Silver Lake Hospital Shoppable Services Filename: 272315799_SilverLakeHospital_ShoppableServices.csv Updated 1/10/2023, using 12/06/2022 CDM

Notes: Insplictent charges are not separately billable and are included in the PER DIEM level rate. The PER DIEM level rates are defined by MS-DRG system based on secondary diagnosis, secondary diagnoses, surgical procedures, age, sex and discharge status of the patients treated. The fitne levels of sevenity in the MS-DRG system based on secondary diagnosis codes include: 1. Non-CC: Non-Complication/Comobility, this level does not agnificantly affect sevenity of illness and resource use 2. CC: complication/Comobility, the highest level of sevenity 3. MCC: Major Complication/Comobility, the highest level of sevenity Using the DRG seventy levels there is an understanding of the patients being treated, the reasonable limits of the costs incurred and the services expected to be required.

Shoppable N/A ID Indicator	Billing Code	Description	Location Provided	Gross Charge	Commercial Insurances	Minimum Negotiated Rate	Maximum Negotiated Rate	Discounted Cash Price
1	85027	Complete Blood Count, Automated	IP	135.10	N/A	N/A	N/A	N/A
2	80053	Blood Test, Comprehensive Group Of Blood Chemicals	IP	887.64	N/A	N/A	N/A	N/A
	80061	Blood Test, Lipids (Cholesterol And Triglycerides)	IP	402.12	N/A	N/A	N/A	N/A
4	84153	Psa (Prostate Specific Antigen)	IP	282.33	N/A	N/A	N/A	N/A
5	80076	Liver Function Blood Test Panel	IP	600.00	N/A	N/A	N/A	N/A
	70450	Ct Scan, Head Or Brain, Without Contrast	IP	2400.00	N/A	N/A	N/A	N/A
7 N/A	74177 81001	Ct Scan Of Abdomen And Pelvis With Contrast	N/A IP	N/A 100.00	N/A N/A	N/A N/A	N/A N/A	N/A
8 9	76830	Manual Urinalysis Test With Examination Using Microscope Ultrasound Pelvis Through Vagina	IP	2400.00	N/A N/A	N/A N/A	N/A N/A	N/A N/A
10 N/A	62323	Injection Of Substance Into Spinal Canal Of Lower Back Or Sacrum Using Imaging Guidance	N/A	N/A	N/A	N/A	N/A	N/A
11	85610	Blood Test. Clotting Time	IP	150.44	N/A	N/A	N/A	N/A
12	85730	Coagulation Assessment Blood Test	IP	200.53	N/A	N/A	N/A	N/A
13	80048	Basic Metabolic Panel	IP	391.92	N/A	N/A	N/A	N/A
14	72193	Ct Scan, Pelvis, With Contrast	IP	2400.00	N/A	N/A	N/A	N/A
15 N/A	93452	Insertion Of Catheter Into Left Heart For Diagnosis	N/A	N/A	N/A	N/A	N/A	N/A
16	76700	Ultrasound Of Abdomen	IP	2400.00	N/A	N/A	N/A	N/A
17	73721	Mri Scan Of Leg Joint	IP	2400.00	N/A	N/A	N/A	N/A
18 N/A	59400	Routine Obstetric Care For Vaginal Delivery, Including Pre-And Post-Delivery Care	N/A	N/A	N/A	N/A	N/A	N/A
19 N/A	77067	Mammography, Screening, Bilateral	N/A	N/A	N/A	N/A	N/A	N/A
20	43239	Biopsy Of The Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope	IP	2400.00	N/A	N/A	N/A	N/A
21	43235	Diagnostic Examination Of Esophagus, Stomach, And/Or Upper Small Bowel Using An Endoscope	IP	2400.00	N/A	N/A	N/A	N/A
22	72110	X-Ray, Lower Back, Minimum Four Views	IP	2400.00	N/A	N/A	N/A	N/A
23 N/A	64483	Injections Of Anesthetic And/Or Steroid Drug Into Lower Or Sacral Spine Nerve Root Using Imaging Gui	N/A	N/A	N/A	N/A	N/A	N/A
24 25 N/A	45385 77066	Removal Of Polyps Or Growths Of Large Bowel Using An Endoscope	IP N/A	2500.00	N/A	N/A	N/A	N/A
26	45380	Mammography Of Both Breasts Biopsy Of Large Bowel Using An Endoscope	IP	N/A 2500.00	N/A N/A	N/A N/A	N/A N/A	N/A N/A
27 N/A	49505	Repair Of Groin Hernia Patient Age 5 Years Or Older	N/A	N/A	N/A	N/A	N/A	N/A
28	97110	Physical Therapy, Therapeutic Exercise	IP	750.00	N/A	N/A	N/A	N/A
29	70553	Mri Scan Of Brain Before And After Contrast	IP	2400.00	N/A	N/A	N/A	N/A
30	81002	Automated Urinalysis Test	IP	99.61	N/A	N/A	N/A	N/A
31 N/A	66821	Removal Of Recurring Cataract In Lens Capsule Using Laser	N/A	N/A	N/A	N/A	N/A	N/A
32	72148	Mri Scan Of Lower Spinal Canal	IP	2400.00	N/A	N/A	N/A	N/A
