

| Service Description | Gross Charge | Negotiated Rates: | | | | | | | | | | Contracted but Rates are set by Government: | | | | | | | |
|----------------------------|---|---------------------------|---------------------------|------------------|------------------------------|---|--|-----------------------|--------------------------------|----------------------------|---|---|---|------------------------------------|--|------------------------|---------------------------|--------------------|--------------|
| | | Cash Price* | Calc | Calc | Commercial | Commercial | Commercial | Commercial | Commercial | Commercial | Commercial | Govt | Medicaid HMO | Medicaid HMO | Medicaid HMO | Medicare Advantage | Medicare Advantage | Medicare Advantage | |
| | | Minimum Negotiated Charge | Maximum Negotiated Charge | Aetna Commercial | Blue Care Network Commercial | Blue Cross Blue Shield of Michigan Commercial | Health Alliance Plan Commercial (includes ASR) | Priority - Commercial | United HealthCare - Commercial | Cofinity (PHSC, MultiPlan) | HealthCare - Veteran Affairs Community Care Program | Meridian - Medicaid HMO | United HealthCare Community Plan - Medicaid HMO | Blue Cross Complete - Medicaid HMO | Blue Shield of Michigan - Medicare Advantage | HAP Medicare Advantage | Humana Medicare Advantage | | |
| SURGICAL SVC 70 CMS | | | | | | | | | | | | | | | | | | | |
| SERVICE NOT OFFERED | Removal of 1 or more breast growth, open procedure | SERVICE NOT OFFERED | | | | | | | | | | | | | | | | | |
| SERVICE NOT PERFORMED | SHOULDER ARTHROSCOPY | SERVICE NOT PERFORMED | | | | | | | | | | | | | | | | | |
| OP PROCEDURE | ARTHROSCOPY KNEE W/MENISECTOMY | | | | | | | | | | | | | | | | | | |
| | OPERATING ROOM | 2702 | | | | | | | | | | | | | | | | | |
| | RECOVERY ROOM | 517 | | | | | | | | | | | | | | | | | |
| | HOSPITAL ANCILLARY | 513 | | | | | | | | | | | | | | | | | |
| | ANESTHESIA | 798 | | | | | | | | | | | | | | | | | |
| | PRO FEE CRNA | 1926 | | | | | | | | | | | | | | | | | |
| | SURGEON FEE | 1155 | | | | | | | | | | | | | | | | | |
| | TOTAL | 7611 | 7,611 | 7,208 | 7,437 | 7,436 | 7,208 | 7,208 | 7,390 | 7,437 | 7,421 | 7,436 | 5,617 | 1,804 | 1,926 | 2,466 | 5,754 | 5,381 | 5,419 |
| SERVICE NOT OFFERED | TONSILECTOMY AND ADENOIDECTOMY | SERVICE NOT OFFERED | | | | | | | | | | | | | | | | | |
| OP PROC FAC FEE | UPPER GASTROINTESTINAL ENDOSCOPY | | | | | | | | | | | | | | | | | | |
| | OPERATING ROOM | 2280 | | | | | | | | | | | | | | | | | |
| | RECOVERY ROOM | 437 | | | | | | | | | | | | | | | | | |
| | HOSPITAL ANCILLARY | 22 | | | | | | | | | | | | | | | | | |
| | ANESTHESIA | 798 | | | | | | | | | | | | | | | | | |
| | PRO FEE CRNA | 636 | | | | | | | | | | | | | | | | | |
| | SURGEON FEE SEPARATELY BILLED | | | | | | | | | | | | | | | | | | |
| | TOTAL | 4173 | 4,173 | 3,952 | 4,078 | 4,077 | 3,952 | 3,952 | 4,052 | 4,078 | 4,069 | 4,077 | 3,080 | 989 | 1,056 | 1,352 | 3,155 | 2,950 | 2,971 |
| OP PROC FAC FEE | ESOPHAGOGASTRODUODENOSCOPY (EGD) WITH BIOPSY | | | | | | | | | | | | | | | | | | |
| | OPERATING ROOM | 2179 | | | | | | | | | | | | | | | | | |
| | RECOVERY ROOM | 437 | | | | | | | | | | | | | | | | | |
| | HOSPITAL ANCILLARY | 76 | | | | | | | | | | | | | | | | | |
| | ANESTHESIA | 798 | | | | | | | | | | | | | | | | | |
| | PRO FEE CRNA | 548 | | | | | | | | | | | | | | | | | |
| | SURGEON FEE SEPARATELY BILLED | | | | | | | | | | | | | | | | | | |
| | PATHOLOGY AND PRO FEE PATH | 700 | | | | | | | | | | | | | | | | | |
| | TOTAL | 4738 | 4,738 | 4,487 | 4,630 | 4,629 | 4,487 | 4,487 | 4,601 | 4,630 | 4,620 | 4,629 | 3,497 | 1,123 | 1,199 | 1,535 | 3,582 | 3,350 | 3,373 |
| OP PROC FAC FEE | COLONOSCOPY SCREENING | | | | | | | | | | | | | | | | | | |
| | OPERATING ROOM | 1996 | | | | | | | | | | | | | | | | | |
| | RECOVERY ROOM | 437 | | | | | | | | | | | | | | | | | |
