

ST. MICHAEL'S

Prices Posted and 12/15/2023

Disclaimer: Please note this is an ESTIMATE ONLY and NOT A FINAL BILL. If you proceed with the service at St. Michael's Elite Hospital, you may be given a new estimate with more accurate costs and out of pocket information. This notice is not a guarantee of the charges that may be billed. We cannot always determine the exact amount you may owe until the service is completed and charges for any procedures, tests, imaging services, supplies and medications are added to your account.

| Service Type | Service | CPT/HCP CS Code | Gross Charge | Cash Price | De-identified Minimum Negotiated Charge | De-identified Maximum Negotiated Charge |
|--------------|--|--------------------|--------------|-------------|---|---|
| Radiology | CT scan, abdomen and pelvis; with contrast | 74177 | \$ 7,451.76 | \$ 3,725.88 | n/a | n/a |
| Radiology | CT scan, abdomen and pelvis; without contrast | 74176 | \$ 8,937.11 | \$ 4,468.56 | n/a | n/a |
| Radiology | CT scan, abdomen and pelvis; before and after contrast | 74178 | \$ 7,998.11 | \$ 3,999.06 | n/a | n/a |
| Radiology | CT scan, abdomen; with contrast | 74160 | \$ 4,691.17 | \$ 2,345.59 | n/a | n/a |
| Radiology | CT scan, abdomen; without contrast | 74150 | \$ 1,716.90 | \$ 858.45 | n/a | n/a |
| Radiology | CT scan, abdomen; before and after contrast | 74170 | \$ 1,624.68 | \$ 812.34 | n/a | n/a |
| Radiology | CT scan, pelvis; with contrast | 72193 | \$ 1,396.59 | \$ 698.30 | n/a | n/a |
| Radiology | CT scan, pelvis; without contrast | 72192 | \$ 5,452.63 | \$ 2,726.32 | n/a | n/a |
| Radiology | CT scan, pelvis; before and after contrast | 72194 | \$ 3,032.88 | \$ 1,516.44 | n/a | n/a |
| Radiology | CT scan, cervical spine; with contrast | 72126 | \$ 2,966.41 | \$ 1,483.21 | n/a | n/a |
| Radiology | CT scan, cervical spine; without contrast | 72125 | \$ 1,142.51 | \$ 571.26 | n/a | n/a |
| Radiology | CT scan, cervical spine; before and after contrast | 72127 | \$ 1,642.81 | \$ 821.41 | n/a | n/a |
| Radiology | CT scan, thoracic spine; with contrast | 72129 | \$ 1,516.44 | \$ 758.22 | n/a | n/a |
| Radiology | CT scan, thoracic spine; without contrast | 72128 | \$ 9,476.85 | \$ 4,738.43 | n/a | n/a |
| Radiology | CT scan, thoracic spine; before and after contrast | 72130 | \$ 7,766.12 | \$ 3,883.06 | n/a | n/a |
| Radiology | CT scan, lumbar spine; with contrast | 72132 | \$ 2,966.41 | \$ 1,483.21 | n/a | n/a |
| Radiology | CT scan, lumbar spine; without contrast | 72131 | \$ 1,113.39 | \$ 556.70 | n/a | n/a |
| Radiology | CT scan, head or brain; with contrast | 70460 | \$ 1,516.44 | \$ 758.22 | n/a | n/a |
| Radiology | CT scan, head or brain; without contrast | 70450 | \$ 5,224.29 | \$ 2,612.15 | n/a | n/a |
| Radiology | CT scan, head or brain; before and after contrast | 70470 | \$ 1,188.40 | \$ 594.20 | n/a | n/a |
| Radiology | CT scan, lower extremity (hip or knee); with contrast | 73701 | \$ 1,396.59 | \$ 698.30 | n/a | n/a |
| Radiology | CT scan, lower extremity (hip or knee); without contrast | 73700 | \$ 3,984.38 | \$ 1,992.19 | n/a | n/a |