33 N/A	90832	Psychotherapy, 30 Min	N/A	N/A	N/A	N/A	N/A	N/A
34 N/A	55700	Biopsy Of Prostate Gland	N/A	N/A	N/A	N/A	N/A	N/A
35 N/A	45391	Ultrasound Examination Of Lower Large Bowel Using An Endoscope	N/A	N/A	N/A	N/A	N/A	N/A
36 N/A	77065	Mammography Of One Breast	N/A	N/A	N/A	N/A	N/A	N/A
37 N/A	19120	Removal Of 1 Or More Breast Growth, Open Procedure	N/A	N/A	N/A	N/A	N/A	N/A
38 N/A	90834	Psychotherapy, 45 Min	N/A	N/A	N/A	N/A	N/A	N/A
39 N/A	90837	Psychotherapy, 60 Min	N/A	N/A	N/A	N/A	N/A	N/A
40	85025	Complete Blood Cell Count, With Differential White Blood Cells, Automated	IP	145.57	N/A	N/A	N/A	N/A
41	84443	Blood Test, Thyroid Stimulating Hormone (Tsh)	IP	316.88	N/A	N/A	N/A	N/A
42 N/A	90853	Group Psychotherapy	N/A	N/A	N/A	N/A	N/A	N/A
43	45378	Diagnostic Examination Of Large Bowel Using An Endoscope	IP	2500.00	N/A	N/A	N/A	N/A
44 N/A	90846	Family Psychotherapy, Not Including Patient, 50 Min	N/A	N/A	N/A	N/A	N/A	N/A
45 N/A	90847	Family Psychotherapy, Including Patient, 50 Min	N/A	N/A	N/A	N/A	N/A	N/A
46	99203	New Patient Office Or Other Outpatient Visit, Typically 30 Min	IP	50.00	N/A	N/A	N/A	N/A
47	99204	New Patient Office Of Other Outpatient Visit, Typically 45 Min	IP	50.00	N/A	N/A	N/A	N/A
48	99205		IP	50.00	N/A	N/A	N/A	N/A
40	99205	New Patient Office Of Other Outpatient Visit, Typically 60 Min	N/A	50.00	N/A	N/A	N/A	N/A
49 N/A	99243	Patient Office Consultation, Typically 40 Min		N/A	N/A	N/A	N/A	N/A
50 N/A	42820	Removal Of Tonsils And Adenoid Glands Patient Younger Than Age 12	N/A	N/A	N/A	N/A	N/A	N/A
51 N/A	47562		N/A	N/A	N/A	N/A	N/A	N/A
51 N/A	47562	Removal Of Gallbladder Using An Endoscope	N/A	N/A	N/A	N/A	N/A	N/A
52 N/A	55866	Surgical Removal Of Prostate And Surrounding Lymph Nodes Using An Endoscope	N/A	N/A	N/A	N/A	N/A	N/A
53 N/A	59510	Routine Obstetric Care For Cesarean Delivery, Including Pre-And Post-Delivery Care	N/A	N/A	N/A	N/A	N/A	N/A
54 N/A	59610	Routine Obstetric Care For Vaginal Delivery After Prior Cesarean Delivery Including Pre-And Post-Del	N/A	N/A	N/A	N/A	N/A	N/A
55 N/A	66984	Removal Of Cataract With Insertion Of Lens	N/A	N/A	N/A	N/A	N/A	N/A N/A
56 N/A	DRG - 460	Spinal Fusion Except Cervical Without Major Comorbid Conditions Or Complications (Mcc)	N/A	N/A	N/A	N/A	N/A	N/A
57 N/A	DRG - 470	Major Joint Replacement Or Reattachment Of Lower Extremity Without Major Comorbid Conditions Or Comp	N/A	N/A	N/A	N/A	N/A	N/A
58 N/A	DRG - 473	Cervical Spinal Fusion Without Comorbid Conditions (Cc) Or Major Comorbid Conditions Or Complication	N/A	N/A	N/A	N/A	N/A	N/A
59 N/A	DRG - 743	Uterine And Adnexa Procedures For Non-Malignancy Without Comorbid Conditions (Cc) Or Major Comorbid	N/A	N/A	N/A	N/A	N/A	N/A
60 N/A	29826	Shaving Of Shoulder Bone Using An Endoscope	N/A	N/A	N/A	N/A	N/A	N/A
61 N/A	29881	Removal Of One Knee Cartilage Using An Endoscope	N/A	N/A	N/A	N/A	N/A	N/A
62 N/A	99244	Patient Office Consultation, Typically 60 Min	N/A	N/A	N/A	N/A	N/A	N/A
63 N/A	99385	Initial New Patient Preventive Medicine Evaluation (18-39 Years)	N/A	N/A	N/A	N/A	N/A	N/A
64 N/A	99386	Initial New Patient Preventive Medicine Evaluation (40-64 Years)	N/A	N/A	N/A	N/A	N/A	N/A
65 N/A	80055	Obstetric Blood Test Panel	N/A	N/A	N/A	N/A	N/A	N/A
66	80069	Kidney Function Panel Test	IP	300.00	N/A	N/A	N/A	N/A
67 N/A	DRG - 216	Cardiac Valve And Other Major Cardiothoracic Procedures With Cardiac Catheterization With Major Comp	N/A IP	N/A	N/A	N/A	N/A	N/A
68	93000	Electrocardiogram, Routine, With Interpretation And Report	N/A	14.70	N/A	N/A	N/A	N/A
69 N/A	95810	Sleep Study		N/A	N/A	N/A	N/A	N/A
70 N/A	76805	Abdominal Ultrasound Of Pregnant Uterus (Greater Or Equal To 14 Weeks 0 Days) Single Or First Fetus	N/A	N/A	N/A	N/A	N/A	N/A
71	29515		IP	75.19	N/A	N/A	N/A	N/A
72	31622	Application of short leg splint (calf to foot) Bronchoscopy, rigid or flexible	IP	200.00	N/A	N/A	N/A	N/A N/A
