

2012
ROOM AND BOARD----PER DAY CHARGES

Intensive Care	\$1053.00
Nursery	\$316.00
Birthing Suite (LDR)	\$385.00
Routine Care	\$385.00
Senior Care	\$833.00
Rehab	\$875.00

LABOR AND DELIVERY

The following list does not include charges for anesthesia, drugs, or supplies required for a particular delivery room procedure. Fees for physician services or anesthesia administration are also not reflected and will be billed separately by your physician.

Normal Delivery	\$1121.00
Fetal Monitor Non-Stress Test	\$107.00
Labor Room Per Hour	\$59.00

EMERGENCY DEPARTMENT CHARGES

Emergency Department charges are based on the level of emergency care provided to our patients. The levels, with Level 1 representing basic emergency care, reflect the type of accommodations needed, the personnel resources, the intensity of care and the amount of time needed to provide treatment. The following charges do not include fees for drugs, supplies or additional ancillary procedures that may be required for a particular emergency treatment. They also do not include fees for Emergency Department physicians who will bill separately for their services.

Level 1	\$73.00
Level 2	\$109.00
Level 3	\$180.00
Level 4	\$353.00
Level 5	\$357.00
Critical Care	\$558.00

OPERATING ROOM CHARGES

Operating Room charges are based on the complexity level, with Minor being the most basic, for a particular operation. There is an initial set-up charge as well as an additional charge for each 15 minutes while the operation is being performed.

Minor-Setup Charge	\$998.00
Minor-Additional 15 Minutes	\$195.00
Major-Setup Charge	\$1,757.00
Major-Additional 15 Minutes	\$262.00

THErapy SERVICES CHARGES

The following charges reflect the most common services offered by our Therapy Services department. Patients may have additional charges depending on the services performed.

PT Therapeutic Exercise, 15 min.	\$53.00
PT Gait Training, 15 min.	\$51.00
PT Therapeutic Activity, 15 min.	\$60.00
PT Evaluation	\$169.00
PT Neuromuscular RE-ED, 15 min.	\$53.00
PT Electric Stim.- Attended	\$48.00
OT Neuromuscular RE-ED, 15 min.	\$53.00
OT Therapeutic Exercise, 15 min.	\$53.00
PT Hot or Cold Packs	\$34.00
Speech Treatment	\$163.00
PT Ultrasound, 15 min.	\$48.00
PT Group Therapeutic Procedure	\$34.00
PT Re-Evaluation	\$83.00
PT Manual Therapy, 15 min.	\$55.00
OT Whirlpool	\$77.00
PT Traction, Mechanical	\$48.00
OT Sensory Integretion, 15 min.	\$57.00

CARDIO-PULMONARY CHARGES

The following charges reflect the most common services offered by our Cardio-Pulmonary department. Patients may have additional charges depending on the services performed.

CARDIAC REHAB PHASE II VISIT EXERCISE PROG	\$100.00
CARDIAC REHAB PHASE III SELF PAY /MONTH	\$67.00
CARDIAC REHAB PHASE III 2 DAYS/WK	\$60.00
PULMONARY FUNCTION PFT ARTERIAL PUNCTURE	\$38.00
PULMONARY FUNCTION LUNG VOLUME DETERMINATION	\$204.00
PULMONARY FUNCTION SPIROMETRY, B & A DILATOR	\$226.00
PULMONARY FUNCTION DIFFUSION CAPACITY	\$166.00
PULMONARY REHAB EXERCISE SESSION	\$84.00
PULMONARY REHAB PULSE OXIMETRY - SINGLE	\$56.00
PULMONARY REHAB EDUCATIONAL SES. PULM REHAB	\$53.00

RESPIRATORY CARE AERO/MDI TREATMENT, SUBSEQUEN	\$50.00
RESPIRATORY CARE PULSE OXIMETRY, SINGLE	\$56.00
RESPIRATORY CARE OXYGEN, DAILEY CHARGE	\$78.00
RESPIRATORY CARE AERO/MDI TREATMENT, INITIAL	\$65.00
RESPIRATORY CARE BRONCHOPULMONARY HYGIENE, SUB	\$56.00
RESPIRATORY CARE VENTILATOR DAILY, SUBSEQUENT	\$321.00
RESPIRATORY CARE HME/HUMIDIFIER	\$20.00
RESPIRATORY CARE BRONCHOPULM. HYGIENE, INITIAL	\$56.00
RESPIRATORY CARE VENTILATOR CIRCUIT	\$56.00
SLEEP LAB POLYSOMNOGRAPHY	\$2195.00
SLEEP LAB POLYSOMNOGRAPHY W/CPAP THERAPY	\$2,400.00

RADIOLOGICAL CHARGES

The following charges reflect the hospital's 30 most common radiological procedures.

