

**Sedgwick County Health Center**  
**Price Transparency Effective January 1, 2024**

The healthcare price for any given service is an estimate and the actual charges for the healthcare services are dependent on the circumstances at the time the service is rendered.

If you are covered by health insurance, you are strongly encouraged to consult with your health insurer to determine accurate information about your financial responsibility for a particular healthcare service provided by a healthcare provider at this facility. If you are not covered by health insurance, you are strongly encouraged to contact one of our billing office personnel at (970) 474-3323 to discuss payment options. The healthcare prices listed may not reflect the actual amount of your financial responsibility.

In an effort to help our patients understand their healthcare options and cost of care, we are providing pricing for our Emergency Room and the most common inpatient and outpatient charges. The prices listed below do NOT include any additional services, including physician charges, pharmacy, lab or radiology, rendered while in our Emergency Room.

ER Level I	\$290.00
ER Level II	\$435.00
ER Level III	\$673.00
ER Level IV	\$1,656.00
ER Level V	\$2,923.00

Listed below are the top 50 outpatient services performed at Sedgwick County Hospital.

	<b>CPT Code</b>	<b>Outpatient Services</b>	<b>Cost</b>
1	36415	BLOOD COLLECTION	\$23.00
2	97110	THERAPEUTIC EX PROCEDURE	143.00
3	85025	CBC	82.00
4	80053	COMPREHENSIVE METABOLIC PANEL (14)	215.00
5	G0378	OUTPATIENT OBS EACH ADDITIONAL HOU	57.00
6	G0378	OUTPATIENT OBS W/TELEMTRY EACH HOU	73.00
7	86140	C-REACTIVE PROTEIN QUANT	121.00
8	83880	NT-PRO BNP	184.00
9	97140	MANUAL THERAPY 15 MIN	143.00
10	97116	GAIT TRAINING 15 MIN	103.00
11	84443	TSH	199.00
12	80048	BASIC METABOLIC PANEL (CHEM 7)	167.00
13	81015	URINE MICROSCOPIC	39.00
14	96374	INJECTION, IV	67.00
15	84439	FREE T4	97.00
16	83540	IRON	127.00
17	83036	HEMOGLOBIN A1C	121.00
18	93005	EKG TRACING ONLY	237.00
19	93010	EKG INTERPRETATION ONLY	51.00
20	97535	SELF CARE	149.00
21	84481	FREE T 3	174.00
22	84484	TROPONIN I	203.00
23	82948	ACCU CHECK	22.00
24	81002	UA DIPSTICK	55.00

25	99284	ER LEVEL 4	1,656.00
26	99283	ER LEVEL 3	673.00
27	87486	CHLAMYDIA PNEUMO PCR	315.00
28	87581	MYCOPLASMA PNEUMO PCR	315.00
29	87633	RESPIRATORY VIRUS PCR	315.00
30	87798	AMPLIFIED PROBE TECHNIQUE	158.00
31	88305	TISSUE LEVEL 4	263.00
32	80061	LIPID PANEL W/DIRECT LDL	274.00
33	83550	IRON BINDING CAPACITY	117.00
34	83605	LACTIC ACID	61.00
35	87086	CULTURE, URINE	114.00
36	85651	SEDRATE	91.00
37	71046	CHEST, PA & LATERAL	273.00
38	82746	FOLATE	103.00
39		ROOM & CARE TELEMTRY	2,609.00
40	82607	VIT B12	135.00
41	99212	WOUND CARE-LEVEL 2	136.00
42		ROOM AND CARE - SWING BED	338.00
43	83735	MAGNESIUM	103.00
44	85379	D-DIMER	204.00
45	87428	INFLU A&B + COVID--19 AG BY FIA	115.00
46	82728	FERRITIN	141.00
47	97035	US TREATMENT 15 MIN	103.00
48	97162	EVAULATION MOD COMPX	288.00
49	85027	CBC W/OUT DIFF	102.00
50	82306	VITAMIN-D, 25 HYDROXY	257.00

Listed below are the top inpatient diagnosis codes for our facility where we had 10 or more patients with the same diagnosis in 2023.

<b>Diagnosis Code</b>	<b>Description</b>	<b>Estimated Cost</b>
J.189	Pneumonia, unspecified organism	\$25,208.00
R.531	Weakness	\$15,785.00