

Patient Price Information List

January 1, 2020

In compliance with state law, Western Reserve Hospital is providing this price list containing our charges for Room and Board, Emergency Department, Operating Room, Physical Therapy, Pain Medicine and other procedures. This publication is available upon request when visiting the hospital. The hospital charges are the same for all patients, but a patient's responsibilities may vary, depending on payment plans negotiated with individual health insurers. **Please contact our Patient Financial Coordinator at (330) 971-7597 for a customized estimate of patient responsibility based upon your insurance. Regular business hours are Monday - Friday, 8 a.m. - 4:30 p.m.**

Western Reserve Hospital offers financial assistance through the Ohio Hospital Care Assurance Program, WRH's Charity and Uninsured Patient Charity Programs. For information, contact Patient Financial Services at (330) 255-3101. The prices presented below are correct as of January 1, 2020.

Room & Board - Per Day Charges	
Medical / Surgical - Semi Private	\$3,761
Medical / Surgical - Private	\$3,891
Telemetry Charge	\$6,968
Intensive Care	\$8,603

Observation - Hourly Charges	
Low Complexity	\$151
Moderate Complexity	\$278
High Complexity	\$292

Emergency Department Charges

Emergency Department Charges are based on the level of emergency care provided to 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 supplies, drugs or other ancillary procedures that may be required for a particular emergency treatment. Services provided by Emergency physicians will be billed by the physicians.

Emergency Department			
Level 1	\$1,040	Level 4	\$2,704
Level 2	\$1,352	Level 5	\$3,952
Level 3	\$1,664		

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Operating Room Charges

Operating Room charges are based on the complexity level, with minor 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 included, and will be billed separately by those physicians.

Operating Room Charges		
Complexity Level	First Hour Charge	Additional Min.
Minor	\$4,558	\$51
Minor - Complex	\$10,976	\$54
Major	\$12,203	\$57
Major - Complex	\$14,245	\$62

The following charges reflect the most common services offered by these departments of Western Reserve Hospital. Patients may have additional charges, depending on the service(s) performed.

Physical Therapy			
Therapeutic Activity, each 15 min	\$308	Neuromuscular Therapy, each 15 min	\$308
Therapeutic Procedure, each 15 min	\$250	Gait Training Therapy, each 15 min	\$250
Work Conditioning, each 15 min	\$98	Manual Therapy, each 15 min	\$308
Aquatic Therapy, each 15 min	\$308	Phys. Therapy Evaluation - Low Complexity	\$572
Electrical Stimulation	\$278	Phys. Therapy Evaluation - Mod Complexity	\$584

Occupational Therapy			
Therapeutic Activities, each 15 min	\$308	Occ. Therapy Evaluation - Low Complexity	\$572
Self Care Management Training	\$249	Ultrasound, each 15 min	\$130
Manual Therapy, each 15 min	\$308	Wheelchair mobility, each 15 min	\$250
Fluidotherapy	\$235	Orthotic / Splint Fitting	\$210
Therapeutic Procedure, each 15 min	\$250	Orthotic / Splint Management	\$250

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Respiratory Therapy

Aerosol Treatment (Inhalation Therapy)	\$582
Arterial Blood Gas (ABG) Analysis	\$613
Arterial Blood Draw for Diagnosis	\$1,246
Spirometry	\$773
Six Minute Walk Test	\$524
Bronchoprovocation Study	\$4,084
Complete Pulmonary Function Test (Spirometry, Lung Volumes, Diffusion Capacity Evaluation)	\$2,974
Complete Pulmonary Function w/Bronchodilator Test (Bronchospasm, Lung Volumes, Diffused Capacity)	\$3,515
Bronchoprovocation Study w/Lung Volumes & DLCO (Bronchoprovocation, Lung Volumes, Diffused Capacity)	\$6,285

Sleep Laboratory

Polysomnography, 4 or more Parameters, >6 yrs. old	\$11,189
Polysomnography with CPAP/BIPAP, 4 or more Parameters, >6 yrs. old	\$10,351