73	36569	Insertion of peripherally inserted central venous catheter (PICC); age 5 years or older	IP	9999.90	N/A	N/A	N/A	N/A
74	36600	Arterial puncture, withdrawal of blood for diagnosis	IP	65.80	N/A	N/A	N/A	N/A
75	51798	Measurement of post-voiding residual urine and/or bladder capacity by ultrasound	IP	2400.00	N/A	N/A	N/A	N/A
76	70100	Radiologic examination, mandible; partial, less than 4 views	IP	2400.00	N/A	N/A	N/A	N/A
77	70150	Radiologic examination, facial bones; comolete, minimum of 3 views	IP	2400.00	N/A	N/A	N/A	N/A
78	70210	Radiologic examination, sinuses, paranasal, less than 3 views	IP	2400.00	N/A	N/A	N/A	N/A
79	70250	Radiologic examination, skull; less than 4 views	IP	2400.00	N/A	N/A	N/A	N/A
80	70360	Radiologic examination; neck, soft tissue	IP	2400.00	N/A	N/A	N/A	N/A
81	70490	Computed tomography, soft tissue neck; without contrast material	IP	2400.00	N/A	N/A	N/A	N/A
82	71010	Chest x-ray 1 view frontal	IP	2400.00	N/A	N/A	N/A	N/A
83	71020	Chest x-ray 2 view frontal & LATL	IP	2400.00	N/A	N/A	N/A	N/A
84	71110	Radiologic examination, ribs, bilateral; 3 views	IP	2400.00	N/A	N/A	N/A	N/A
85	71250	Computed tomography, thorax, diagnostic; without contrast material	IP	2400.00	N/A	N/A	N/A	N/A
86	71260	Computed tomography, thorax, diagnostic; with contrast material(s)	IP	2400.00	N/A	N/A	N/A	N/A
87	71275	Computed tomographic angiography, chest (noncoronary); with contrast material(s)	IP	2400.00	N/A	N/A	N/A	N/A
88	72040		IP	2400.00	N/A	N/A	N/A	N/A
89	72070	Radiologic examination, spine, cervical; 2 or 3 views Radiologic examination, spine; thoracic, 2 views	IP	2400.00	N/A	N/A	N/A	N/A
90	72080	Radiologic examination, spine; thoracolumbar junction, minimum of 2 views	IP	2400.00	N/A	N/A	N/A	N/A
91	72100	Radiologic examination, spine, lumbosacral; 2 or 3 views	IP	2400.00	N/A	N/A	N/A	N/A
92	72125	Computed tomography, cervical spine; without contrast material	IP	2400.00	N/A	N/A	N/A	N/A
93	72131	Computed tomography, lumbar spine; without contrast material	IP	2400.00	N/A	N/A	N/A	N/A
94	72190	Radiologic examination, pelvis; complete, minimum of 3 views	IP	2400.00	N/A	N/A	N/A	N/A
95	72192	Computed tomography, pelvis; without contrast material	IP	2400.00	N/A	N/A	N/A	N/A
96	72220	Radiologic examination, sacrum and coccyx, minimum of 2 views	IP	2400.00	N/A	N/A	N/A	N/A
97	73020	Radiologic examination, shoulder: 1 view	IP	2400.00	N/A	N/A	N/A	N/A
98	73030	Radiologic examination, shoulder; complete, minimum of 2 views	IP	2400.00	N/A	N/A	N/A	N/A
99	73060	Radiologic examination; humerus, minimum of 2 views	IP	2400.00	N/A	N/A	N/A	N/A
100	73090	Radiologic examination; forearm, 2 views	IP	2400.00	N/A	N/A	N/A	N/A
101	73120	Radiologic examination, hand; 2 views	IP	2400.00	N/A	N/A	N/A	N/A
102	73130	Radiologic examination, hand; minimum of 3 views	IP	2400.00	N/A	N/A	N/A	N/A
103	73140	Radiologic examination, finger(s), minimum of 2 views	IP	2400.00	N/A	N/A	N/A	N/A
104	73510	X-ray exam of hip	IP	2400.00	N/A	N/A	N/A	N/A
105	73520	X-ray exam of hips	IP	2400.00	N/A	N/A	N/A	N/A
106	73550	X-ray exam of thigh	IP	2400.00	N/A	N/A	N/A	N/A
107	73560 73562	Radiologic examination, knee; 1 or 2 views	IP IP	2400.00 2400.00	N/A N/A	N/A	N/A N/A	N/A
108	73562	Radiologic examination, knee; 3 views	IP	2400.00	N/A	N/A	N/A	N/A
109	73590	Radiologic examination; tibia and fibula, 2 views		2400.00	N/A	N/A	N/A	N/A
110	73600	Radiologic examination, ankle; 2 views	IP IP	2400.00	N/A	N/A	N/A	N/A
111	73620	Radiologic examination, foot; 2 views	IP	2400.00	N/A	N/A	N/A	N/A
112	73630	Radiologic examination, foot; complete, minimum of 3 views		2400.00	N/A	N/A	N/A	N/A
113	73700	Computed tomography, lower extremity; without contrast material	IP IP	2400.00	N/A	N/A	N/A	N/A