| Radiology | CT scan, lower extremity (hip or knee); before and after | 73702 | \$ 1,642.81 | \$ 821.41 | n/a | n/a |
| Radiology | CT scan, face/sinus; with contrast | 70487 | \$ 4,566.04 | \$ 2,283.02 | n/a | n/a |
| Radiology | CT scan, face/sinus; without contrast | 70486 | \$ 3,628.35 | \$ 1,814.18 | n/a | n/a |
| Radiology | CT scan, face/sinus; before and after contrast | 70488 | \$ 3,285.62 | \$ 1,642.81 | n/a | n/a |

| | | | | | | |
|-----------|--|-------|-------------|-------------|-----|-----|
| Radiology | CT scan, orbit or ear; with contrast | 70481 | \$ 3,789.13 | \$ 1,894.57 | n/a | n/a |
| Radiology | CT scan, orbit or ear; without contrast | 70480 | \$ 2,845.66 | \$ 1,422.83 | n/a | n/a |
| Radiology | CT scan, neck; with contrast | 70491 | \$ 4,860.38 | \$ 2,430.19 | n/a | n/a |
| Radiology | CT scan, neck; without contrast | 70490 | \$ 3,506.84 | \$ 1,753.42 | n/a | n/a |
| Radiology | CT scan, neck; before and after contrast | 70492 | \$ 3,032.88 | \$ 1,516.44 | n/a | n/a |
| Radiology | CT scan, upper extremity (elbow, shoulder, wrist); with | 73201 | \$ 1,516.44 | \$ 758.22 | n/a | n/a |
| Radiology | CT scan, upper extremity (elbow, shoulder, wrist); without | 73200 | \$ 4,566.91 | \$ 2,283.46 | n/a | n/a |
| Radiology | Echocardiogram | 76825 | \$ 2,920.14 | \$ 1,460.07 | n/a | n/a |
| Radiology | X-ray, abdomen; 1 view | 74018 | \$ 403.78 | \$ 201.89 | n/a | n/a |
| Radiology | X-ray, abdomen; 2 views | 74019 | \$ 1,337.60 | \$ 668.80 | n/a | n/a |
| Radiology | X-ray, abdomen; 3 or more views | 74021 | \$ 848.43 | \$ 424.22 | n/a | n/a |
| Radiology | X-ray, abdomen; complete | 74022 | \$ 1,052.05 | \$ 526.03 | n/a | n/a |
| Radiology | X-ray, ankle; 2 views | 73600 | \$ 1,022.99 | \$ 511.50 | n/a | n/a |
| Radiology | X-ray, ankle; complete, minimum of 3 views | 73610 | \$ 720.55 | \$ 360.28 | n/a | n/a |
| Radiology | X-ray, chest; 2 views | 71046 | \$ 783.48 | \$ 391.74 | n/a | n/a |
| Radiology | x-ray, chest; 4 or more views | 71048 | \$ 1,433.75 | \$ 716.88 | n/a | n/a |
| Radiology | X-ray; calcaneus, minimum of 2 views | 73650 | \$ 372.72 | \$ 186.36 | n/a | n/a |
| Radiology | X-ray, cervical spine; 2 or 3 views | 72040 | \$ 740.37 | \$ 370.19 | n/a | n/a |
| Radiology | X-ray, cervical spine; 4 or 5 views | 72050 | \$ 986.36 | \$ 493.18 | n/a | n/a |
| Radiology | X-ray, cervical spine; 6 or more views | 72052 | \$ 686.76 | \$ 343.38 | n/a | n/a |
| Radiology | X-ray; clavicle, complete | 73000 | \$ 836.30 | \$ 418.15 | n/a | n/a |
| Radiology | X-ray, elbow; 2 views | 73070 | \$ 1,044.85 | \$ 522.43 | n/a | n/a |
| Radiology | X-ray, elbow; complete, minimum of 3 views | 73080 | \$ 761.78 | \$ 380.89 | n/a | n/a |
| Radiology | X-ray, finger(s), minimum of 2 views | 73140 | \$ 598.71 | \$ 299.36 | n/a | n/a |
| Radiology | X-ray, foot; 2 views | 73620 | \$ 372.72 | \$ 186.36 | n/a | n/a |
| Radiology | X-ray, foot; complete, minimum of 3 views | 73630 | \$ 796.67 | \$ 398.34 | n/a | n/a |
| Radiology | X-ray; forearm, 2 views | 73090 | \$ 675.72 | \$ 337.86 | n/a | n/a |
| Radiology | X-ray, hand; 2 views | 73120 | \$ 627.38 | \$ 313.69 | n/a | n/a |