Pain Medicine

New Patient, Office Visit, Level 2	\$355
New Patient, Office Visit, Level 3	\$478
New Patient, Office Visit, Level 4	\$561
New Patient, Office Visit, Level 5	\$654
Established Patient, Office Visit, Level 1	\$237
Established Patient, Office Visit, Level 2	\$322
Established Patient, Office Visit, Level 3	\$435
Established Patient, Office Visit, Level 4	\$509
Established Patient, Office Visit, Level 5	\$595
Injection, Single or Multiple Trigger Points, 1-2 Muscles	\$1,121
Injection, Single or Multiple Trigger Points, 3 or More Muscles	\$1,160
Aspiration or Injection, Major Joint or Bursa	\$1,900
Injection, Major Joint with Ultrasound	\$2,088
Radiofrequency Ablation	\$2,455
Radiofrequency Ablation, Bilateral	\$3,683
Injection, Paravertebral Facet Joint, Cervical or Thoracic, with Imaging	\$4,072
Injection, Sacroiliac Joint, Anesthetic / Steroid, with Arthrography	\$4,842
Injection, Foramen Epidural, Lumbar or Sacral, Single	\$4,842
Injection, Paravertebral Facet Joint with Imaging Guidance, Bilateral	\$6,285
Injection, Epidural or Subcutaneous, Lumbar or Sacral with Imaging	\$7,090
Other Peripheral Nerve Block	\$7,090
Greater Occipital Nerve Block, Bilateral	\$9,690

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Imaging Services

The following charges reflect the hospital's 30 most common imaging services.

X - Ray and Radiological Services

CT Abdomen and Pelvis with Contrast	\$10,998	Ultrasound Abdomen Limited	\$1,508
CT Abdomen and Pelvis w/o Contrast	\$9,055	Ultrasound Retroperitoneal Complete	\$1,628
CT Brain w/o Contrast	\$4,524	XR Abdomen Single AP View	\$598
CT Cervical Spine w/o contrast	\$4,524	XR Ankle 3 or more Views	\$1,125
CT Chest w/o Contrast	\$4,524	XR Chest PA and Lateral	\$742
CT Chest with Contrast	\$5,155	XR Chest Single View	\$628
CT Maxillofacial w/o Enhance	\$4,265	XR Foot Complete 3 or More Views	\$1,262
CTA Chest with & w/o Contrast	\$7,562	XR Hand 3 or More Views	\$840
MRA Head w/o Contrast	\$6,453	XR Hip Complete 2-3 Views	\$801
MRI Brain w/o Contrast	\$7,696	XR Knee Complete 4 or More Views	\$1,445
MRI Brain with and w/o Contrast	\$11,146	XR Lumbar Spine 2 or 3 Views	\$1,221
MRI Spinal Canal Cervical w/o Contrast	\$6,453	XR Lumbar Spine 4 or More Views	\$1,445
MRI Spine Lumbar w/o Contrast	\$6,453	XR Shoulder 2 or More Views	\$774
Ultrasound Transvaginal	\$1,628	XR Spine - Cervical 4 or More Views	\$1,262
Ultrasound Abdomen Complete	\$2,126	XR Wrist Complete 3 or More Views	\$846

Laboratory Services

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

Laboratory Services

Auto Erythrocyte Sed Rate	\$112	Lactic Acid	\$333
Bacterial Urine Culture, Quant. Count	\$347	Lipase	\$317
Basic Metabolic Panel	\$364	Lipid Profile	\$368
Blood Draw Fee	\$51	Magnesium	\$175
CBC w/o Differential	\$214	Partial Thromboplastin Time	\$206
CBC with Differential	\$180	Phosphorus - Inorganic	\$138
Comprehensive Metabolic Panel	\$426	Pregnancy Test - Urine HCG	\$359
Culture Strep	\$289	Procalcitonin	\$258
Ferritin	\$362	Prostate Specific Antigen - PSA Screening	\$304
Free Thyroxine	\$349	Prothrombin Time	\$142
Hemoglobin A1C	\$301	Rapid Strep	\$229
Hematocrit	\$101	Thyroid Stimulating Hormone	\$280
Hemoglobin	\$99	Troponin, Quantitative	\$433
Influenza	\$197	Urinalysis with Microscopy	\$181
Hepatic Function Panel	\$301	Vitamin B-12 Level	\$484

Hospital Billing Policies

Your insurance providers, including Medicare, Medicaid, other primary insurance providers and secondary insurance providers, are billed by Western Reserve Hospital before a bill is sent to you. Interest is not charged on any balance due after insurance repayments are received. We will send you a 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, please contact Patient Financial Services at 330-255-3101 to discuss applying for financial assistance or to arrange for a payment plan. Emergency Services will never be delayed or withheld on the basis of a patient's ability to pay.