114	73701	Computed tomography, lower extremity; with contrast material(s)	IP	2400.00	N/A	N/A	N/A	N/A
115	74000	X-ray exam of abdomen	IP	2400.00	N/A	N/A	N/A	N/A
116 117	74018 74150	Radiologic examination, abdomen; 1 view	IP IP	2400.00 2400.00	N/A N/A	N/A N/A	N/A N/A	N/A
118	74150 74160	Computed tomography, abdomen; without contrast material Computed tomography, abdomen; with contrast material(s)	IP	2400.00 2400.00	N/A N/A	N/A N/A	N/A N/A	N/A N/A
119	74241	X-ray upper gi delay w/KUB	IP	2400.00	N/A	N/A	N/A	N/A
120	74340	X-Ray Guide For GI Tube	IP	2400.00	N/A	N/A	N/A	N/A
121	75726	Artery X-Rays Abdomen	IP	2400.00	N/A	N/A	N/A	N/A
122	76000	Fluoroscopy (separate procedure), up to 1 hour physician or other qualified health care professional time	IP	2400.00	N/A	N/A	N/A	N/A
123	76705	Ultrasound, abdominal	IP	2400.00	N/A	N/A	N/A	N/A
124	76770	Ultrasound, retroperitoneal (eg, renal, aorta, nodes), real time with image documentation; complete	IP	2400.00	N/A	N/A	N/A	N/A
125	76880	US exam, extremity	IP	2400.00	N/A	N/A	N/A	N/A

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Shoppable	N/A			Gross		Minimum Negotiated	Maximum	
	Indicator Billing Code 80162	Digoxin; total	Location Provid		Commercial Insurances N/A	Rate N/A	Negotiated Rate N/A	Discounted Cash Price N/A
127	80164	Valproic acid (dipropylacetic acid); total	IP	244.43	N/A	N/A	N/A	N/A
128		Gentamicin	IP	114.86	N/A	N/A	N/A	N/A
129	80185	Phenytoin; total	IP	137.83	N/A	N/A	N/A	N/A
130	80197	Phenytoin; free	IP	74.49	N/A	N/A	N/A	N/A
131		Tacrolimus	IP	327.89	N/A	N/A	N/A	N/A
132	80202	Vancomycin	IP	249.96	N/A	N/A	N/A	N/A
133	80299	Quantitation of therapeutic drug, not elsewhere specified	IP	74.49	N/A	N/A	N/A	N/A
134	82009	Ketone body(s) (eg, acetone, acetoacetic acid, beta-hydroxybutyrate); qualitative	IP	67.24	N/A	N/A	N/A	N/A
135	82013	Acetylcholinesterase	IP	60.55	N/A	N/A	N/A	N/A
136	82040	Albumin; serum, plasma or whole blood	IP	143.42	N/A	N/A	N/A	N/A
137		Albumin; urine (eg, microalbumin), quantitative	IP	80.73	N/A	N/A	N/A	N/A
138		Aldolase	IP IP	52.23 91.20	N/A N/A	N/A N/A	N/A N/A	N/A N/A
140	82140	Alpha-fetoprotein (AFP); serum Ammonia	IP	276.90	N/A	N/A	N/A	N/A
141	82150	Amylase	IP	282.33	N/A	N/A	N/A	N/A
142	82247	Bilirubin; total	IP	100.00	N/A	N/A	N/A	N/A
143	82270	Blood occult feces	IP	84.60	N/A	N/A	N/A	N/A
144	82271	Blood occult other sources	IP	100.00	N/A	N/A	N/A	N/A
145		Tests for blood, occult	IP	243.36	N/A	N/A	N/A	N/A
146		Vitamin D; 25 hydroxy, includes fraction(s), if performed	IP	204.00	N/A	N/A	N/A	N/A
147		Calcium; total	IP	106.86	N/A	N/A	N/A	N/A
148		Carcinoembryonic antigen (CEA)	IP	158.76	N/A	N/A	N/A	N/A
149		Chloride; urine Colloride; urine	IP IP	116.32	N/A N/A	N/A N/A	N/A N/A	N/A
151	82533	Cortisol; total	IP IP	91.20 77.29	N/A	N/A	N/A	N/A N/A
152 153	82553	Creatine kinase (CK), (CPK); isoenzymes Creatine kinase (CK), (CPK); MB fraction only	IP	72.41 105.79	N/A N/A	N/A N/A	N/A N/A	N/A N/A
154	82565	Creatinine; blood	IP	71.27	N/A	N/A	N/A	N/A
155	82570	Creatinine; other source	IP	170.63	N/A	N/A	N/A	N/A
156 157		Creatinine; clearance Cyanocobalamin (Vitamin B-12);	IP	158.76 253.18	N/A N/A	N/A N/A	N/A N/A	N/A N/A
158		Vitamin D; 1, 25 dihydroxy, includes fraction(s), if performed	IP	208.20	N/A	N/A	N/A	N/A
159		Erythropoietin	IP	101.66	N/A	N/A	N/A	N/A
160	82728	Ferritin	IP	296.01	N/A	N/A	N/A	N/A
161		Folic acid; RBC	IP	176.90	N/A	N/A	N/A	N/A
162		Gases, blood, any combination of pH, pCO2, pO2, CO2, HCO3	IP	65.80	N/A	N/A	N/A	N/A
163		Gases, blood, any combination of pH, pCO2, pO2, CO2, HCO3; with O2 saturation	IP	685.46	N/A	N/A	N/A	N/A
164		Glucose; quantitative, blood (except reagent strip)	IP	81.80	N/A	N/A	N/A	N/A
165	82949	Glucose	IP	124.64	N/A	N/A	N/A	N/A
166	82977	Glutamyltransferase, gamma (GGT)	IP	97.14	N/A	N/A	N/A	N/A
