



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	\$1,749
Intensive Care	\$2,434
Specialty Services Unit	\$1,637
Obstetrics	\$1,426
Nursery	\$2,013
Bariatric	\$1,637
Skilled Nursing Facility	\$357
Psychiatric	\$1,406
Delivery/Birthing Room	\$676
Labor Room 1st hour	\$407
Labor Room each additional hour	\$192

Emergency Room Visit Charges*

ER Level 1	\$188
ER Level 2	\$275
ER Level 3	\$500
ER Level 4	\$853
ER Level 5	\$1,187

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

Inpatient Services*

Cesarean Section Delivery	\$18,509
Newborn Care	\$5,280
Vaginal Delivery	\$10,658
Lumbar Spinal Fusion	\$41,083
Cervical Spinal Fusion	\$59,696
Joint replacement lower extremity	\$36,357

Outpatient Surgical Procedures*

Breast Biopsy	\$3,589
Carpal Tunnel	\$4,444
Cataract Surgery	\$5,881
Colonoscopy	\$3,500
Cystoscopy	\$6,831
Hernia Repair	\$14,870
Hysterectomy	\$14,709
Knee Scope	\$13,647
Lap Cholecystectomy	\$10,886
Shoulder Scope	\$16,889
Tonsillectomy and Adenoidectomy	\$8,700
Upper GI Endoscopy (EGD)	\$3,538

*Based on average charge of entire patient stay

Pricing updated July 2024

Physical Therapy

PT Evaluation (Initial)	\$151
PT Re-evaluation	\$76
Aquatic per 15 minutes	\$90
Gait Training per 15 minutes	\$46
Massage per 15 minutes	\$99
Therapeutic Exercise per 15 minutes	\$165
PT Ultrasound per 15 minutes	\$63

Occupational Therapy

OT Evaluation Moderate Complexity	\$179
OT Re-evaluation	\$85
Self Care Home Mgmt 15 minutes	\$63
Therapeutic Exercise Group 15 mins	\$34
Therapeutic Exercise 15 minutes	\$165
OT Ultrasound	\$63
Wheelchair Mgmt Training 15 minutes	\$62

Speech Therapy

Evaluation of Swallow Function	\$204
Evaluation of Qualitative Analysis Voice	\$187
Evaluation Speech Fluency	\$190
Evaluation Speech Sound Production	\$164
Motion Fluoroscopy Swallow	\$204
Swallow and Oral Function Treatment	\$246
Treatment of Speech Auditory Disorder	\$193

Cardiopulmonary

Arterial Blood Gas	\$176
Arterial Puncture	\$401
Electrocardiogram (EKG)	\$92
EEG Extended Monitoring	\$1,446
Stress Test	\$3,296
Holter Monitor	\$324
Pulmonary Function Test (PFT)	\$1,212

Laboratory

Acute Hepatitis Profile	\$93
ANA (Anti-Nuclear Antibody)	\$10
Basic Chemistry Profile (BMP)	\$50
CBC with Auto Diff	\$49
Comprehensive Metabolic Panel (CMP)	\$88
Covid (SARS Coronavirus)	\$294
Hemocult OC-Light; FOB Screening	\$56
Hemoglobin A1C	\$49
Hepatic Function Panel	\$68
Lipid Profile	\$87
Prothombin Time INR	\$21
PSA Screening	\$126
PTT	\$26
Renal Function Panel	\$61
Rheumatoid Factor (RA)	\$4
T4 Free	\$90
TSH	\$44
Urinalysis	\$41
Urinalysis Microscopic	\$39
Venipuncture	\$11
Vit-D 25-Hydroxy	\$18

Radiology

<u>X-Ray</u>	
Abdomen	\$85
Ankle (3 views)	\$156
Bone Mineral Density	\$278
Cervical Spine (2 or 3 views)	\$215
Chest (2 views)	\$136
Foot (3 views)	\$156
GI Series	\$207
Hand (3 views)	\$150
Knee (3 views)	\$173
Lumbar Spine (2-3 view)	\$249
Mammography Diagnostic	\$322
Mammography Screening	\$426

Ultrasound

Abdominal Ultrasound	\$454
OB Ultrasound Greater than 14 weeks	\$461
OB Ultrasound Less than 14 weeks	\$528

Nuclear Medicine

Nuclear Medicine Bone Scan Total	\$816
Hepatobiliary with Intervention	\$1,328
Myocardial Perfusion/Multiple	\$2,011

CT Scans

CT Abd/Pelvis w/ & w/o Contrast	\$2,974
CT Bone Density	\$341
CT Cervical Spine w/o Contrast	\$1,286
CT Chest w/o Contrast	\$1,157
CT Head w/o Contrast	\$679
CT Lower Extremity w/o Contrast	\$1,286
CT Upper Extremity w/o Contrast	\$1,200
CTA Cardiac w/o Ejection Fraction	\$1,357
CTA Chest Angio	\$1,344

MRI

MRA Head w/o Intra Cranial	\$1,160
MRI Abdominal w/ and w/o Contrast	\$2,468
MRI Brain w/o Contrast	\$1,740
MRI C-Spine w/o Contrast	\$1,654
MRI Joint of Lower Extremity w/o Contrast	\$1,654
MRI Joint of Upper Extremity w/o Contrast	\$1,820
MRI Lumbar Spine w/o Contrast	\$1,654
MRI T-Spine w/o Contrast	\$1,527

EXTENDED BILLING SERVICES FOR PHYSICIAN SERVICES AT HILLSDALE HOSPITAL

EMERGENCY PHYSICIAN BILLING HILLSDALE EMERGENCY PHYSICIANS	888-703-3301
RADIOLOGY PHYSICIAN BILLING DEFIANCE RADIOLOGIST ASSOCIATES	866-873-1514
HOSPITAL EMPLOYED PHYSICIANS GETIX HEALTH	877-909-3999
ANESTHESIA BILLING SERVICES CHALLENGE ANESTHESIA STAFFING	888-987-1489
HOSPITALIST PHYSICIAN GROUP MICHIGAN EMERGENCY PHYSICIAN	888-703-3301