MEMORIAL HOSPITAL
UNION COUNTY
Committed to care. Devoted to caring.

Memorial Hospital of Union County
CONSUMER PRICE GUIDE

Revised January 1st, 2013

GENERAL CHARGE INFORMATION

Memorial Hospital of Union County abides by all state and federal charging and billing regulations for hospital based healthcare services. The following information is published in accordance with Ohio House Bill No. 197 to allow consumers the opportunity to review hospital charges for selected medical services. Although the information provides basic charge information it ***is not all inclusive of the potential charges*** for a given service. It does not include items such as non-routine supplies and medications that can vary significantly among patients. If more detailed or additional information is needed for specific services please contact us at **mhuccharge@memorialhosp.org** or (**937) 578-2579**.

The information contained here does not include detail on physician charges for radiology, laboratory, surgical, cardiology or emergency services. For physician charge information, please contact the following businesses.

Emergency Department Physicians

MBI Solutions: (800) 875-7374

Radiologists (X-ray readings)

Mid-Ohio Radiology: (614) 791-1300 or (800) 538-2744

Pathology and Cardiology (pathology and EKG readings)

Medibill: (800) 282-0738

Anesthesia

Rural Anesthesia Management: (859) 655-8558

This hospital published charge information does include the following:

- Room and board rates
- The 30 most common radiological/x-ray procedures
- The 30 most common laboratory tests
- Emergency Room services
- Operating Room services
- Delivery Room services
- Physical, Occupational and Pulmonary therapy services

Memorial Hospital of Union County makes every effort to ensure that hospital bills are complete and accurate and is willing to provide financial assistance to those patients who are experiencing difficulty in paying their bills. The hospital participates in the Hospital Care Assurance Program (HCAP) that provides a sliding scale discount based on income and household size. Interest is not charged on unpaid, billed accounts. For more information on payment assistance please contact the hospital via e-mail at **mhuccharge@memorialhosp.org** or by phone at (**937) 578-2564**.

DELIVERY ROOM CHARGES

Description	Charge
Monitor-Fetal Heart-Per Hour	$196.48
Monitor-Neonatal	204.30
Delivery Room	607.29
Tubal Ligation done with C-Section	735.04
Amniocentesis	237.46
Laboring Epidural per Hour	141.35
Laboring Monitoring per Hour	84.68
OB Recovery 1st Hour	407.84
OB Recovery Room/15 Minutes Additional	105.22
OB C-Section 1st 15 Minutes	3,069.31
OB C-Section Each Additional 15 Minutes	687.51

2012 Average Total Delivery Charges

Median Normal Vaginal Delivery Hospital Charge For 2011 (Includes all medications, supplies and hospital services)	$6,226.00
Median Uncomplicated C-Section Delivery Hospital Charge For 2011 (Includes all medications, supplies and hospital services)	13,600.00

EMERGENCY DEPARTMENT CHARGES

Description	Charge
ER Levels of Care	
Emergency Room Level 1	$223.00
Emergency Room Level 2	283.25
Emergency Room Level 3	409.57
Emergency Room Level 4	561.10
Emergency Room Level 5	635.97
Emergency Room Level Critical	1,514.13
Sexual Assault Exam – Emergency Room	984.52