167 168		Haptoglobin; quantitative	IP IP	87.82 236.44	N/A N/A	N/A N/A	N/A N/A	N/A N/A
169	83525	Hemoglobin; glycosylated (A1C) Insulin; total	IP IP	61.95	N/A	N/A	N/A	N/A
170 171	83550	Iron Iron binding capacity	IP	218.34 90.22	N/A N/A	N/A N/A	N/A N/A	N/A N/A
172	83605	Lactate (lactic acid)	IP	186.94	N/A	N/A	N/A	N/A
173	83615	Lactate dehydrogenase (LD), (LDH)	IP	204.07	N/A	N/A	N/A	N/A
174	83690	Lipase	IP	201.60	N/A	N/A	N/A	N/A
175	83735	Magnesium	IP	299.16	N/A	N/A	N/A	N/A
176		Natriuretic peptide	IP IP	340.83 144 17	N/A N/A	N/A N/A	N/A N/A	N/A N/A
178	83935	Osmolality: blood Osmolality: urine	IP	97.14	N/A	N/A	N/A	N/A
179		Parathormone (parathyroid hormone)	IP	450.42	N/A	N/A	N/A	N/A
180		Phosphorus inorganic (phosphate)	IP	133.06	N/A	N/A	N/A	N/A
181	84120	Phosphorus inorganic (phosphate); urine	IP	71.34	N/A	N/A	N/A	N/A
182		Porphyrins, urine; quantitation and fractionation	IP	79.33	N/A	N/A	N/A	N/A
183	84132	Potassium; serum, plasma or whole blood	IP	43.16	N/A	N/A	N/A	N/A
184	84133	Potassium; urine	IP	112.13	N/A	N/A	N/A	N/A
185	84134	Prealbumin	IP	189.83	N/A	N/A	N/A	N/A
186	84145	Procalcitonin (PCT)	IP	677.72	N/A	N/A	N/A	N/A
187	84146	Prolactin	IP IP	147.32 119.47	N/A N/A	N/A N/A	N/A N/A	N/A N/A
189	84207	Protein, total, except by refractometry; serum, plasma or whole blood Pyridoxal phosphate (Vitamin B-6)	IP	151.74	N/A	N/A	N/A	N/A
190	84425	Sodium; urine	IP	144.33	N/A	N/A	N/A	N/A
191		Thiamine (Vitamin B-1)	IP	114.86	N/A	N/A	N/A	N/A
192	84436	Thyroxine; total	IP	112.06	N/A	N/A	N/A	N/A
193	84447	Urine Toxicology Screen	IP	365.46	N/A	N/A	N/A	N/A
194	84450	Transferase; aspartate amino (AST) (SGOT)	IP	235.40	N/A	N/A	N/A	N/A
195	84460	Transferase; alanine amino (ALT) (SGPT)	IP	223.93	N/A	N/A	N/A	N/A
196		Transferin	IP	254.09	N/A	N/A	N/A	N/A
197		Triglycerides	IP	206.80	N/A	N/A	N/A	N/A
198	84481	Trilodothyronine T3; free	IP IP	78.68	N/A	N/A	N/A N/A	N/A
199 200	84550	Troponin, quantitative Uric acid; blood	IP	191.13 189.41	N/A N/A	N/A N/A	N/A	N/A N/A
201	84590	Vitamin A	IP	105.53	N/A	N/A	N/A	N/A
202	84591	Vitamin, not otherwise specified	IP	134.62	N/A	N/A	N/A	N/A
203	84630	Zinc	IP	69.29	N/A	N/A	N/A	N/A
204	84681	C-peptide	IP	112.78	N/A	N/A	N/A	N/A
205		Blood count; manual cell count (erythrocyte, leukocyte, or platelet) each	IP	100.00	N/A	N/A	N/A	N/A
206		Blood count: reticulocyte, manual	IP	166.11	N/A	N/A	N/A	N/A
207	85045	Blood count; reliculocyte, automated	IP	166.11	N/A	N/A	N/A	N/A
208	85048	Blood count; leukocyte (WBC), automated	IP	185.45	N/A	N/A	N/A	N/A
209	85378	Fibrin degradation products, D-dimer; qualitative or semiquantitative	IP	81.80	N/A	N/A	N/A	N/A
210	85520	Fibrinogen; activity	IP	88.08	N/A	N/A	N/A	N/A
211		Heparin assay	IP	214.47	N/A	N/A	N/A	N/A
212	86022	Sedimentation rate, erythrocyte; automated	IP	107.93	N/A	N/A	N/A	N/A
213		Antibody identification; platelet antibodies	IP	296.92	N/A	N/A	N/A	N/A
214		Antinuclear antibodies (ANA);	IP	66.17	N/A	N/A	N/A	N/A
215		Antinuclear antibodies (ANA); titer	IP	60.55	N/A	N/A	N/A	N/A
216	86140	C-reactive protein;	IP	144.11	N/A	N/A	N/A	N/A
217	86303	Hepatitis C antibody	IP	100.26	N/A	N/A	N/A	N/A
218	86316	Immunoassay for tumor antigen, other antigen, quantitative (eg, CA 50, 72-4, 549), each	IP	169.13	N/A	N/A	N/A	N/A
219		T cells; total count	IP	204.00	N/A	N/A	N/A	N/A
220	86360	T cells; absolute CD4 and CD8 count, including ratio	IP IP	254.09	N/A	N/A	N/A	N/A
221 222	86592	Rheumatoid factor; qualitative Syphilis test, non-treponemal antibody; qualitative (eg, VDRL, RPR, ART)	IP	73.48 107.93	N/A N/A	N/A N/A	N/A N/A	N/A N/A
223	86617	Syphilis test, non-treponemal antibody; quantitative	IP	107.93	N/A	N/A	N/A	N/A
224		Antibody; Borrelia burgdorferi (Lyme disease) confirmatory test (eg, Western Blot or immunoblot)	IP	434.85	N/A	N/A	N/A	N/A
