



VALLEY VIEW PROCEDURE CHARGES

At Valley View, we aspire to provide superior customer service to our patients with intelligence and empathy while staying true to the Valley View mission. We provide information regarding admissions, billing, and financial issues to ensure a positive patient experience and stay.

Procedure prices are current as of January 1, 2018. Dollars listed are average numbers. Actual amount

can be higher or lower depending on patient and doctor needs. Procedures listed included the top 30 lab charges, 25 high volume performed tests or procedures, and top 50 inpatient procedures.

If you have a question about your bill or need help understanding the process, we are here to help you navigate this sometimes confusing process. Email us at vvhcs@vvh.org or call 970.384.6890.

LAB PROCEDURES	INPATIENT CHARGE	OUTPATIENT CHARGE	CPT CODE
Abo Group	\$121	\$53	86900
Antibody Screen	\$195	\$80	86850
Basic Metabolic Panel	\$300	\$59	80048
Blood Culture	\$289	\$120	87040
C Reactive Protein	\$111	\$85	86140
CBC	\$139	\$48	85025
Comprehensive Metabolic Panel	\$368	\$80	80053
Glucose Blood Reagent Strip	\$42		82948
Hematocrit Not Spun	\$48	\$27	85014
Hemoglobin @	\$45	\$27	85018
Hemoglobin A 1 C	\$100	\$80	83036
Lactic Acid @	\$175	\$154	83605
Ldl Cholesterol Direct Msrmt	\$68	\$59	83721
Lipase	\$184	\$85	83690
Lipid Panel	\$121	\$45	80061
Magnesium	\$111	\$43	83735
Psa Total Screen Only	\$184	\$101	84153
Pt Prothrombin Time @	\$57	\$27	85610
Rh Type	\$100	\$53	86901
Sedimentation Rate Auto	\$79	\$37	85652
Special Stain Group II	\$227		88313
Troponin I	\$252		84484
Tsh @	\$125	\$91	84443
Urine Culture	\$132	\$65	87086
Urine Dipstick	\$54	\$27	81003
Vitamin D 25 Hydroxy	\$126	\$115	82306
Phlebotomy		\$29	

HIGH VOLUME PROCEDURES	AVERAGE CHARGE	CPT CODE
Esophagogastroduodenoscopy w biopsy	\$4,426*	43239
Colonoscopy w biopsy	\$3,683*	45380
Echo 2D	\$1,521	93306
Physical Therapy Activity 15 minutes	\$93	97530
Occupational Therapy Activity 15 minutes	\$93	97530
Speech Therapy Treatment	\$243	92507
Chest Xray 1 view	\$504	71010
Chest Xray 2 views	\$685	71020
Xray Flouro Guided Spine Injection	\$1,365	77003
Xray Spine Lumbar 2 or 3 views	\$719	72100
Fluorodeoxyglucose (With PET Scan)	\$654	A9552
Ultrasound Abdominal Single Organ	\$427	76705
Ultrasound Transvaginal Non OB	\$427	76830
Ultrasound OB 1st Trimester	\$427	76805
Ultrasound Breast	\$227	76642
MRI Lumbar Spine	\$995	72148
MRI Brain wo Contrast	\$995	70551
MRI Brain w and wo Contrast	\$995	70553
CT Head wo Contrast	\$2,195	70450
CT Sinus wo Contrast	\$1,495	70486
CT Thorax wo Contrast	\$1,495	71250
CT Abdomen & pelvis w Contrast	\$2,195	74177
CTA Chest PE Protocol	\$2,195	71275
Ultrasound Breast w biopsy Perc Needle Core	\$1,613	19083
Ultrasound Thyroid	\$427	76536

Asterix indicates cost listed is the average cost of the procedure. With (w) or without (wo) is in reference to and major complications or comorbidities.