| Radiology | X-ray, hand; minimum of 3 views | 73130 | \$ 841.23 | \$ 420.62 | n/a | n/a |
| Radiology | X-ray, eye | 70030 | \$ 403.78 | \$ 201.89 | n/a | n/a |
| Radiology | X-ray, femur, 2 views | 73550 | \$ 213.84 | \$ 106.92 | n/a | n/a |
| Radiology | X-ray, femur; 1 view | 73551 | \$ 949.39 | \$ 474.70 | n/a | n/a |
| Radiology | X-ray, femur; 3 or more views | 73552 | \$ 1,099.64 | \$ 549.82 | n/a | n/a |
| Radiology | X-ray, hip, unilateral, with pelvis; 1 view | 73501 | \$ 477.33 | \$ 238.67 | n/a | n/a |

| | | | | | | |
|-----------|---|-------|-------------|-------------|-----|-----|
| Radiology | X-ray, hip, unilateral, with pelvis; 2-3 views | 73502 | \$ 733.97 | \$ 366.99 | n/a | n/a |
| Radiology | X-ray, hip, unilateral, with pelvis; minimum of 4 views | 73503 | \$ 743.99 | \$ 372.00 | n/a | n/a |
| Radiology | X-ray, hips, bilateral, with pelvis; 2 views | 73521 | \$ 1,310.59 | \$ 655.30 | n/a | n/a |
| Radiology | X-ray, hips, bilateral, with pelvis; minimum of 5 views | 73523 | \$ 743.99 | \$ 372.00 | n/a | n/a |
| Radiology | X-ray; humerus, minimum of 2 views | 73060 | \$ 744.99 | \$ 372.50 | n/a | n/a |
| Radiology | X-ray, knee; 1 or 2 views | 73560 | \$ 835.78 | \$ 417.89 | n/a | n/a |
| Radiology | X-ray, knee; 3 views | 73562 | \$ 1,216.83 | \$ 608.42 | n/a | n/a |
| Radiology | X-ray, knee; complete, 4 or more views | 73564 | \$ 955.26 | \$ 477.63 | n/a | n/a |
| Radiology | X-ray, spine, lumbosacral with bending | 72114 | \$ 743.99 | \$ 372.00 | n/a | n/a |
| Radiology | X-ray, pelvis; 1 or 2 views | 72170 | \$ 604.55 | \$ 302.28 | n/a | n/a |
| Radiology | X-ray, pelvis; complete, minimum of 3 views | 72190 | \$ 686.76 | \$ 343.38 | n/a | n/a |
| Radiology | X-ray, ribs, bilateral; 3 views | 71110 | \$ 686.76 | \$ 343.38 | n/a | n/a |
| Radiology | X-ray, ribs, bilateral; including posteroanterior chest, | 71111 | \$ 1,628.03 | \$ 814.02 | n/a | n/a |
| Radiology | X-ray, ribs, unilateral; 2 views | 71100 | \$ 744.99 | \$ 372.50 | n/a | n/a |
| Radiology | X-ray, ribs, unilateral; including posteroanterior chest, | 71101 | \$ 926.99 | \$ 463.50 | n/a | n/a |
| Radiology | X-ray, sacrum and coccyx, minimum of 2 views | 72220 | \$ 788.01 | \$ 394.01 | n/a | n/a |
| Radiology | X-ray, shoulder; 1 view | 73020 | \$ 372.72 | \$ 186.36 | n/a | n/a |
| Radiology | X-ray, shoulder; complete, minimum of 2 views | 73030 | \$ 818.58 | \$ 409.29 | n/a | n/a |
| Radiology | X-ray, sinuses, paranasal, complete, minimum of 3 views | 70220 | \$ 403.78 | \$ 201.89 | n/a | n/a |
| Radiology | X-ray, skull; complete, minimum of 4 views | 70260 | \$ 686.76 | \$ 343.38 | n/a | n/a |
| Radiology | X-ray, spine, lumbosacral; bending views only, 2 or 3 | 72120 | \$ 743.99 | \$ 372.00 | n/a | n/a |
| Radiology | X-ray, spine, single view | 72020 | \$ 372.72 | \$ 186.36 | n/a | n/a |
| Radiology | X-ray, spine; thoracic, 2 views | 72070 | \$ 868.97 | \$ 434.49 | n/a | n/a |
| Radiology | X-ray, spine; thoracic, 3 views | 72072 | \$ 1,031.04 | \$ 515.52 | n/a | n/a |
| Radiology | X-ray, spine; thoracic, minimum of 4 views | 72074 | \$ 798.07 | \$ 399.04 | n/a | n/a |