225		Antibody; HIV-1 and HIV-2, single result	IP	342.49	N/A	N/A	N/A	N/A
226		Hepatitis B core antibody (HBcAb); IgM antibody	IP	106.86	N/A	N/A	N/A	N/A
227	86707	Hepatitis Be antibody (HBeAb)	IP	67.89	N/A	N/A	N/A	N/A
228	86713	Antibody: Legionella	IP	289.19	N/A	N/A	N/A	N/A
229	86769	Antibody: severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19])	IP	308.95	N/A	N/A	N/A	N/A
230		Antibody: varicella-zoster	IP	463.78	N/A	N/A	N/A	N/A
231	86804	Hepatitis C antibody; confirmatory test (eg, immunoblot)	IP	126.39	N/A	N/A	N/A	N/A
232	86850	HLA typing: A, B, or C, multiple antigens	IP	115.93	N/A	N/A	N/A	N/A
233		Antibody screen, RBC, each serum technique	IP	278.46	N/A	N/A	N/A	N/A
234		Antibody identification, RBC antibodies, each panel for each serum technique	IP	146.25	N/A	N/A	N/A	N/A
235		Antihuman globulin test (Coombs test); direct, each antiserum	IP	69.29	N/A	N/A	N/A	N/A
236	86900	Blood typing, serologic; ABO	IP	166.43	N/A	N/A	N/A	N/A
237	86901	Blood typing, serologic; Rh (D)	IP	88.08	N/A	N/A	N/A	N/A
238	86923	Compatibility test each unit; electronic	IP	185.87	N/A	N/A	N/A	N/A
239		Culture, bacterial; blood, aerobic, with isolation and presumptive identification of isolates (includes anaerobic culture, if appropriate)	IP	251.03	N/A	N/A	N/A	N/A
240 241		Culture, bacterial; stool, aerobic, with isolation and preliminary examination (e.g. KA, LIA), Salmonella and Shigella species Culture, bacterial; stool, aerobic, with isolation and preliminary examination (e.g. KA, LIA), Salmonella and Shigella species Culture, bacterial; any other source except urine, blood or stool, aerobic, with isolation and presumptive identification of isolates	IP IP	332.44 154.64	N/A N/A	N/A N/A	N/A N/A	N/A N/A
242	87081	Culture, presumptive, pathogenic organisms, screening only;	IP IP	112.45	N/A	N/A	N/A	N/A
243	87086	Culture, bacterial; quantitative colony count, urine	IP	161.98	N/A	N/A	N/A	N/A
244	87177	Ova and parasites, direct smears, concentration and identification		176.57	N/A	N/A	N/A	N/A
245	87324	Smear, primary source with interpretation; Gram or Giemsa stain for bacteria, fungi, or cell types	IP	121.19	N/A	N/A	N/A	N/A
246		Infectious agent antigen detection by immunoassay technique, qualitative or semiquantitative; Clostridium	IP	291.72	N/A	N/A	N/A	N/A
247		Infectious agent antigen detection by immunoassay technique, qualitative or semiquantitative; cryptosporidium	IP	122.43	N/A	N/A	N/A	N/A
248		Infectious agent antigen detection by immunoassay technique, qualitative or semiquantitative; hepatitis	IP	105.53	N/A	N/A	N/A	N/A
249 250		Infectious agent anigen detection by immunoassay lechnique, qualitative or semiquantitative, not otherwise s Infectious agent detection by innuncassay lechnique, qualitative or semiquantitative, not otherwise s Infectious agent detection by nucleic acid (DNA or RNA); HIV-1, quantification, includes reverse transcription when performed	IP IP	651.20 208.85	N/A N/A	N/A N/A	N/A N/A	N/A N/A
200	0,000	, a second sy the second s		230.03	N/A	IN/A	19/8	iwe.

Silver Lake Hospital Shoppable Services Filename: 272315799_SilverLakeHospital_ShoppableServices.csv Updated 1/10/2023, using 12/06/2022 CDM

Notes: Inpatient drarges are not separately billable and are included in the PER DIEM level rate. The PER DIEM ends are defined by MS-DRG system based on secondary diagnosis, codes include. 1. Non-CC: Non-Conciliation/Comothely, this level does not agringently affect severity of illess and resource use 2. CC: Complication/Comothely, the highest level of severity 3. MCC: Major Complication/Comothely, the highest level of severity Using the DRG severity levels there is an understanding of the patients being treated, the reasonable limits of the costs incurred and the services expected to be required.

