

Sedgwick County Health Center  
Price Transparency Effective January 1, 2022

The healthcare price for any given service is an estimate and the actual charges for healthcare services are dependent on the circumstances at the time the service is rendered.

If you are covered by health insurance, you are strongly encouraged to consult with your health insurer to determine accurate information about your financial responsibility for a particular healthcare service provided by a healthcare provider at this facility. If you are not covered by health insurance, you are strongly encouraged to contact one of our billing office personnel at (970) 474-3323 to discuss payment options. The healthcare prices listed may not reflect the actual amount of your financial responsibility.

In an effort to help our patients understand their healthcare options and cost of care, we are providing pricing for our Emergency Room and the most common inpatient and outpatient charges. The prices listed below do NOT include any additional services, including physician charges, pharmacy, lab or radiology, rendered while in our Emergency Room.

ER Level I	\$275
ER Level II	\$413
ER Level III	\$639
ER Level IV	\$1,575
ER Level V	\$2,781

Listed below are the top 50 outpatient services performed at Sedgwick County Hospital.

	Outpatient Services	CPT Code	Cost
1	OXYGEN PER HOUR	E0446	\$35.50
2	ANESTHESIA SCOPE PRO FEE (minute)	00813	\$13.50
3	THERAPEUTIC EX PROCEDURE	97110	\$134.50
4	BLOOD COLLECTION	36415	\$21.50
5	MANUAL THERAPY 15 MIN	97140	\$134.50
6	CBC	85025	\$77.00
7	COMPREHENSIVE METABOLIC PANEL (14)	80053	\$203.00
8	OUTPATIENT OBS EACH ADDITIONAL HOU	99218	\$53.00
9	ER LEVEL 4 ADD 1/2 HOUR	99284	\$275.50
10	COVID-19 ANTIGEN BY FIA	87426	\$82.50
11	TSH	84443	\$188.50
12	IV THERAPY	96365	\$148.50
13	C-REACTIVE PROTEIN QUANT	86140	\$114.00
14	OUTPATIENT OBS W/TELEMTRY EACH HOU	99218	\$68.00
15	EPIDURAL MANAGEMENT PER MIN PRO FE	01996	\$13.50
16	ANESTHESIA HERNIA REPAIR PRO FEE	00830	\$13.50
17	GAIT TRAINING 15 MIN	97116	\$98.00

18	NT-PRO BNP	83880	\$174.00
19	HEMOGLOBIN A1C	83036	\$114.00
20	COVID-19 COLLECTION	C9803	\$37.50
21	INJECTION, IV	96374	\$63.00
22	THERAPEUTIC ACTIVITY	97530	\$140.50
23	UA DIPSTICK	81002	\$51.50
24	LIPID PANEL W/DIRECT LDL	80061	\$202.00
25	DUO-NEB IPRATROPIUM-ALBUT	J7620	\$7.00
26	BASIC METABOLIC PANEL (CHEM 7)	80048	\$158.00
27	EKG TRACING ONLY	93005	\$225.00
28	EKG INTERPRETATION ONLY	93010	\$47.50
29	FREE T4	84439	\$92.00
30	GROUP PSYCHOTHERAPY	90853	\$309.00
31	ER LEVEL 3	99283	\$639.50
32	E-STIM UNATTENDED MC	G0283	\$87.00
33	ANESTHESIA GENERAL PRO FEE (minute)	00790	\$13.50
34	ANESTHESIA C-CECTION ONLY (minute)	01961	\$13.50
35	MAGNESIUM	83735	\$98.00
36	ANESTHESIA NERVE/WRIST/HAND/TENDON	01810	\$13.50
37	TROPONIN I	84484	\$193.00
38	THERAPEUTIC PROCEDURE	97110	\$36.50
39	ACCU CHECK	82948	\$20.50
40	SELF CARE	97535	\$140.50
41	FREE T 3	84481	\$164.50
42	US TREATMENT 15 MIN	97035	\$98.00
43	LABOR EPIDURAL	01967	\$13.50
44	URINE MICROSCOPIC	81015	\$35.50
45	EVAULATION MOD COMPX	97162	\$273.50
46	THERAPEUTIC ACTIVITIES 15 MIN	97530	\$146.50
47	CHEST, PA & LATERAL	71046	\$261.00
48	SEDRATE	85651	\$85.50
49	D-DIMER	85379	\$194.00
50	E-STIM UNATTENDED 15 MIN	97014	\$87.00

Listed below are the top inpatient diagnosis codes for our facility where we had 11 or more patients with the same diagnosis in 2021.

<u>Diagnosis Code</u>	<u>Description</u>	<u>Estimated Cost</u>
J189	Pneumonia, unspecified	\$17,873
I509	Heart Failure, unspecified	\$15,115