

**Vail Health Hospital**  
**Discharge Fiscal Year = FY 2017**  
**Patient Type = Outpatient**

<b>CPT - DESCRIPTION</b>	<b>SELF-PAY RATE</b>
36415 - COLLECTION OF BLOOD SAMPLE	\$ 43.30
85025 - BLOOD COUNT COMPLETE WHITE CELL COUNT	\$ 128.23
97110 - THERAPEUTIC EACH 15 MIN EXERCISES	\$ 83.31
99283 - EMERGENCY DEPARTMENT VISIT MODERATE	\$ 744.11
97140 - MANUAL THERAPY GREATER THAN 1 REGION EACH 15 MINUTES	\$ 74.28
80053 - BLOOD TEST COMPREHENSIVE METABOLIC PANEL	\$ 213.33
97161 - PHYSICAL THERAPY EVALUATION LOW COMPLEX 20 MINS	\$ 187.81
99284 - EMERGENCY DEPARTMENT VISIT HIGH-URGENT SEVERITY	\$ 1,099.89
J2405 - ZOFRA ANTI NAUSEA INJECTION	\$ 51.89
80048 - BASIC METABOLIC PANEL CALCIUM TOTAL	\$ 190.71
77067 - SCREENING MAMMOGRAPHY WITH TOMOSYNTHESIS	\$ 592.50
84443 - THYROID STIMULATING HORMONE TEST	\$ 83.67
99285 - EMERGENCY DEPT VISIT HIGH SEVERITY AND THREAT	\$ 2,333.44
97016 - APPL MODALITY 1-GREATER THAN AREAS VASOPNEUMATIC DEVICES	\$ 41.80
J0690 - CEFAZOLIN SODIUM INJECTION	\$ 246.17
96374 - THERAPRPUTIC IV INJECTION SINGLE-DRUG	\$ 119.98
J1170 - HYDROMORPHONE INJECTION	\$ 243.02
97116 - THERAPY PHYSICAL GREATER THAN 15 MINUTES STAIRS	\$ 62.42
J3490 - DRUGS INJECTION (OTHER)	\$ 303.95
99213 - OFFICE OUTPATIENT VISIT 15 MINUTES	\$ 180.59
93005 - ECG ROUTINE ECG WITH 12 LEADS	\$ 206.88
J2250 - INJECTION ANESTHESIA	\$ 47.15
J1100 - DEXAMETHASONE SODIUM (CORTIZONE)	\$ 54.99
97530 - THERAPEUTIC ACTVITY DIRECT PATIENT EACH 15 MIN	\$ 82.91

**Updated 1/30/18**