Shoppable	N/A				Gross		Minimum Negotiated	Maximum	
	Indicator	Billing Code	Description	Location Provided	Charge	Commercial Insurances	Rate	Negotiated Rate	Discounted Cash Price
251		87635	Infectious agent detection by nucleic acid (DNA or RNA); severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)	IP	1713.66	N/A	N/A	N/A	N/A
252		87804	Infectious agent antigen detection by immunoassay with direct optical (ie, visual) observation; Influenza	IP	1623.70	N/A	N/A	N/A	N/A
253 254		87902 89055	Infectious agent genotype analysis by nucleic acid (DNA or RNA); Hepatitis C virus Leukocyte assessment, fecal, qualitative or semiquantitative	IP IP	225.58	N/A N/A	N/A N/A	N/A N/A	N/A N/A
254		90937	Hemodialysis procedure requiring repeated evaluation(s) with or without substantial revision of dialysis prescription	IP	7000.00	N/A	N/A	N/A	N/A
256		92506	Speech/hearing evaluation	IP	345.03	N/A	N/A	N/A	N/A
257		92507	Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	IP	157.87	N/A	N/A	N/A	N/A
258 259		92526 92610	Treatment of swallowing dysfunction and/or oral function for feeding	IP IP	187.94 335.83	N/A N/A	N/A N/A	N/A	N/A N/A
259		93005	Evaluation of oral and pharyngeal swallowing function Electrocardiogram, routine ECG with at least 12 leads; tracing only, without interpretation and report	IP	335.63	N/A N/A	N/A N/A	N/A N/A	N/A N/A
261		93225	External electrocardiographic recording up to 48 hours by continuous rhythm recording and storage; recording	IP	22.06	N/A	N/A	N/A	N/A
262		93306	Echocardiography, transthoracic, real-time with image documentation (2D) with spectral / color flow Doppler echocardiography	IP	2400.00	N/A	N/A	N/A	N/A
263		93307	Echocardiography, transthoracic, real-time with image documentation (2D) without spectral or color Doppler echocardiography	IP IP	2400.00	N/A	N/A	N/A	N/A
264 265		93922 93923	Limited bilateral noninvasive physiologic studies of upper or lower extremity arteries Complete bilateral noninvasive physiologic studies of upper or lower extremity arteries, 3 or more levels	IP	2400.00 2400.00	N/A N/A	N/A N/A	N/A N/A	N/A N/A
266		93970	Duplex scan of extremity veins including responses to compression and other maneuvers; complete bilateral study	IP	2400.00	N/A	N/A	N/A	N/A
267		93971	Duplex scan of extremity veins including responses to compression and other maneuvers; unilateral or limited study	IP	2400.00	N/A	N/A	N/A	N/A
268		94002	Ventilation management inpatient initial day	IP	9550.00	N/A	N/A	N/A	N/A
269 270		94003 94640	Ventilation management inpatient subsequent day Airway Inhalation Treatment	IP IP	9550.00 53.16	N/A N/A	N/A N/A	N/A N/A	N/A N/A
270		94664	Anway innalation Treatment Demonstration and/or evaluation of patient utilization of an aerosol generator, nebulizer, metered dose inhaler or IPPB device	IP	156.95	N/A	N/A N/A	N/A N/A	N/A N/A
272		94668	Manipulation chest wall, such as cupping, percussing, and vibration to facilitate lung function; subsequent	IP	23.03	N/A	N/A	N/A	N/A
273		94760	Noninvasive ear or pulse oximetry for oxygen saturation; single determination	IP	92.13	N/A	N/A	N/A	N/A
274		94799	Unlisted pulmonary service or procedure	IP	30.85	N/A	N/A	N/A	N/A
275		97001 97003	PT evaluation OT evaluation	IP IP	134.90 93.99	N/A N/A	N/A N/A	N/A N/A	N/A N/A
276 277		97003	Therapeutic procedure, 1 or more areas, each 15 minutes; neuromuscular reeducation	IP	93.99 88.53	N/A N/A	N/A N/A	N/A N/A	N/A N/A
278		97116	Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	IP	78.55	N/A	N/A	N/A	N/A
279		97124	Therapeutic procedure, 1 or more areas, each 15 minutes; massage	IP	56.06	N/A	N/A	N/A	N/A
280		97140	Manual therapy techniques (eg, mobilization/ manipulation, manual lymphatic drainage, manual traction), 1 or more regions, each 15 minutes	IP	1000.00	N/A	N/A	N/A	N/A
281 282		97530 97542	Therapeutic activities, direct (one-on-one) patient contact (use of dynamic activities to improve functional performance), each 15 minutes Wheelchair management (eg. assessment, fitting, training), each 15 minutes	IP IP	500.00 65.15	N/A N/A	N/A N/A	N/A N/A	N/A N/A
283		97760	Orthotic(s) management and training, upper extremity(ies), lower extremity(ies) and/or trunk, initial orthotic(s) encounter, each 15 minutes	IP	78.55	N/A	N/A	N/A	N/A
284		99601	Home infusion/specialty drug administration, per visit (up to 2 hours);	IP	106.39	N/A	N/A	N/A	N/A
285		C1300	Hyperbaric oxygen under pressure, full body chamber, per 30 minute interval	IP	29999.99	N/A	N/A	N/A	N/A
286		E2402	Negative pressure wound therapy electrical pump, stationary or portable	IP	140.00	N/A	N/A	N/A	N/A
287 288		P9047 Q0084	Infusion, albumin (human), 25%, 50 ml Chemotherapy administration by infusion technique only, per visit	IP IP	174.20 9999.90	N/A N/A	N/A N/A	N/A N/A	N/A N/A
289		90945	Chemotherapy administration by infusion technique only, per visit Dialysis procedure single evaluation	IP	7000.00	N/A	N/A N/A	N/A N/A	N/A N/A
290		36415	Collection of venous blood by venipuncture	IP	10.00	N/A	N/A	N/A	N/A
