CMS Mandated 70 shoppable services

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							Anthem/B	1		1	
							CBS Blue				
						Anthem/B		Anthem/B		Minimum	Maximim
					Discounted	CBS Blue	and	CBS	UHC Commercial	Negotiated	Negotiated
D	Description	СРТ	HCPCS	Gross Charges	Cash Price	Access	Pathway	Traditonal	Plans	Charge	Charge
90832 F	Psychotherapy, 30 minutes (90832)	90832		120	60	65	65	65	59.6	59.6	65
2	2. Psychotherapy, 45 minutes (90834)										
90834	2. P sychotherapy, 45 minutes (90054)	90834		132	66	98	98	98	77.11	77.11	98
3	3. Psychotherapy, 60 minutes (90837)										
90837	5. T sychotherapy; 66 minutes (56657)	#N/A				148	148	148	112.99	112.99	148
1	4. Family psychotherapy, not										
	ncluding patient, 50 minutes (90846)										
90846	61 <i>, (,)</i>	#N/A				94.94	94.94	139	78.3	78.3	139
	5. Family psychotherapy, including										
	patient, 50 min (90847)	90847		166	83	112	112	158	97.36	97.36	158
	6. Group psychotherapy (90853)	#N/A									
	7. New patient office or other										
	outpatient visit, typically 30 min										
	(99203)	99203		150	75	90.24	86.29	92	89.52	86.29	92
	8. New patient office of other										
	outpatient visit, typically 45 min (99204)	00204		105	92.5	120.40	122.20	100	107.00	122.20	120.40
	9. New patient office of other	99204		185	92.5	139.49	133.39	136	137.06	133.39	139.49
	outpatient visit, typically 60 min										
	(99205)	99205		260	130	173.96	166.36	171	170.28	166.36	173.96
	10. Patient office consultation,	99203		200	150	175.50	100.50	1/1	170.28	100.50	173.50
	typically 40 min (99243)	99243		277	138.5	90.24	86.29	128	102.31	86.29	128
	11. Patient office consultation,	55215		277	100.0	50.21	00.25	120	102.01	00.25	120
	typically 60 min (99244)	99244		334	167	139.49	133.39	180	151.26	133.39	180
	12. Initial new patient preventive										
	medicine evaluation, for those ages										
	· · · · · · · · · · · · · · · · · · ·	N/A				96.39	92.17	139	117.01	92.17	139
	13. Initial new patient preventive										
n	medicine evaluation, for those ages										
99386 4	40 to 64 (99386)	99386		150	75	121.44	107.52	170	135.75	107.52	170
80048 1	14. Basic metabolic panel (80048)	80048		174	174	104.4	173.3	154.86	48	48	173.3
	15. Blood test, comprehensive group										
80053 O	of blood chemicals (80053)	80053		202	202	121.2	201.3	179.78	48	48	201.3
1	16. Obstetric blood test panel (80055)										
80055	,	N/A									
80061 1	17. Blood test, lipids (80061)	80061		111	111	66.6	110.3	98.79	48	48	110.3
1	18. Kidney function panel test (80069)										
80069		80069		189	189	113.4	188.3	168.21	48	48	188.3
	19. Liver function blood test panel										
	(80076) 20. Manual urinalysis test with	80076		143	143	85.8	142.3	127.27	48	48	142.3
81000 or 8 0	examination using microscope (81000	01001				25.4	F0.2	53.54		25.4	
	21. Automated urinalysis test (81002	81001		59	59	35.4	58.3	52.51	48	35.4	58.3
81002 or 8 0		81003		41	41	24.6	40.3	36.49	48	24.6	48
	22. Prostate specific antigen (84153	31003		41	41	24.0	40.5	30.49	40	24.0	40
84153 or 8 0		84153		113	113	67.8	112.3	100.57	48	48	112.3
	23. Blood test, thyroid stimulating	2.100				07.0				10	
	hormone (84443)	84443		109	109	65.4	108.3	97.01	48	48	108.3
	24. Complete blood cell count, with										
	differential white blood cells,										
	automated (85025)	85025		87	87	52.2	86.3	77.43	48	48	86.3
	25. Complete blood count, automated										
	(85027)	85027		50		30	49.3	44.5	48	30	49.3
	26. Blood test, clotting time (85610)	85610		49	49	29.4	48.3	43.61	48	29.4	48.3
	27. Coagulation assessment blood										
	test (85730)	85730		59	59	35.4	58.3	52.51	48	35.4	58.3
	28. CT scan, head or brain, without										
	contrast (70450)	70450		1005	1005	603	703.5	894.45	391	391	1005
	29. MRI scan of brain before and									_	
	after contrast (70553)	70553		2851	2851	1710.6	817	2537.39	737	737	2851
	30. X-Ray, lower back, minimum four										
72110 V	views (72110)	72110		310	310	186	217	275.9	382	186	382

