

Description:

This report shows CPT codes for a particular procedure when the procedure was performed 10 times or more as the primary procedure. It is the average charge for all procedures that may have been provided. The self pay price is the price extended to patients without insurance. Patients with insurance have a contractually "allowed amount." for the procedure (not published) that was negotiated by their insurance plan.

CPT Code	CPT and Description	Average Charge	Self-Pay Price
36600	36600 - WITHDRAWAL OF ARTERIAL BLOOD	6,129.63	2,016.65
30901	30901 - CONTROL OF NOSEBLEED	4,024.44	1,324.04
31624	31624 - DX BRONCHOSCOPE/LAVAGE	10,075.19	3,314.74
31500	31500 - INSERT EMERGENCY AIRWAY	37,015.10	12,177.97
36430	36430 - BLOOD TRANSFUSION SERVICE	18,039.49	5,934.99
31623	31623 - DX BRONCHOSCOPE/BRUSH	20,884.05	6,870.85
32557	32557 - INSERT CATH PLEURA W/ IMAGE	9,115.49	2,999.00
31622	31622 - DX BRONCHOSCOPE/WASH	8,481.36	2,790.37
36000	36000 - PLACE NEEDLE IN VEIN	4,650.49	1,530.01
32405	32405 - PERCUT BX LUNG/MEDIASTINUM	10,408.95	3,424.54
31627	31627 - NAVIGATIONAL BRONCHOSCOPY	16,849.77	5,543.57
33208	33208 - INSRT HEART PM ATRIAL VENT	120,916.12	39,781.40
30140	30140 - RESECT INFERIOR TURBINATE	49,709.58	16,354.45
33225	33225 - L VENTRIC PACING LEAD ADD-ON	224,477.22	73,853.00
31628	31628 - BRONCHOSCOPY/LUNG BX, EACH	12,794.20	4,209.29
31652	31652 - BRONCH EBUS SAMPLNG 1/2 NODE	9,785.74	3,219.51
36246	36246 - PLACE CATHETER IN ARTERY	31,126.16	10,240.51
33228	33228 - REMVREPLC PM GEN DUAL LEAD	63,850.05	21,006.67
36561	36561 - INSERT TUNNELED CV CATH	31,604.60	10,397.91
36245	36245 - PLACE CATHETER IN ARTERY	46,173.08	15,190.94
33249	33249 - INSJ/RPLCMT DEFIB W/LEAD(S)	157,194.46	51,716.98
30903	30903 - CONTROL OF NOSEBLEED	9,176.06	3,018.92
36569	36569 - INSERT PICC CATH	9,763.93	3,212.33
37226	37226 - FEM/POPL REVASC W/STENT	79,749.68	26,237.65
30300	30300 - REMOVE NASAL FOREIGN BODY	3,648.33	1,200.30