CT SCAN OPTIRAY 320-125MLS	\$403.00
CT SCAN CT HEAD W/O CONTRAST	\$668.00
CT SCAN CORON SAG OBL W/ PROCESSING	\$401.00
CT SCAN CT ABD W/O & W/CONT	\$967.00
CT SCAN CT PELV W/O & W/CONT	\$967.00
CT SCAN CT CHEST W/ CON	\$848.00
CT SCAN CT PELVIS W/O CONT	\$799.00
CT SCAN CT ABD W/O CONT	\$883.00
IMAGING CHEST 2 VIEW FRNTL&LAT	\$135.00
IMAGING CHEST, ONE VIEW PORT	\$97.00
IMAGING FLUORO GUIDE FOR SPINE INJECT	\$225.00
IMAGING FOOT CMPL MINI 3 VIEWS	\$110.00
IMAGING HAND MINI 3 VIEWS	\$114.00
IMAGING ABD CMP AC ABD 1VIEW CHEST	\$218.00
IMAGING ANKLE CMPL MINI 3 VIEWS	\$103.00
IMAGING SPINE LUMBOSA MINIMUM 4 VW	\$180.00
IMAGING ABD SINGL AP VIEW	\$118.00
IMAGING HIP UNI CMPL MINI 2 VIEWS	\$141.00
IMAGING OPTIRAY	\$80.00
IMAGING SHLDR CMPL MINIMUM 2 VW	\$115.00
MRI OPTIMARK	\$144.00
MRI MRI SPINAL LUMB NO CON	\$1,434.00
NUCLEAR MEDICINE TETROFOSMIN TC-99 M (MYOVIEW	\$245.00
NUCLEAR MEDICINE MYOCARD PERF IMAG MX STUDY	\$874.00
NUCLEAR MEDICINE MYOCARD PERF W/EJEC FRAC	\$252.00
NUCLEAR MEDICINE MYO PER QUAL/QUAN WALL MO	\$147.00
ULTRASOUND DUPLEX CAROTID ART BIL STDY	\$556.00
ULTRASOUND ABD MULT ORGAN COMPL	\$358.00
WOMENS WELLNESS DIGITAL SCREENING MAMMOGRAM	\$155.00

LABORATORY CHARGES

*The following charges reflect the hospital's 30 most common laboratory procedures.
All blood draws will automatically include a \$15.00 Venipuncture charge.*

BLOOD BANK CROSSMATCH	\$85.00
CHEMISTRY BASIC METABOLIC PANEL	\$62.00
CHEMISTRY COMPRE METABOLIC PANEL	\$86.00
CHEMISTRY PROTHROMBIN TIME	\$32.00
CHEMISTRY CPK	\$57.00
CHEMISTRY LIPID PROFILE	\$68.00
CHEMISTRY TROPONIN, QUANTITATIVE	\$33.00
CHEMISTRY MYOGLOBIN	\$33.00
CHEMISTRY CKMB	\$74.00
CHEMISTRY THYROID STIM HORMONE	\$61.00
CHEMISTRY HEPATIC FUNCTION PANEL	\$67.00
CHEMISTRY APTT	\$50.00
CHEMISTRY GLYCOHEMOGLOBIN (A1C)	\$53.00
CHEMISTRY AMYLASE	\$29.00
CHEMISTRY LIPASE	\$27.00
CHEMISTRY FREE T4	\$56.00
CHEMISTRY MAGNESIUM	\$29.00
CYTOLOGY THIN PREP-PAP SMEAR	\$61.00
HEMA & URINE CBC WITH AUTO DIFF	\$56.00
HEMA & URINE URINALYSIS	\$31.00
HEMA & URINE URINE MICROSCOPIC	\$21.00
HEMA & URINE HEMOGLOBIN	\$25.00
HEMA & URINE HEMATOCRIT	\$25.00
HEMA & URINE SED RATE	\$28.00
HISTOLOGY GROSS & MICRO LEVEL 4	\$82.00
MICROBIOLOGY DEFINITIVE ORGANISM IDENT	\$32.00
MICROBIOLOGY URINE CULTURE	\$63.00
MICROBIOLOGY BLOOD CULTURE	\$85.00
MICROBIOLOGY MIC SENSITIVITY	\$61.00