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	of this estimate. Benefits a			t to change and	are not a gua	Tance of pa	Tyment. ried			1	r – – – – – – – – – – – – – – – – – – –
						Anthem/B	Anthem/B CBS Blue Prefered	Anthem/B		Minimum	Maximim
	Description	СРТ	HCPCS	Gross Charges	Discounted Cash Price	CBS Blue Access	and Pathway	CBS Traditonal	UHC Commercial Plans	Negotiated Charge	Negotiated Charge
72148	31. MRI scan of lower spinal canal (72148)	72148		2287	2287	1372.2	817	2035.43	737	737	2287
	32. CT scan, pelvis, with contrast										
	(72193) 33. MRI scan of leg joint (73721)	72193 73721		1097 1830	1097 1830	658.2 1098	767.9 817	976.33 1628.7	391 737	391 737	1097 1830
73721	34. CT scan of abdomen and pelvis	/3/21		1030	1830	1058	017	1020.7	137	/3/	1050
	with contrast (74177)	74177		2194	2194	1316.4	1535.8		391	391	2194
76700	35. Ultrasound of abdomen (76700)	76700		695	695	417	486.5	618.55	300	300	695
76805	36. Abdominal ultrasound of pregnant uterus, greater or equal to 14 weeks 0 days, single or first fetus (76805)	76805		664	664	398.4	464.8	590.96	300	300	664
	37. Ultrasound pelvis through vagina										
76830	(76830)	76830		598	598	358.8	418.6	532.22	300	300	598
77065	38. Mammography of one breast (77065)	77065		330	330	150	175	222.5	165	150	250
77066	39. Mammography of both breasts (77066)	77066		415	415	201	234.5	298.15	165	165	335
	40. Mammography, screening,			125	125		20110	250.25	100	105	
77067	bilateral (77067)	77067		365	365	171	199.5	253.65	165	165	285
	41. Cardiac valve and other major cardiothoracic procedures with cardiac catheterization with major complications or comorbidities (216)	N/A									
	42. Spinal fusion except cervical without major comorbid conditions or complications (460)	N/A									
	43. Major joint replacement or reattachment of lower extremity without major comorbid conditions or complications (470)	N/A									
	44. Cervical spinal fusion without comorbid conditions or major comorbid conditions or complications (473)										
		N/A									
	45. Uterine and adnexa procedures for non-malignancy without comorbid conditions or major comorbid conditions or complications (743)	N/A									
	46. Removal of 1 or more breast										
19120	growth, open procedure (19120) 47. Shaving of shoulder bone using	N/A									
29826	an endoscope (29826)	N/A									
	48. Removal of one knee cartilage using an endoscope (29881)	N/A									
	49. Removal of tonsils and adenoid glands patient younger than age 12										
42820	(42820)	N/A									
	50. Diagnostic examination of esophagus, stomach, and/or upper										
43235	small bowel using an endoscope (43235)	43235		3190.5	3190.5	1639	1639	1639	1639	1639	2639
	51. Biopsy of the esophagus,										
42220	stomach, and/or upper small bowel using an endoscope (43239)	43239		3190.5	3190.5	1639	1639	1639	1000	1620	2620
43239	52. Diagnostic examination of large	43239		3130.2	3130.2	1039	1039	1039	1639	1639	2639
45378	bowel using an endoscope (45378) 53. Biopsy of large bowel using an	45378		3564.25	3564.25	1639	1639	1639	1639	1639	2639
45380	endoscope (45380)	N/A									

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					Discounted	Anthem/B CBS Blue	Anthem/B CBS Blue Prefered and	Anthem/B CBS	UHC Commercial	Minimum Negotiated	Maximim Negotiated
	Description	CPT	HCPCS	Gross Charges	Cash Price	Access	Pathway	Traditonal	Plans	Charge	Charge
	54. Removal of polyps or growths of										
	large bowel using an endoscope										
	(45385)	N/A									
	55. Ultrasound examination of lower	,									
	large bowel using an endoscope										
	(45391)	N/A									
	56. Removal of gallbladder using an	11/7									
	endoscope (47562)	N/A									
	57. Repair of groin hernia patient age	N/A									
49505	5 or older (49505)	N/A									
55700	58. Biopsy of prostate gland (55700)	N/A									
	59. Surgical removal of prostate and										
	surrounding lymph nodes using an										
	endoscope (55866)	N/A									
	60. Routine obstetric care for vaginal	N/A									
	delivery, including pre-and post-										
	delivery care (59400)	N/A									
	61. Routine obstetric care for										
	cesarean delivery, including pre-and										
	post-delivery care (59510)	N/A									
	62. Routine obstetric care for vaginal										
	delivery after prior cesarean delivery										
	including pre-and post-delivery care										
59610	(59610)	N/A									
	63. Injection of substance into spinal										
	canal of lower back or sacrum using										
	imaging guidance (62322 or 62323)					Case Rate	Case Rate	Case Rate			
62322 or 6	, , ,	64493		3793	3793	1314.14	1086.79	2098.13	Case Rate 1367.00	1086.79	2098.13
	64. Injections of anesthetic and/or										
	steroid drug into lower or sacral spine										
	nerve root using imaging guidance					Case Rate	Case Rate	Case Rate			
64483	(64483)	64495		3793	3793	1314.14	1086.79	2098.13	Case Rate 1367.00	1086.79	2098.13
	65. Removal of recurring cataract in										
	lens capsule using laser (66821)					Case Rate	Case Rate	Case Rate			
66821	ichs capsule using laser (00021)	66821		2557	2557	1314.14	1086.79	2098.13	Case Rate 1367.00	1086.79	2098.13
	66. Removal of cataract with insertion										
	of lens (66984)					Case Rate	Case Rate	Case Rate			
66984	()	66984		9200	9200	1314.14	1086.79	2098.13	Case Rate 1694.00	1086.79	2098.13
	67. Electrocardiogram, routine, with										
	interpretation and report (93000)	93005		185	185	129.5	129.5	164.65	165	129.5	165
	68. Insertion of catheter into left heart										
	for diagnosis (93452)	NA									
	69. Sleep study (95810)	NA									
	70. Physical therapy, therapeutic					Per Vist	Per Visit	Per Visit			
97110	exercise (97110)	97110		102	102	111.13	97.87	111.13	Per Visit 218.00	97.87	218