

Sierra View Medical Center
25 Commonly Charged Outpatient Procedures
Effective Date of Charges: January 1, 2019

	2018 CPT Code	Average Charge
Evaluation & Management Services (CPT Codes 99201-99499)		
Emergency Room Visit, Level 2 (low to moderate severity)	99282	440.10
Emergency Room Visit, Level 3 (moderate severity)	99283	586.20
Laboratory & Pathology Services (CPT Codes 80048-89356)		
Basic Metabolic Panel	80048	185.80
Complete Blood Count, automated	85027	92.50
Complete Blood Count, with differential WBC, automated	85025	104.90
Comprehensive Metabolic Panel	80053	210.30
Lipid Panel	80061	119.90
Partial Thromboplastin Time	85730	90.00
Prothrombin Time	85610	78.80
Thyroid Stimulating Hormone	84443	109.70
Troponin, Quantitative	84484	118.70
Radiology Services (CPT Codes 70010-79999)		
CT Scan, Abdomen, with contrast	74160	2,603.70
Mammography, Screening, Bilateral	77067	287.70
MRI, Head or Brain, without contrast, followed by contrast	70553	3,710.10
Ultrasound, Abdomen, Complete	76700	1,009.90
Ultrasound, OB, 14 weeks or more, transabdominal	76805	1,009.90
X-Ray, Lower Back, four views	72110	677.70
X-Ray, Chest, two views	71046	341.20
Medicine Services (CPT Codes 90281-99602)		
Echocardiography, complete	93307	1,220.70
Physical Therapy, Evaluation	97001	213.40
Surgery Services (CPT Codes 10021-69990)		
Carpal Tunnel Surgery	64721	12,102.00
Colonoscopy, with biopsy	45380	7,189.00
Hernia Repair, Inguinal, 5 years and older	49505	22,831.00
Scope of Bladder and Urethra	52000	2,415.35
Tonsillectomy with Adenoidectomy, less than 12 years old	42820	16,059.00