

Per Federal requirements, the prices posted herein contain the estimated allowable amounts under particular payer plans, and do not reflect the projected amount due from the patient.

Shoppable Service	Service Location	Primary and Ancillary Charges	CPT/ HCPCS Code	Self-Pay Discount Paid prior to service	Minimum Third Party Negotiated Charge	Maximum Third Party Negotiated Charge	Anthem Blue Traditional	Anthem Blue Access	Anthem Blue Access Ohio	Anthem Pathway & Pathway X PPO Tiered Hospital Network	Blue Preferred Primary Plus	Anthem Pathway & Pathway X HMO Tiered Hospital Network	Anthem Pathway Group HMO	Anthem Medicare Advantage	Aetna	Cigna	Medical Mutual Medicare Advantage	Medical Mutual of Ohio	UHC	
Electrocardiogram (EKG) with interpretation & report	Hospital Outpatient	Primary procedure	93000	\$ 102.00	\$ 148.51	\$ 186.46	\$ 186.46	\$ 160.14	\$ 160.14	\$ 160.14	\$ 160.14	\$ 160.14	\$ 160.14	\$ 160.14	\$ 161.16	\$ 183.60		\$ 171.36	\$ 148.51	
Stress test (Lexiscan)	Hospital Outpatient	Primary procedure	93017	\$ 425.00	\$ 253.10	\$ 776.90	\$ 776.90	\$ 667.25	\$ 667.25	\$ 667.25	\$ 667.25	\$ 667.25	\$ 667.25	\$ 667.25	\$ 253.10	\$ 671.50	\$ 765.00	\$ 253.10	\$ 714.00	\$ 618.80
TC-99m per study dose (radiopharmaceutical)	Hospital outpatient	Ancillary charge	Q9969	\$ 272.50	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
2D Echocardiogram with contrast	Hospital Outpatient	Primary procedure	93306	\$ 1,511.50	\$ 481.58	\$ 2,761.02	\$ 2,761.02	\$ 2,373.06	\$ 2,373.06	\$ 2,373.06	\$ 2,373.06	\$ 2,373.06	\$ 2,373.06	\$ 2,373.06	\$ 481.58	\$ 2,388.17	\$ 2,720.70	\$ 481.58	\$ 2,539.32	\$ 2,200.74
Angiography with left heart cath	Hospital Outpatient	Primary procedure	93458	\$ 9,884.00	\$ 2,849.95	\$ 17,855.10	\$ 17,688.64	\$ 15,573.62	\$ 15,573.62	\$ 15,573.62	\$ 15,573.62	\$ 15,573.62	\$ 2,849.95	\$ 15,672.81	\$ 17,855.10	\$ 2,849.95	\$ 2,849.95	\$ 2,849.95	\$ 2,849.95	\$ 7,586.00
Laboratory services	Hospital outpatient	Ancillary charge	n/a	\$ 198.00	\$ 6.47	\$ 376.20	\$ 19.05	\$ 19.05	\$ 19.05	\$ 19.05	\$ 19.05	\$ 19.05	\$ 19.05	\$ 6.47	\$ 101.10	\$ 376.20	\$ 6.47	\$ 6.47	\$ 82.16	
	Hospital outpatient	Medication	n/a	\$ 182.00	\$ -	\$ 199.50	\$ -	\$ 121.68	\$ 121.68	\$ 121.68	\$ 121.68	\$ 121.68	\$ -	\$ 121.68	\$ -	\$ 121.68	\$ 139.50	\$ -	\$ 121.68	\$ -
	Hospital outpatient	Supplies	n/a	\$ 294.61	\$ -	\$ 843.30	\$ -	\$ 735.55	\$ 735.55	\$ 735.55	\$ 735.55	\$ -	\$ 740.21	\$ 843.30	\$ -	\$ 824.24	\$ -	\$ 824.24	\$ 82.16	
Duplex scan of extracranial arteries, complete bilateral	Hospital Outpatient	Primary procedure	93880	\$ 742.50	\$ 233.04	\$ 1,357.29	\$ 1,357.29	\$ 1,165.73	\$ 1,165.73	\$ 1,165.73	\$ 1,165.73	\$ 1,165.73	\$ 1,165.73	\$ 233.04	\$ 1,173.15	\$ 1,336.50	\$ 233.04	\$ 1,247.40	\$ 1,081.08	
Ankle/brachial indices bilateral	Hospital Outpatient	Primary procedure	93922	\$ 289.50	\$ 109.03	\$ 529.21	\$ 529.21	\$ 454.52	\$ 454.52	\$ 454.52	\$ 454.52	\$ 454.52	\$ 109.03	\$ 457.41	\$ 521.10	\$ 109.03	\$ 486.36	\$ 421.51		
Noninvasive physiologic study lower extremity	Hospital Outpatient	Primary procedure	93924	\$ 222.00	\$ 138.35	\$ 405.82	\$ 405.82	\$ 348.54	\$ 348.54	\$ 348.54	\$ 348.54	\$ 348.54	\$ 138.35	\$ 350.76	\$ 399.60	\$ 138.35	\$ 372.96	\$ 323.23		
Duplex scan lower extremity arteries, complete bilateral	Hospital Outpatient	Primary procedure	93925	\$ 597.50	\$ 233.04	\$ 1,092.23	\$ 1,092.23	\$ 938.08	\$ 938.08	\$ 938.08	\$ 938.08	\$ 938.08	\$ 233.04	\$ 944.05	\$ 1,075.50	\$ 233.04	\$ 1,003.80	\$ 869.96		
Duplex scan arterial inflow/venous outflow abdominal complete study	Hospital Outpatient	Primary procedure	93975	\$ 557.50	\$ 233.04	\$ 1,019.11	\$ 1,019.11	\$ 875.28	\$ 875.28	\$ 875.28	\$ 875.28	\$ 875.28	\$ 233.04	\$ 880.85	\$ 1,003.50	\$ 233.04	\$ 936.60	\$ 811.72		
Left heart catheterization			93462	Hospital does not perform this service																