTOMY PARTIAL	19301	\$ 9,000
PELVISCOPY	58662	\$ 7,400
REPAIR HERNIA INGUINAL LAPAROSCOPIC	49650	\$ 7,300

Estimated Charges for Common Inpatient Medical/Surgical Procedures as of July 19, 2018

Federal DRG Description	Federal DRG	Average Charge
ESOPHOGITIS, GASTROENTEROLOGY & MISC	392	\$ 8,500
CHEST PAIN	313	\$ 9,200
CERVICAL SPINAL FUSION	473	\$ 16,200
COMBINED ANTERIOR/POSTERIOR SPINAL FUSION	454	\$ 31,800
LAPAROSCOPIC CHOLECYSTECTOMY	419	\$ 11,700
MAJOR JOINT REPLACEMENT OR REATTACHMENT OF LOWER EXTREMITY	470	\$ 18,000
MAJOR SMALL & LARGE BOWEL PROCEDURES	330	\$ 36,200
MASTECTOMY FOR MALIGNANCY	583	\$ 31,200
OTHER SKIN, TISSUE & BREAST PROCEDURES	581	\$ 30,600
PANCREAS, LIVER & SHUNT PROCEDURES	406	\$ 35,400
REVISION OF HIP OR KNEE REPLACEMENT	467	\$ 26,600
SPINAL FUSION EXCEPT CERVICAL	460	\$ 31,000
THYROID, PARATHYROID & THYROGLOSSAL PROCEDURES	627	\$ 9,100
UTERINE/ADNEXA PROCEDURES WITHOUT COMPLICATIONS	743	\$ 10,800
UTERINE/ADNEXA PROCEDURES WITH COMPLICATIONS	742	\$ 16,100
VASCULAR PROCEDURES	253	\$ 32,000

Estimated Charges for Common Inpatient Mother/Baby Procedures as of July 19, 2018

Federal DRG Description	Federal DRG	Average Charge
CESAREAN SECTION WITH COMPLICATION	765	\$ 12,700
CESAREAN SECTION WITHOUT COMPLICATION	766	\$ 9,900
FULL TERM NEONATE WITH MAJOR PROBLEMS	793	\$ 6,500
NEONATE WITH OTHER SIGNIFICANT PROBLEMS	794	\$ 2,100
NORMAL NEWBORN	795	\$ 1,700
OTHER ANTEPARTUM DIAGNOSIS WITH MEDICAL COMPLICATION	781	\$ 9,300
OTHER ANTEPARTUM DIAGNOSIS WITHOUT MEDICAL COMPLICATION	782	\$ 13,800
PREMATURITY WITHOUT MAJOR PROBLEMS	792	\$ 5,200
VAGINAL DELIVERY WITH COMPLICATING DIAGNOSIS	774	\$ 10,300
VAGINAL DELIVERY WITHOUT COMPLICATING DIAGNOSIS	775	\$ 9,100