ER Procedures

Arterial Line Insertion	$877.29
Arterial Puncture	18.19
Arthrocentesis of Joint, Needle Aspiration or Injection	242.86
Avulsion of Nail Plate, Partial or Complete	87.04
Blood Product Transfusion 1-4 Hours	788.62
Blood Product Transfusion 5-8 Hours	1,387.19
Blood Product Transfusion >8 Hours	1,892.35
Central Vein IV Line Insertion	885.26
Chest Tube Insertion	823.04
Control of Post Tonsillectomy Bleed	105.86
CPR - Cardiopulmonary Resuscitation	783.00
Dermabond Application/Skin glue	17.16
Ear Wax Impaction Removal	119.96
Electrocardioversion of Heart	721.76
Endotracheal Intubation - Breathing Tube Insertion	256.16
Epidural Blood Patch Spinal Injection	658.14
Evacuation of Subungal (Finger/Toe Nail) Hematoma	70.35
Foley Catheter Insertion	73.98
Foreign Body Removal - incisional	382.24
Foreign Body Removal Ear	77.71
Fracture Treatment	352.69
Gastric Lavage for Toxic Ingestion	270.16
Incision and Drainage of Skin or Subcutaneous Tissue	367.14
Initial Burn Treatment	351.10
Injection, Intra-Arterial	141.90
Injection, IV Push, Each Additional Sequential New Drug	156.09
Injection, IV Push, Initial	139.37
Injection, Subcutaneous or Intramuscular	120.20
Intraosseous Needle Placement for Infusion	140.69
Ipecac Administration	111.57
IV Hydration, Initial, Each Additional Hour	124.87
IV Hydration, Initial, Up To One Hour	247.48
IV Infusion Therapy, Additional Sequential, Up To 1 Hour	124.07
IV Infusion Therapy, Concurrent	247.49
IV Infusion Therapy, Each Additional Hour	124.07
IV Infusion Therapy, Initial, Up To One Hour	247.48
Joint Dislocation Treatment/Reduction	411.21
Lumbar Puncture/Spinal Tap	517.75
Major “Other” Procedure Charge, Not Otherwise Listed	469.59
Major Joint Splinting	124.18
Minor “Other” Procedure Charge, Not Otherwise Listed	81.72

Minor Joint Splinting	$56.75
Moderate Sedation Over 5 Years Old First 30 Minutes	194.96
Nasal Epistaxis Control -- Chemical	141.58
Nasal Packing/Cautery	382.61
Ocular/Eye Foreign Body Removal	508.99
Paracentesis, Abdominal Fluid Drainage	823.04
Pediatric Sex Assault Colposcopic Exam	382.25
Phlebotomy/Blood Collection - ER/CC	8.93
PICC Insertion (Peripheral Central IV Line)	935.36
Skin Debridement	171.43
Straight Catheter Insertion for Urine	73.98
Sutures/Stitches Complex	873.04
Sutures/Stitches Minor	630.60
Thoracentesis/Lung Drainage	823.04
Thrombolytic/Clot Dissolving Therapy	501.25
Trans Cutaneous Pacing of Heart	881.75
Vaccine <8 Yrs-Ea Additional Percutaneous, Subcutaneous	52.92
Vaccine <8 Yrs-Percutaneous, Intradermal Subcutaneous	58.21
Vaccine Administration - Adult (Ea Additional)	52.92
Vaccine Administration Adult	52.40
Wedge Excision of Skin Fold, Ingrown Nail	132.66

LABORATORY CHARGES

Description	Charge
Complete Blood Count (CBC) with Auto Differential	$64.04
Basic Metabolic Panel F8	133.86
Complete Blood Count (CBC) Without Auto Differential	40.96
Prothrombin Time	38.40
Lipid Panel	128.08
Comprehensive Metabolic Panel	268.63
Creatinine Serum	48.19
BUN	46.20
CPK	45.62
AST - SGOT	54.67
Electrolyte Panel	60.41
Troponin-I	72.20
CKMB	88.60
Thyroid Stimulation Hormone - High Sensitivity	119.02
Urinalysis - Dipstick Only	23.63

Laboratory Charges continued.....