| Radiology | X-ray, wrist; 2 views | 73100 | \$ 897.24 | \$ 448.62 | n/a | n/a |
| Radiology | X-ray, wrist; complete, minimum of 3 views | 73110 | \$ 1,020.96 | \$ 510.48 | n/a | n/a |
| Radiology | X-ray; lower extremity, infant, minimum of 2 views | 73592 | \$ 696.07 | \$ 348.04 | n/a | n/a |
| Radiology | X-ray; neck, soft tissue | 70360 | \$ 547.19 | \$ 273.60 | n/a | n/a |
| Radiology | X-ray; scapula, complete | 73010 | \$ 1,131.66 | \$ 565.83 | n/a | n/a |
| Radiology | X-ray; sternum, minimum of 2 views | 71120 | \$ 403.78 | \$ 201.89 | n/a | n/a |
| Radiology | X-ray; tibia and fibula, 2 views | 73590 | \$ 830.17 | \$ 415.09 | n/a | n/a |
| Radiology | X-ray; toe(s), minimum of 2 views | 73660 | \$ 565.18 | \$ 282.59 | n/a | n/a |
| Radiology | Abdominal Ultrasound, Complete | 76700 | \$ 2,081.77 | \$ 1,040.89 | n/a | n/a |

| | | | | | | |
|-----------------------|--|----------|---------------------------|-------------|-----|-----|
| Radiology | Abdominal Ultrasound, Limited | 76705 | \$ 571.94 | \$ 285.97 | n/a | n/a |
| Radiology | Breast Ultrasound, Limited | 76642 | \$ 403.75 | \$ 201.88 | n/a | n/a |
| Radiology | Carotid Ultrasound | 93880 | \$ 1,393.86 | \$ 696.93 | n/a | n/a |
| Radiology | Ultrasound, soft tissues of head and neck (eg, thyroid, | 76536 | \$ 725.01 | \$ 362.51 | n/a | n/a |
| Radiology | Transvaginal Ultrasound of pelvis | 76830 | \$ 1,323.27 | \$ 661.64 | n/a | n/a |
| Radiology | Abdominal ultrasound of pregnant uterus (>14 weeks) | 76805 | \$ 2,244.41 | \$ 1,122.21 | n/a | n/a |
| Radiology | Abdominal ultrasound of pregnant uterus (<14 weeks), | 76801 | \$ 2,244.41 | \$ 1,122.21 | n/a | n/a |
| Radiology | Abdominal ultrasound of pregnant uterus (eg, fetal heart | 76815 | \$ 686.76 | \$ 343.38 | n/a | n/a |
| Radiology | Ultrasound of pregnant uterus through vagina | 76817 | \$ 1,949.03 | \$ 974.52 | n/a | n/a |
| Radiology | MRI scan of brain before and after contrast | 70553 | Hospital does not provide | n/a | n/a | n/a |
| Radiology | MRI scan of lower spinal canal | 72148 | Hospital does not provide | n/a | n/a | n/a |
| Radiology | MRI scan of leg joint | 73721 | Hospital does not provide | n/a | n/a | n/a |
| Radiology | Mammography of one breast | 77065 | Hospital does not provide | n/a | n/a | n/a |
| Radiology | Mammography of both breast | 77066 | Hospital does not provide | n/a | n/a | n/a |
| Radiology | Mammography, screening, bilateral | 77067 | Hospital does not provide | n/a | n/a | n/a |
| Laboratory & | Basic metabolic panel | 80048 | \$ 383.05 | \$ 191.53 | n/a | n/a |
| Laboratory & | Blood test, comprehensive group of blood chemicals | 80053 | \$ 713.28 | \$ 356.64 | n/a | n/a |
| Laboratory & | Obstetric blood test panel | 80055 | Hospital does not provide | n/a | n/a | n/a |
| Laboratory & | Blood test, lipids (cholesterol and triglycerides) | 80061 | \$ 363.54 | \$ 181.77 | n/a | n/a |
| Laboratory & | Kidney function panel test | 80069 | Hospital does not provide | n/a | n/a | n/a |
| Laboratory & | Liver function blood test panel | 80076 | \$ 403.39 | \$ 201.70 | n/a | n/a |
