

Basic List of Charges – Brattleboro Memorial Hospital

We strive to provide the best patient care experience for every patient, every time. We are providing this information to help answer some of your questions about our charges. The charges listed represent a small number of the most common charges asked for by our patients. These charges represent the average charges for a given inpatient or outpatient case. Average charges are estimates. Because every patient receives treatment based on their individual clinical needs, the specific charges to each patient will vary. Actual charges vary based on services delivered and medical condition. Additional tests or services not listed in the estimate may be ordered by your doctor or provider in order to treat, diagnose or care for individual needs. Your out-of-pocket expense will depend upon your individual insurance coverage terms

With the exception of the Emergency room and a few other diagnostics tests, all of the charges listed here are from Brattleboro Memorial Hospital only. Your doctor, surgeon, radiologist, anesthesiologist and other specialists are independent practitioners and will provide separate bills for their services.

These estimates of charges are valid through September 30, 2008.

Inpatient care is often classified by DRG. DRG stands for "Diagnosis Related Group". The following table provides average overall charge information for the types of inpatient care provided most often at BMH.

DRG	Description	Estimated Average Hospital Charge 2008
775 & 795	Vaginal delivery without complications (includes normal newborn care)	\$ 6,300
766 & 795	C-section without complications (includes normal newborn care)	\$11,600
470	Hip or Knee replacement *	\$25,000
291,292,293	Heart Failure & Shock	\$10,600
193,194,195	Pneumonia (adult)	\$ 9,900
742,743	Surgical procedures of the uterus or ovaries (not cancer)	\$10,900
190,191,192	Chronic Lung Disease (emphysema)	\$ 9,300
371,372,373	Irritation or ulcer of the esophagus or stomach in adults	\$ 6,300
377,378,379	Bleeding from the stomach or intestine	\$11,800
310,311,313	Chest pain	\$ 7,300
64,65,66	Specific Cerebrovascular Disorders Except tia	\$17,600
481,482,493,494	Hip & leg fractures	\$15,500

*The type of prosthesis or device used contributes significantly to the total charge. The charge for these items can vary widely.

The following table provides average charge information for some procedures commonly performed as outpatient procedures at BMH.

ICD9 code	Description	Estimated Average Hospital Charge 2008
04.43	Carpal tunnel release	\$2,560
13.41	Cataract extraction w/lens implant (one eye)	\$4,400
20.01	Ear tubes (myringotomy)	\$2,890
45.23	Colonoscopy (flexible screening of large colon)	\$1,550
45.24	Sigmoidoscopy (flexible screening of descending colon)	\$ 404
51.23	Gall bladder surgery (laparoscopic)	\$7,473
53	Hernia repair	\$5,372
80.2	Arthroscopy (wrist, shoulder, elbow or knee)	\$4,060
80.6	Excise knee cartilage	\$3,732

CPT stands for Current Procedural Terminology. CPT codes are five digit codes that are recognized by all insurance companies, hospitals and physicians. These codes are used by the insurance companies and providers to identify the type of care you receive.

The following charges are the current actual charge for the specific tests or scans. Additional tests or supplies not listed may be ordered by your doctor or provider in order to treat, diagnose or care for individual needs.

CPT code	Lab Tests	Hospital Charge 2008
80061	Lipid profile	\$ 57
81001	Urinalysis	\$ 15
82947	Glucose	\$ 20
84153	Prostate specific antigen (PSA)	\$ 95
85025	Complete blood count with auto diff (CBC)	\$ 40
86850	Antibody detection	\$ 48
86900	ABO group only (blood)	\$ 16
87430	Strep test – group A antigen	\$ 59
87491	Chlamydia test, amplified probe	\$135
88142	PAP screen, thin layer	\$105

CPT code	Radiology	Hospital Charge 2008
71010	Chest X-ray (single view)	\$159
71020	Chest X-ray (two views)	\$159
71030	Chest X-ray (multiple views)	\$159
72020	Spine X-ray	\$159
77080	Bone density scan (usually in combination with a charge for spine x-ray image)	\$265
76856	Ultrasound, pelvis - complete	\$345
76830	Ultrasound, transvaginal (usually in combination with ultrasound, pelvis - complete)	\$345
76645	Ultrasound, breast	\$216

CPT code	MRI Scans	Hospital Charge 2008
70551	Brain & Stem without contrast	\$1,275
72141	Cervical Spine & canal without contrast	\$1,275
73721	Major joint of lower extremity without contrast	\$1,275
72148	Lumbar Spine without contrast	\$1,275

CPT code	CT Scans	Hospital Charge 2008
70450	Head without contrast	\$687
71250	Chest without contrast	\$687
72192	Pelvis without contrast	\$687
74160	Abdominal with contrast*	\$933
76377	Multi Planar reformatting (additional charge with most CT scans)	\$367

*additional charge for contrast medium varies with type and amount.

CPT code	Mammography	Hospital Charge 2008
76057	Bilateral screening	\$171
76056	Bilateral diagnostic	\$182
76052	Computer aided diagnostic, screening (additional charge with all mammographies)	\$ 58

CPT code	Cardiology	Hospital Charge 2008
93005	EKG - tracing only	\$ 74
93010	EKG – interpretation and report (physician fee)	\$ 24
93017	Cardiac Stress test	\$405
93231	Holter monitor recording	\$200
93307	Echocardiogram – 2d mode	\$775
93320	Echocardiogram – Doppler only	\$385
93325	Echocardiogram – Doppler color flow map	\$385
93350	Echo card stress	\$775

CPT code	Emergency Department	Physician Fee 2008	Hospital Charge 2008
99281	ER visit level 1	\$ 57	NA
99282	ER visit level 2	\$109	\$141
99283	ER visit level 3	\$176	\$220
99284	ER visit level 4	\$321	\$356
99285	ER visit level 5	\$480	\$552
99291	ER critical care	\$610	\$687

The hospital's policy is to provide Charity Care for patients whose application documents an income level below 300% of the federal poverty guideline. BMH will also discount 3% of patient balances for the uninsured if payment is made in full within 30 days of receipt from the first statement. For both these programs, please call BMH Financial Counseling at (802) 257-8420.

If you would like additional information or have a specific question, please contact our Patient Liaison at (802) 257-8244