



Pricing Disclosure:

All charges noted are estimated, and are subject to change depending on the final level of service provided. Your actual charge may vary based on visit length, severity, as well as additional tests and labs ordered by your physician. Depending on your insurance plan and/or benefit, you may be responsible for some or all of these charges. Please contact us at 517-437-5222 for an estimate of services not listed here.

Please note that you will receive separate bills for each professional service provided, such as radiologist, surgeon, pathologist, anesthesiologist. Physicians bill their charges separately from the hospital.

Daily Room Rates

Medical/Surgical	\$1,496
Intensive Care	\$2,049
Specialty Services Unit	\$1,637
Obstetrics	\$1,106
Nursery	\$1,187
Bariatric	\$1,637
Skilled Nursing Facility	\$357
Psychiatric	\$1,190
Delivery/Birthing Room	\$820
Labor Room 1st hour	\$494
Labor Room each additional hour	\$233

Emergency Room Visit Charges*

ER Level 1	\$147
ER Level 2	\$212
ER Level 3	\$390
ER Level 4	\$657
ER Level 5	\$924

*Level based on severity
Level 1=Minor Level 5=Critical

Inpatient Services*

Cesarean Section Delivery	\$16,100
Newborn Care	\$4,675
Vaginal Delivery	\$11,300
Lumbar Spinal Fusion	\$48,597
Cervical Spinal Fusion	\$53,377
Joint replacement lower extremity	\$34,840

Outpatient Surgical Procedures*

Breast Biopsy	\$7,325
Carpal Tunnel	\$4,872
Cataract Surgery	\$5,660
Colonoscopy	\$3,209
Cystoscopy	\$11,924
Hernia Repair	\$7,831
Hysterectomy	\$15,214
Knee Scope	\$13,628
Lap Cholecystectomy	\$10,110
Shoulder Scope	\$19,790
Tonsillectomy and Adenoidectomy	\$8,257
Upper GI Endoscopy (EGD)	\$3,412

*Based on average charge of entire patient stay
Pricing updated July 2023

Physical Therapy

PT Evaluation (Initial)	\$184
PT Re-evaluation	\$76
Aquatic per 15 minutes	\$86
Gait Training per 15 minutes	\$56
Massage per 15 minutes	\$93
Therapeutic Exercise per 15 minutes	\$77
PT Ultrasound per 15 minutes	\$60

Occupational Therapy

OT Evaluation Moderate Complexity	\$216
OT Re-evaluation	\$85
Self Care Home Mgmt 15 minutes	\$77
Therapeutic Exercise Group 15 mins	\$42
Therapeutic Exercise 15 minutes	\$77
OT Ultrasound	\$60
Wheelchair Mgmt Training 15 minutes	\$76

Speech Therapy

Evaluation of Swallow Function	\$248
Evaluation of Qualitative Analysis Voice	\$228
Evaluation Speech Fluency	\$190
Evaluation Speech Sound Production	\$156
Motion Fluoroscopy Swallow	\$248
Swallow and Oral Function Treatment	\$299
Treatment of Speech Auditory Disorder	\$234

Cardiopulmonary

Arterial Blood Gas	\$214
Arterial Puncture	\$486
Electrocardiogram (EKG)	\$88
EEG Extended Monitoring	\$1,446
Stress Test	\$3,296
Holter Monitor	\$436
Pulmonary Function Test (PFT)	\$1,293

Laboratory

Acute Hepatitis Profile	\$93
ANA (Anti-Nuclear Antibody)	\$10
Basic Chemistry Profile (BMP)	\$61
CBC with Auto Diff	\$39
Comprehensive Metabolic Panel (CMP)	\$84
Covid (SARS Conornavirus)	\$294
Hemocult OC-Light; FOB Screening	\$56
Hemoglobin A1C	\$36
Hepatic Function Panel	\$65
Lipid Profile	\$83
Prothombin Time INR	\$25
PSA Screening	\$119
PTT	\$25
Renal Function Panel	\$58
Rheumatoid Factor (RA)	\$4
T4 Free	\$86
TSH	\$42
Urinalysis	\$39
Urinalysis Microscopic	\$39
Venipuncture	\$11
Vit-D 25-Hydroxy	\$137

Radiology

<u>X-Ray</u>	
Abdomen	\$168
Ankle (3 views)	\$147
Bone Mineral Density	\$264
Cervical Spine (2 or 3 views)	\$204
Chest (2 views)	\$111
Foot (3 views)	\$149
GI Series	\$409
Hand (3 views)	\$143
Knee (3 views)	\$135
Lumbar Spine (2-3 view)	\$229
Mammography Diagnostic	\$416
Mammography Screening	\$399
<u>Ultrasound</u>	
Abdominal Ultrasound	\$425
OB Ultrasound Greater than 14 weeks	\$495
OB Ultrasound Less than 14 weeks	\$438

Nuclear Medicine

Nuclear Medicine Bone Scan Total	\$831
Hepatobiliary with Intervention	\$1,261
Myocardial Perfusion/Multiple	\$1,909

CT Scans

CT Abd/Pelvis w/ & w/o Contrast	\$2,824
CT Bone Density	\$341
CT Cervical Spine w/o Contrast	\$1,559
CT Chest w/o Contrast	\$1,297
CT Head w/o Contrast	\$823
CT Lower Extremity w/o Contrast	\$1,025
CT Upper Extremity w/o Contrast	\$1,140
CTA Cardiac w/o Ejection Fraction	\$1,289
CTA Chest Angio	\$1,276

MRI

MRA Head w/o Intra Cranial	\$1,136
MRI Abdominal w/ and w/o Contrast	\$2,227
MRI Brain w/o Contrast	\$1,703
MRI C-Spine w/o Contrast	\$1,619
MRI Joint of Lower Extremity w/o Contrast	\$1,982
MRI Joint of Upper Extremity w/o Contrast	\$1,728
MRI Lumbar Spine w/o Contrast	\$1,571
MRI T-Spine w/o Contrast	\$1,451

EXTENDED BILLING SERVICES FOR PHYSICIAN SERVICES AT HILLSDALE HOSPITAL

EMERGENCY PHYSICIAN BILLING	
HILLSDALE EMERGENCY PHYSICIANS	888-703-3301
RADIOLOGY PHYSICIAN BILLING	
PREMIER RADIOLOGY	800-475-6112
HOSPITAL EMPLOYED PHYSICIANS	
GETIX HEALTH	877-909-3999
ANESTHESIA BILLING SERVICES	
NORTH STAR	214-687-0007
HOSPITALIST PHYSICIAN GROUP	
MICHIGAN EMERGENCY PHYSICIAN	888-703-3301