ALT - SGPT	54.67
Urinalysis; Auto With Microscopy	40.07
Culture - Urine	59.63
Glucose	43.83
Ha_1C Marysville	116.38
PTT	54.50
TSH-Reflex	119.02
Bilirubin Total	52.53
Magnesium	69.75
Amylase	97.46
Gross & Micro / Level IV	194.37
Bilirubin Conjugated	52.53
Lipase	103.30
Potassium	45.26
Culture - Routine	98.55
Sensitivity	79.35

OCCUPATIONAL THERAPY CHARGES

Description	Charge
Activities of Daily Living Mobility - 15 Minutes	$65.70
Cognitive Retraining - 15 Minutes	60.04
Community \ Work Reintegration Training -15 Minutes	59.73
Debridement of Skin Selective Greater Than 20 Cm	121.28
Debridement of Skin Selective Less Than 20 Cm	90.69
Dynamic Functional Activity - 15 Minutes	100.41
Electrical Stimulation Attended	139.13
Electrical Stimulation Unattended	91.72
Fluidotherapy - Whirlpool Therapy	72.97
Iontophoresis - 15 Minutes	118.28
Isokinetic Exercise - 15 Minutes	162.24
Joint Mobilization - 15 Minutes	121.62
Manual Muscle Test of Body with Hands	74.37
Manual Muscle Test of Body without Hands	89.96
Massage Therapy -15 Minutes	91.13
Myofascial Release -15 Minutes	121.62
Neuromuscular Re-Education - 15 Minutes	91.29
Occupational Therapy Evaluation	193.67
Occupational Therapy Re Evaluation	107.32
Orthotic Fabrication/Fitting - 15 Minutes	107.32
Paraffin - One Area -15 Minutes	67.38
Patient Education/Instruction - 15 Minutes	65.70
Range Of Motion Testing Excluding Hands	89.96
Range Of Motion Testing Including Hands	81.79
Sensory Integrative Techniques	65.72
Therapeutic Exercise - Limited - 15 Minutes	100.68
Therapeutic Procedure Group - 2 or More	27.62
Ultrasound Attended - 15 Minutes	92.06
Whirlpool Therapy	124.04

Description	Charge
Cancelled Surgery	
(After Entry to Operating Room and Sterile Supply Usage)	
Cancelled Case Intermediate	$594.92
Cancelled Case Major	756.28
Cancelled Case Major Trauma	828.46
Cancelled Case Minor	466.52
Cosmetic Surgery	
Cosmetic Level 1- 0 to 30 Minutes Total or Time	$829.10
Cosmetic Level 2 - 31 to 60 Minutes Total or Time	892.90
Cosmetic Level 3 - 61 to 90 Minutes Total or Time	1,052.34
Cosmetic Level 4 - 91 to 120 Minutes Total or Time	1,211.77
Cosmetic Level 5 - 121 to 150 Minutes Total or Time	1,371.23
Cosmetic Level 6 - 151 to 180 Minutes Total or Time	1,530.67
Cosmetic Level 7- 181 to 210 Minutes Total or Time	1,690.12
Cosmetic Level 8 - 211 to 240 Minutes Total or Time	1,849.55
Cosmetic Level 9 - 241 to 270 Minutes Total or Time	2,009.01
Cosmetic Level 10 - 271 to 300 Minutes Total or Time	2,168.45
Cosmetic Level 11 - 301 to 330 Minutes Total or Time	2,327.89
Cosmetic Level 12 - 331 to 360 Minutes Total or Time	2,487.34
Cosmetic Level 13 - 361 to 390 Minutes Total or Time	2,646.78
Cosmetic Level 14 - 391 to 420 Minutes Total or Time	2,806.22
Cosmetic Level 15 - 421 to 450 Minutes Total or Time	2,965.68
Cosmetic Level 16 - 451 to 480 Minutes Total or Time	3,125.11
Cosmetic Additional OR Time - Each Additional 30 Minutes	159.44
Urological	
Cysto Minor - 1st 15 Minutes	$1,792.79
Cysto Intermed - 1st 15 Minutes	2,244.33
Cysto Major - 1st 15 Minutes	3,584.31
Urology / General Minor - 1st 15 Minutes	1,733.48
Urology / General Major - 1st 15 Minutes	2,589.38
Minor - Additional 15 Minutes	514.22
Intermediate - Additional 15 Minutes	595.25
Major - Additional 15 Minutes	756.28

Operating Room Continued...