INPATIENT PROCEDURES

AVERAGE CHARGE

DRG CODE

Pulmonary Embolism w/o MCC	\$36,640	175
Pulmonary Edema and Respiratory Failure	\$53,562	189
Chronic Obstructive Pulmonary Disease w MCC	\$38,526	190
Simple Pneumonia & Pleurisy w MCC	\$45,611	193
Simple Pneumonia & Pleurisy w CC	\$30,411	194
Perc Cardiovasc Proc w Drug Eluting Stent w/o MCC	\$68,468	247
Perc Cardiovasc Proc w Non Drug Eluting Stent w/o MCC	\$73,113	280
Acute Myocardial Infarction, discharged Alive w MCC	\$35,195	282
Acute Myocardial Infarction, discharged Alive w/o CC MCC	\$27,752	287
Circulatory Disorders except AMI w Card Cath w/o MCC	\$38,275	291
Heart Failure & Shock w MCC	\$43,028	308
Cardiac Arrhythmia & Conduction Disorders w MCC	\$48,164	309
Cardiac Arrhythmia & Conduction Disorders w CC	\$27,583	310
Cardiac Arrhythmia & Conduction Disorders w/o CC/MCC	\$27,482	331
Major Small & Large bowel Procedures w/o CC/MCC	\$77,591	378
G I Hemorrhage w CC	\$29,818	392
Esophagitis, Gastroent & Misc Digestive Disorders w/o MCC	\$31,603	418
Laparoscopic Cholecystectomy w/o CDE w CC	\$70,289	460
Spinal Fusion Except Cervical w/o MCC	\$129,494	462
Bilat or Multiple Major Joint Porcedures of Lower Extremity w/o MCC	\$109,918	470
Major Joint Replacement or Reattachment of Lower Extremity w/o MCC	\$65,996	473
Cervical Spinal Fusion w/o CC/MCC	\$84,025	481
Hip & Femur Procedures Except Major Joint w CC	\$71,395	483
Major Joint/Limb ReattachmentProcedures of Upper Extremities	\$96,256	517
Other Musculoskelet Sys & Conn Tissue OR Proc w/o CC/MCC	\$46,389	540
Osteomyelitis w CC	\$33,759	541
Osteomyelitis w/o CC/MCC	\$31,641	552
Medical Back Problems w/o MCC	\$27,527	560
Aftercare, Musculpskeletal System & Conn Tissue w CC	\$141,508	603
Cellulitis w/o MCC	\$35,172	639
Diabetes w/o CC/MCC	\$20,916	640
Misc Disorders of Nutrition, Metabolism,Fluids, Electrolytes w MCC	\$6,935	641
Misc Disorders of Nutrition, Metabolism,Fluids, Electrolytes w/o MCC	\$4,505	708
Major Male Pelvic Procedures w/o CC/MCC	\$63,955	720
Septicemia & Disseminated Infections	\$57,973	743
Uterine & Adnexa Proc for Non Malignancy w/o CC/MCC	\$57,696	765
Cesarean Section w CC/MCC	\$35,413	766
Cesarean Section w/o CC/MCC	\$31,464	774
Vaginal Delivery w Complicating Diagnoses	\$15,388	775
Vaginal Delivery w/o Complicating Diagnoses	\$15,010	790
Extreme Immaturity or Respiratory Distress Syndrome Neonate	\$113,117	792
Prematurity w/o Major Problems	\$21,297	793
Full Term Neonate w Major Problems	\$27,290	794
Neonate w Other Significant Problems	\$10,905	795
Normal Newborn	\$5,056	812
Red Blood Cell Disorders w/o MCC	\$32,472	853
Infectious & Parasitic Diseases WOR Procedure w MCC	\$138,860	871
Septicemia or Severe Sepsis w/o MV> 96 hrs w MCC	\$79,056	872
Septicemia or Severe Sepsis w/o MV >96 hrs w/o MCC	\$32,894	948
Signs & Symptoms w/o MCC		

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