| Laboratory & | Manual urinalysis test with examination using microscope | 81000 or | Hospital does not provide | n/a | n/a | n/a |
| Laboratory & | Automated urinalysis test | 81002 or | \$ 182.39 | \$ 91.20 | n/a | n/a |
| Laboratory & | PSA (prostate specific antigen) | 84153- | Hospital does not provide | n/a | n/a | n/a |
| Laboratory & | Blood test, thyroid stimulating hormone (TSH) | 84443 | \$ 373.10 | \$ 186.55 | n/a | n/a |
| Laboratory & | Complete blood cell count, with differential white blood | 85025 | Hospital does not provide | n/a | n/a | n/a |
| Laboratory & | Complete blood count, automated | 85027 | Hospital does not provide | n/a | n/a | n/a |
| Laboratory & | Blood test, clotting time | 85610 | \$ 225.00 | \$ 112.50 | n/a | n/a |
| Laboratory & | Coagulation assessment blood test | 85730 | Hospital does not provide | n/a | n/a | n/a |
| Medicine & Surgery | Cardiac valve and other major cardiothoracic procedures | 216 | Hospital does not provide | n/a | n/a | n/a |
| Medicine & | Spinal fusion except cervical without major comorbid | 460 | Hospital does not provide | n/a | n/a | n/a |
| Medicine & | Major joint replacement or reattachment of lower | 470 | Hospital does not provide | n/a | n/a | n/a |
| Medicine & | Cervical spinal fusion without comorbid conditions (CC) or | 473 | Hospital does not provide | n/a | n/a | n/a |
| Medicine & Surgery | Uterine and adnexa procedures for non-malignancy | 743 | Hospital does not provide | n/a | n/a | n/a |

| | | | | | | |
|-----------------------|--|--------|---------------------------|-----|-----|-----|
| Medicine & | Removal of 1 or more breast growth, open procedure | 19120 | Hospital does not provide | n/a | n/a | n/a |
| Medicine & | Shaving of shoulder bone using an endoscope | 29826 | Hospital does not provide | n/a | n/a | n/a |
| Medicine & | Removal one knee cartilage using an endoscope | 29881 | Hospital does not provide | n/a | n/a | n/a |
| Medicine & | Removal of tonsils and edeniod glands patient younger | 42820 | Hospital does not provide | n/a | n/a | n/a |
| Medicine & Surgery | Diagnostic examination of esophagus, stomach, and/or upper small bowel using an endoscope | 43235 | Hospital does not provide | n/a | n/a | n/a |
| Medicine & | Biopsy of the esophagus, stomach, and/or upper small | 43239 | Hospital does not provide | n/a | n/a | n/a |
| Medicine & | Diagnostic examination of large bowel using an | 45378 | Hospital does not provide | n/a | n/a | n/a |
| Medicine & | Biopsy of large bowel using an endoscope | 45380 | Hospital does not provide | n/a | n/a | n/a |
| Medicine & | Removal of polyps or growths of large bowel using an | 45385 | Hospital does not provide | n/a | n/a | n/a |
| Medicine & | Ultrasound examinatRemoval of gallbladder using an | 45391 | Hospital does not provide | n/a | n/a | n/a |
| Medicine & | Removal of gallbladder using an endoscope | 47562 | Hospital does not provide | n/a | n/a | n/a |
| Medicine & | Repair of groin hernia patient age 5 years or older | 49505 | Hospital does not provide | n/a | n/a | n/a |
| Medicine & | Biopsy of prostate gland | 55700 | Hospital does not provide | n/a | n/a | n/a |