ENT - Ears Nose and Throat

ENT Minor - 1st 15 Minutes	$1,611.66
ENT Major - 1st 15 Minutes	2,296.00
Minor - Additional 15 Minutes	514.22
Major - Additional 15 Minutes	756.28

Opthamology - Eye

Eye Minor - 1st 15 Minutes	$1,523.66
Eye Major - 1st 15 Minutes	2,739.26
Minor - Additional 15 Minutes	514.22
Major - Additional 15 Minutes	756.28

General Surgery

General Minor - 1st 15 Minutes	$1,798.22
General Intermediate - 1st 15 Minutes	3,307.19
General Major - 1st 15 Minutes	3,238.32
Minor - Additional 15 Minutes	514.22
Intermediate - Additional 15 Minutes	595.25
Major - Additional 15 Minutes	756.28

Gynecological

OB/GYN Minor - 1st 15 Minutes	$1,905.04
OB/GYN Intermediate - 1st 15 Minutes	2,756.79
OB/GYN Major - 1st 15 Minutes	3,069.32
Minor - Additional 15 Minutes	514.22
Intermediate - Additional 15 Minutes	595.25
Major - Additional 15 Minutes	756.28

Orthopedic

Ortho Minor - 1st 15 Minutes	$1,189.77
Ortho Inter Mediate - Initial 15 Minutes	2,907.00
Ortho Major - 1st 15 Minutes	3,779.14
Ortho Major Total - Joints Initial 15 Minutes	4,982.32
Minor - Additional 15 Minutes	514.22
Intermediate - Additional 15 Minutes	595.25
Major - Additional 15 Minutes	756.28
Major Total Joint- Additional 15 Minutes	827.20

Operating Room Continued...

Trauma

Major Trauma / Duel Setup - 1st 15 Minutes	$3,707.41
Major Trauma - Additional 15 Minutes	827.20

2012 Average Total Charges (inclusive of all charges)

The 5 Most Common Inpatient Surgical Procedures

Total Abdominal Hysterectomy	$17,391.23
Laparoscopic Cholecystectomy (gallbladder removal)	23,395.79
Closed Reduction Internal fixation of Femur Fracture	29,608.51
Total Knee Replacement	32,491.52
Total Hip Replacement	33,218.19

The 5 Most Common Outpatient Surgical Procedures

Colonoscopy with Biopsy	$2,341.04
Esophagogastroduodenoscopy (Upper GI Scope) With Biopsy	2,441.50
Colonoscopy	1,837.99
Colonoscopy with Polypectomy	2,253.68
Esophagogastroduodenoscopy (Upper GI Scope)	2,095.86

PHYSICAL THERAPY CHARGES

Description	Charge
Activities of Daily Living Training - 15 Minutes	$65.70
Aquatic Therapy With Therapeutic Exercise - 15 Minutes	95.02
Debridement Skin Selective Less Than 20sq Cm	90.69
Dynamic Functional Activities - 15 Minutes	100.41
EMS - Electrical Stimulation - Unattended	91.72
Exercise-Therapeutic - 15 Minutes	100.68
Gait Training - 15 Minutes	74.62
Home Instruction Training - 15 Minutes	65.70
Initial Tens Evaluation	188.19
Iontophoresis - 15 Minutes	118.28
Joint Mobilization - 15 Minutes	121.62
Manual Muscle Test of Body No Hands	89.96
Manual Therapy Technique	121.62
Massage - 15 Minutes	91.13
Myofascial Release - 15 Minutes	121.62
Neuromuscular Re-Education - 15 Minutes	91.29
Orthotic Fabrication/Fitting	107.32
Patient Education Instruction - Additional 15 Minutes	65.70
Phonophoresis/Ultrasound - 15 Minutes	92.06
Physical Therapy Evaluation	207.00
Physical Therapy Re-Evaluation	120.84
Prosthetic Training - 15 Minutes	120.32
Range Of Motion Testing Excluding Hands	89.96
Therapeutic Activities - Group - 15 Minutes	29.91
Therapeutic Activities - Inc Func Perf - 15 Minutes	100.41
Traction - Mechanical - Unattended	95.77
Traction-Manual Therapy - 15 Minutes	121.62
Transfer Training - 15 Minutes	51.04
Ultrasound Therapy - 15 Minutes	92.06
Whirlpool Therapy	124.04
Work Conditioning per hour	88.69