291		97167	Occupational therapy evaluation, high complexity	IP	200.00	N/A	N/A	N/A	N/A
292		36430	Transfusion, blood or blood components	IP	200.00	N/A	N/A	N/A	N/A
293 294		97163 92950	Physical therapy evaluation: high complexity Cardiopulmonary resuscitation (eq, in cardiac arrest)	IP IP	100.00 200.00	N/A N/A	N/A N/A	N/A N/A	N/A N/A
294		97161	Physical therapy evaluation: low complexity	IP	100.00	N/A	N/A	N/A	N/A N/A
296		97162	Physical therapy evaluation	IP	100.00	N/A	N/A	N/A	N/A
297		97166	Occupational therapy evaluation, moderate complexity	IP	100.00	N/A	N/A	N/A	N/A
298		95816	Electroencephalogram (EEG); including recording awake and drowsy	IP IP	100.00 400.00	N/A	N/A	N/A	N/A
299 300		92611 97165	Notion fluoroscopic evaluation of swallowing function by cine or video recording Occupational therapy evaluation, low complexity	IP	400.00	N/A N/A	N/A N/A	N/A N/A	N/A N/A
300		97597	Debridement, open wound	IP	100.00	N/A	N/A	N/A	N/A
302		93930	Duplex scan of upper extremity arteries or arterial bypass grafts; complete bilateral study	IP	2400.00	N/A	N/A	N/A	N/A
303		36556	Insertion of non-tunneled centrally inserted central venous catheter; age 5 years or older	IP	700.00	N/A	N/A	N/A	N/A
304 305		11042 G0463	Debridement, subcutaneous tissue; first 20 sq cm or less Hospital outpatient clinic visit for assessment and management of a patient	IP IP	800.00 50.00	N/A N/A	N/A N/A	N/A N/A	N/A N/A
305		77001	Fluoroscopic guidance for central venous access device placement, replacement, or removal	IP	2400.00	N/A	N/A	N/A	N/A N/A
307		76937	Ultrasound guidance for vascular access requiring ultrasound evaluation of potential access sites	IP	2400.00	N/A	N/A	N/A	N/A
308		73110	X-Ray Exam Complete Wrist	IP	2400.00	N/A	N/A	N/A	N/A
309		74022	X-Ray Exam Complete Abdomen	IP	2400.00	N/A	N/A	N/A	N/A
310 311		74230 76604	Radiologic examination, swallowing function, with cineradiography/videoradiography Ultrasound, chest (includes mediastinum), real time with image documentation	IP IP	2400.00 2400.00	N/A N/A	N/A N/A	N/A N/A	N/A N/A
312		75989	Abscess Drainage Under X-Ray	IP	2400.00	N/A	N/A	N/A	N/A
313		10120	Incision and removal of foreign body, subcutaneous tissues; simple	IP	400.00	N/A	N/A	N/A	N/A
314		11043	Debridement, muscle and/or fascia	IP	800.00	N/A	N/A	N/A	N/A
315 316		11044 29105	Debridement, bone	IP IP	2000.00	N/A N/A	N/A N/A	N/A N/A	N/A N/A
316		29105	Application of long arm splint (shoulder to hand) Application of short arm splint (forearm to hand); static	IP	100.00	N/A N/A	N/A N/A	N/A N/A	N/A N/A
318		29126	Application of short arm splint (forearm to hand); dynamic	IP	100.00	N/A	N/A	N/A	N/A
319		29130	Application of finger splint; static	IP	100.00	N/A	N/A	N/A	N/A
320 321		29131 29505	Application of finger splint; dynamic	IP IP	100.00 100.00	N/A N/A	N/A N/A	N/A N/A	N/A N/A
321		29505 36580	Application of long leg splint (thigh to ankle or toes) Replacement of central venous catheter	IP	2500.00	N/A N/A	N/A N/A	N/A N/A	N/A N/A
323		36589	Removal of tunneled central venous catheter, without subcutaneous port or pump	IP	2500.00	N/A	N/A	N/A	N/A
324		93320	Doppler echocardiography complete	IP	2400.00	N/A	N/A	N/A	N/A
325		93321	Doppler echocardiography limited	IP	2400.00	N/A	N/A	N/A	N/A
326 327		93325	Doppler echocardiography color flow velocity mapping	IP IP	2400.00	N/A N/A	N/A N/A	N/A N/A	N/A N/A
327		93975	Vascular complete study Vascular limited study	IP	2400.00	N/A N/A	N/A N/A	N/A N/A	N/A N/A
329		97012	Application of a modality to 1 or more areas; traction, mechanical	IP	100.00	N/A	N/A	N/A	N/A
330		97014	Application of a modality to 1 or more areas; electrical stimulation (unattended)	IP	150.00	N/A	N/A	N/A	N/A
331		97022	Application of a modality to 1 or more areas; whirlpool	IP	75.00	N/A	N/A	N/A	N/A
332 333		97032 97035	Application of a modality to 1 or more areas; electrical stimulation (manual), each 15 minutes Application of a modality to 1 or more areas; ultrasound, each 15 minutes	IP IP	50.00 75.00	N/A N/A	N/A N/A	N/A N/A	N/A N/A
333 334		97035 97150	Application of a modality to 1 or more areas; uttrasound, each 15 minutes Therapeutic procedure(s), group (2 or more individuals)	IP	75.00 50.00	N/A N/A	N/A N/A	N/A N/A	N/A N/A
335		97598	Debridement, open wound	IP	100.00	N/A	N/A	N/A	N/A
336		97761	Prosthetic(s) training, upper and/or lower extremity(ies), initial prosthetic(s) encounter, each 15 minutes	IP	100.00	N/A	N/A	N/A	N/A
337		A0426	Ambulance service, advanced life support, non-emergency transport, level 1	IP	2900.00	N/A	N/A	N/A	N/A
338 339		A0428 A0434	Ambulance service, basic life support, non-emergency transport Specially care transport (sct)	IP IP	2500.00 1000.00	N/A N/A	N/A N/A	N/A N/A	N/A N/A
539 PD1			Speciary care transport (sct) DIAGNOSIS WO CC/MCC	IP	1000.00 N/A	6000/Day	6000/Day	6000/Day	6000/Day
PD2		PER DIEM LEVEL 2	2 DIAGNOSIS W CC	IP	N/A	6250/Day	6250/Day	6250/Day	6250/Day
PD3		PER DIEM LEVEL 3	DIAGNOSIS W CC/MCC	IP	N/A	6500/Day	6500/Day	6500/Day	6500/Day