| Medicine & | Surgical removal of prostate and surrounding lymph | 55866 | Hospital does not provide | n/a | n/a | n/a |
| Medicine & | Routine obstetric care for vaginal delivery, including pre- | 59400 | Hospital does not provide | n/a | n/a | n/a |
| Medicine & | Routine obstetric care for cesarean delivery, including pre- | 59510 | Hospital does not provide | n/a | n/a | n/a |
| Medicine & Surgery | Routine obstetric care for vaginal delivery after prior | 59610 | Hospital does not provide | n/a | n/a | n/a |
| Medicine & | Injection of substance into spinal canal of lower back or | 62322- | Hospital does not provide | n/a | n/a | n/a |
| Medicine & | Injections of anesthetic and/or steroid drug into lower or | 64483 | Hospital does not provide | n/a | n/a | n/a |
| Medicine & | Removal of recurring cataract in lens capsule using laser | 66821 | Hospital does not provide | n/a | n/a | n/a |
| Medicine & | Removal of cataract with insertion of lens | 66984 | Hospital does not provide | n/a | n/a | n/a |
| Medicine & | Electrocardiogram, routine, with interperatation and report | 93000 | Hospital does not provide | n/a | n/a | n/a |
| Medicine & | Insertion of catheter into left heart for diagnosis | 93452 | Hospital does not provide | n/a | n/a | n/a |
| Medicine & | Sleep Study | 95810 | Hospital does not provide | n/a | n/a | n/a |
| Medicine & | Physical therapy, therapeutic exercise | 97110 | Hospital does not provide | n/a | n/a | n/a |
| Evaluation & | Psychotherapy, 30 min | 90832 | Hospital does not provide | n/a | n/a | n/a |
| Evaluation & | Psychotherapy, 45 min | 90834 | Hospital does not provide | n/a | n/a | n/a |
| Evaluation & | Psychotherapy, 60 min | 90837 | Hospital does not provide | n/a | n/a | n/a |
| Evaluation & | Family psychotherapy, not including patient, 50 min | 90846 | Hospital does not provide | n/a | n/a | n/a |
| Evaluation & | Family psychotherapy, including patient, 50 min | 90847 | Hospital does not provide | n/a | n/a | n/a |
| Evaluation & | Group psychtherapy | 90853 | Hospital does not provide | n/a | n/a | n/a |
| Evaluation & | New patient office or other outpatient visits, typically 30 | 99203 | Hospital does not provide | n/a | n/a | n/a |
| Evaluation & | New patient office or other outpatient visits, typically 45 | 99204 | Hospital does not provide | n/a | n/a | n/a |
| Evaluation & | New patient office or other outpatient visits, typically 60 | 99205 | Hospital does not provide | n/a | n/a | n/a |

| | | | | | | |
|--------------|---|-------|---------------------------|-----|-----|-----|
| Evaluation & | Patient office consultation, typically 40 min | 99243 | Hospital does not provide | n/a | n/a | n/a |
| Evaluation & | Patient office consultation, typically 60 min | 99244 | Hospital does not provide | n/a | n/a | n/a |
| Evaluation & | Initial new patient preventative medicine evaluation (18- | 99385 | Hospital does not provide | n/a | n/a | n/a |
| Evaluation & | Initial new patient preventative medicine evaluation (40- | 99386 | Hospital does not provide | n/a | n/a | n/a |