RADIOLOGY CHARGES

Description	Charge
X-Rays	
Abdomen and Posterior, Anterior Chest	$460.00
Ankle	348.38
Cervical 5 view/Obliques	500.26
Chest Posterior, Anterior and Lateral	297.28
Chest Posterior, Anterior Only	233.92
Cross Fire Abdomen	278.36
Dexa Scan	469.20
Dorsal spine, AP/LAT, 2 views	356.83
Foot, 3-Views	360.90
Hand	328.44
Hip	326.16
Knee X-Ray, 1-2 views	345.00
Lumbar Spine-AP & Lat-Obl, 4views	588.46
Mammography 2 side Diagnostic	264.66
Mammography 2 Sides Screening	103.33
Shoulder,	402.48
Upper GI Tract with Double Contrast	580.73
Wrist	345.00
CT Scans	
CT Abdomen with Contrast	$1,736.58
CT Angiography Chest with Contrast	2,283.51
CT Head without Contrast	1,528.80
CT Pelvis With Contrast	1,914.52
CT Stone Study	1,436.16
MRI	
MRI Brain, Without Then With Contrast	$2,499.94
MRI Cervical Spine, Without Contrast	2,300.10
MRI Lower Extremity Joint Only	2,100.03
MRI Lumbar Spine, Without Contrast	2,299.89
MRI Upper Extremity Joint Only	1,899.97

Ultrasound

Breast Ultrasound	$415.51
Ultrasound Abdominal/Complete	935.15
Ultrasound Abdominal/Limited	695.91
Ultrasound Pelvis/Complete	857.75
Ultrasound Renal/Limited/No Bladder	557.54

RESPIRATORY THERAPY CHARGES

Description	Charge
Bronchoscopy with Local Anes	$839.40
Bronchoscopy with Sedation	1,505.15
Nebulizer Therapy	64.41
Breathing Exercise Instruction	64.25
Cool Aerosol/Subsequent	102.88
Sputum Induction	55.77
Manipulate Chest Wall, 1st Demo/Evaluation	91.57
Ventilator Subsequent Days	486.75
Tent Installation-Inpatient Only	55.77
Ventilator Asst & Mgmt, Initial Day	535.75
Infant Apnea Monitor management-Inpatient Only	98.72
Cool Aerosol/Initial Treatment	62.46
Manipulate Chest Wall, Subsequent Treatment.	56.04
CPAP Ventilation Initiation and Management	238.76
Arterial Puncture	18.19
Incentive Instruction Inpatient Only	98.50
Incentive Therapy	37.63
Bronchodilator Response Pre and Post Dilator Administration	612.82
Mefr Max Expir Flow/Resp flow Volume Loop	156.10
MVV Maximum Voluntary Ventilation	139.37
Oximetry, Multiple Determinations	211.54
Functional Residual Capacity	277.33
Forced Vital Capacity	163.78
Diffusing Capacity 1	202.10

Flow Volume Loops 3	$56.00
Oximetry, Single Determination	66.50
Spirometry	231.77
Nocturnal Oximetry Sat Study	414.60
Contin Inhal Tx with Med Initial Hour	203.06
Contin Inhal Tx with Med Ea Add Hour	179.55
Bronchospasm Prov Test Multi Determ	624.82

ROOM RATES

Description	Charge
Psychiatric (Behavioral Health)	$773.88
Intensive Care	1,394.00
Medical/Surgical (Morey Center)	590.00
Nursery	415.00
Obstetrics	551.58
Step Down	840.50