



Patient Price Information List

In compliance with state law, Hillcrest Hospital is providing this price list containing our charges for room and board, emergency department, operating room, delivery, physical therapy and other procedures. The hospital's charges are the same for all patients, but a patient's responsibility may vary, depending on payment plans negotiated with individual health insurers. Uninsured or underinsured patients should consult with our admitting and billing staff to determine whether they qualify for discounts. These prices are correct as of January 1, 2009

Room and Board -- Per Day Charges

Coronary care	\$ 1,802	Skilled Nursing	\$ 638
Intensive care	\$ 1,802	Rehabilitation	\$ 836
Medical/Surgical	\$ 990	Obstetrics/Labor & Delivery	\$ 830
Step Down	\$ 1,345	Nursery	\$ 572
Telemetry	\$ 1,295	Neonatal	\$ 1,802
Psychiatry	\$ 900	Boarder	\$ 572
Chemical Dependency/Detox	\$ 900		

Labor and Delivery Charges

The following list does not include charges for anesthesia, drugs, or supplies required for a particular delivery room procedure. Fees for physician services or anesthesia administration are also not reflected, and will be billed separately by your physician.

Normal Delivery	\$ 2,234	Fetal Monitor per Hour	N/A
Cesarean Section Delivery	\$ 3,387	Labor Room per minute	\$ 1.60
Amniocentesis	\$ 467		
Non Stress Test	\$ 300		

Emergency Department Charges

Emergency Department charges are based on the level of emergency care provided to our patients. The levels, with level 1 representing basic emergency care, reflect the type of accommodations needed, the personnel resources, the intensity of care and the amount of time needed to provide treatment. The following charges do not include fees for drugs, supplies or additional ancillary procedures that may be required for a particular emergency treatment. They also do not include fees for Emergency Department physicians, who will bill separately for their services.

Level 1	\$ 210	Trauma Activation Level 1	\$ 2,575
Level 2	\$ 340	Trauma Activation Level 2	\$ 1,500
Level 3	\$ 590	Critical care, Initial	\$ 2,220
Level 4	\$ 875	Critical care, Additional	\$ 1,200
Level 5	\$ 1,400		

Operating Room Charges

Operating Room charges are based on the complexity level, with Type 1 being the most basic. The following list does not include charges for anesthesia, drugs, or supplies required for a particular operating room procedure. Fees for physician services or anesthesia administration are also not reflected, and will be billed separately by your physician.

Per 30 minute increment

Level 1	\$ 1,462	Level 4	\$ 2,227
Level 2	\$ 1,801	Level 5	\$ 2,449
Level 3	\$ 2,035	Level 6	\$ 2,734

Physical Therapy Charges

The following charges reflect the most common services offered by our Physical Therapy department. Patients may have additional charges, depending on the services performed.

Evaluation & Report	\$ 267	Therapeutic Exercise/per 15 min	\$ 131
Gait Training	\$ 94	Therapeutic Group	\$ 120

Occupational Therapy Charges

The following charges reflect the most common services offered by our Occupational Therapy department. Patients may have additional charges, depending on the services performed.

Evaluation & Report	\$ 303
Therapeutic Exercise/per 15 min	\$ 131
Therapeutic Group	\$ 120

Pulmonary Therapy Charges

The following charges reflect the most common services offered by our Pulmonary Therapy department. Patients may have additional charges, depending on the services performed.

Aerosol Therapy	\$ 65	Cardiac Rehab Phase II	\$ 247
Exercise Training Ind	\$ 81		

X-Ray and Radiological Charges

The following charges reflect the hospital's 30 most common x-ray and radiological procedures.

CT Angio Chest w wo Contrast	\$ 2,378	XR Chest PA Lat	\$ 283
CT Angio Pelvis w wo Contrast	\$ 2,410	XR Chest Single View	\$ 231
CT Head Brain w wo Contrast	\$ 1,871	XR Forearm 2 Views	\$ 248
CT Head Brain wo Contrast	\$ 1,381	XR Hand 3 Views Minimum	\$ 253
CT Pelvis w Contrast	\$ 1,851	XR Finger 3 Views Minimum	\$ 193
CT Pelvis wo Contrast	\$ 1,522	XR Hip 1 View	\$ 245
CT Sinus wo Contrast	\$ 1,381	XR Hip 2 Views Minimum	\$ 273
CT Spine Cervical wo Contrast	\$ 1,635	XR Knee 2 Views	\$ 257
CT Thorax w Contrast	\$ 1,925	XR Knee 3 Views Minimum	\$ 325
CT Thorax wo Contrast	\$ 1,613	XR Pelvis 1 or 2 Views	\$ 232
MRI Angio Head wo Contrast	\$ 1,991	XR Ribs Unilateral	\$ 351
MRI Brain w wo Contrast	\$ 3,308	XR Shoulder 2 Views	\$ 282
MRI Brain wo Contrast	\$ 2,590	XR Spine Cervical 4 Views Minimum	\$ 399
MRI Cervical Spine wo Contrast	\$ 2,495	XR Spine Lumbosacral 2 or 3 Views	\$ 370
MRI Lumbar Spine wo Contrast	\$ 2,502	XR Wrist 3 Views Minimum	\$ 243

Laboratory Charges

The following charges reflect the hospital's 30 most common laboratory procedures.

Amylase	\$ 90	Hemoglobin	\$ 29
Basic Metabolic Panel	\$ 119	Hepatic Function Panel	\$ 114
CBC	\$ 66	Lipase	\$ 99
CBC/Differential	\$ 80	Lipid Panel	\$ 131
Comprehensive Metabolic Panel	\$ 192	Magnesium	\$ 63
C-REACTIVE PROTEIN	\$ 78	Myoglobin	\$ 154
Creatine Kinase	\$ 60	Obstetric Panel	\$ 191
Creatine Kinase, MB fraction	\$ 125	Partial Thromboplastin Time	\$ 71
CREATININE	\$ 53	Prothrombin Time	\$ 53
CRP High Sensitivity	\$ 110	Renal Function Panel	\$ 160
Digoxin	\$ 110	Sedimentation Rate	\$ 57
Drug Screen	\$ 63	Troponin	\$ 126
Glucose, Blood, Quantitative	\$ 41	TSH	\$ 130
HbA1c	\$ 98	Urinalysis w/microscopy	\$ 54
Hematocrit	\$ 31	Urinalysis, routine	\$ 44

Hospital Billing Policies

We want to make sure that you receive the full benefits of your insurance coverage as well as consideration under our financial assistance programs, if applicable. Before we bill you, we bill your insurance provider, including Medicare and Medicaid, and any secondary insurance providers. We do not charge interest on any balance due after insurance payments are received. We will send an easy-to-understand billing statement showing the most current balance owed by your insurance provider as well as any balance due from you. If you are not able to pay the amount you owe in full, you may contact us regarding applying for financial assistance or being set up on a payment plan. Emergency service will never be delayed or withheld on the basis of a patient's ability to pay.

Consumers can access a number of government and private Websites, which provide additional information on hospitals' charges and quality. For a complete listing of available online resources, please visit the Consumer's Guide to Quality Health Care in Ohio at www.ohanet.org/portal.