| | HOSPITAL ANCILLARY | 56 | | | | | | | | | | | | | | | | | |
| | ANESTHESIA | 798 | | | | | | | | | | | | | | | | | |
| | PRO FEE CRNA | 493 | | | | | | | | | | | | | | | | | |
| | SURGEON FEE IS CHARGED SEPARATELY | | | | | | | | | | | | | | | | | | |
| | TOTAL | 3780 | 3,780 | 3,580 | 3,694 | 3,693 | 3,580 | 3,580 | 3,670 | 3,694 | 3,686 | 3,693 | 2,790 | 896 | 956 | 1,225 | 2,858 | 2,672 | 2,691 |
| OP PROC FAC FEE | COLONOSCOPY WITH BIOPSY | | | | | | | | | | | | | | | | | | |
| | OPERATING ROOM | 2367 | | | | | | | | | | | | | | | | | |
| | RECOVERY ROOM | 437 | | | | | | | | | | | | | | | | | |
| | HOSPITAL ANCILLARY | 305 | | | | | | | | | | | | | | | | | |
| | ANESTHESIA | 798 | | | | | | | | | | | | | | | | | |
| | PRO FEE CRNA | 513 | | | | | | | | | | | | | | | | | |
| | PATHOLOGY FAC AND PRO FEE | 414 | | | | | | | | | | | | | | | | | |
| | SURGEON FEE IS CHARGED SEPARATELY | | | | | | | | | | | | | | | | | | |
| | TOTAL | 4834 | 4,834 | 4,578 | 4,724 | 4,723 | 4,578 | 4,578 | 4,694 | 4,724 | 4,713 | 4,723 | 3,567 | 1,146 | 1,223 | 1,566 | 3,655 | 3,418 | 3,442 |
| OP PROC FAC FEE | COLONOSCOPY WITH POLYP REMOVAL | | | | | | | | | | | | | | | | | | |
| | OPERATING ROOM | 2367 | | | | | | | | | | | | | | | | | |
| | RECOVERY ROOM | 437 | | | | | | | | | | | | | | | | | |
| | HOSPITAL ANCILLARY | 305 | | | | | | | | | | | | | | | | | |
| | ANESTHESIA | 798 | | | | | | | | | | | | | | | | | |
| | PRO FEE CRNA | 513 | | | | | | | | | | | | | | | | | |
| | PATHOLOGY FAC AND PRO FEE | 414 | | | | | | | | | | | | | | | | | |
| | SURGEON FEE IS CHARGED SEPARATELY | | | | | | | | | | | | | | | | | | |
| | TOTAL | 4834 | 4,834 | 4,578 | 4,724 | 4,723 | 4,578 | 4,578 | 4,694 | 4,724 | 4,713 | 4,723 | 3,567 | 1,146 | 1,223 | 1,566 | 3,655 | 3,418 | 3,442 |
| SERVICE NOT OFFERED | ULTRASOUND OF LARGE BOWEL | SERVICE NOT OFFERED | | | | | | | | | | | | | | | | | |
| OP PROC FAC FEE | LAPAROSCOPIC CHOLECYSTECTOMY | | | | | | | | | | | | | | | | | | |
| | OPERATING ROOM | 4231 | | | | | | | | | | | | | | | | | |

| | | Negotiated Rates: | | | | | | | | | | Contracted but Rates are set by Government: | | | | | | |
|-----------------------------------|--|---------------------|---------------------------|---------------------------|------------------|------------------------------|---|--|-----------------------|--------------------------------|----------------------------|---|-------------------------|---|------------------------------------|--|------------------------|---------------------------|
| | | Calc | Calc | Commercial | Commercial | Commercial | Commercial | Commercial | Commercial | Commercial | Commercial | Govt | Medicaid HMO | Medicaid HMO | Medicaid HMO | Medicare Advantage | Medicare Advantage | Medicare Advantage |
| Service Description | Gross Charge | Cash Price* | Minimum Negotiated Charge | Maximum Negotiated Charge | Aetna Commercial | Blue Care Network Commercial | Blue Cross Blue Shield of Michigan Commercial | Health Alliance Plan Commercial (includes ASR) | Priority - Commercial | United HealthCare - Commercial | Cofinity (PHSC, MultiPlan) | HealthCare - Veteran Affairs Community Care Program | Meridian - Medicaid HMO | United HealthCare Community Plan - Medicaid HMO | Blue Cross Complete - Medicaid HMO | Blue Shield of Michigan - Medicare Advantage | HAP Medicare Advantage | Humana Medicare Advantage |
| RECOVERY ROOM | 571 | | | | | | | | | | | | | | | | | |
| HOSPITAL ANCILLARY | 1560 | | | | | | | | | | | | | | | | | |
| ANESTHESIA | 808 | | | | | | | | | | | | | | | | | |
| PRO FEE CRNA | 994 | | | | | | | | | | | | | | | | | |
| PATHOLOGY FAC AND PRO FEE | 186 | | | | | | | | | | | | | | | | | |
| SURGEON FEE IS CHARGED SEPARATELY | | | | | | | | | | | | | | | | | | |
| TOTAL | 8350 | 8,350 | 7,907 | 8,160 | 8,158 | 7,907 | 7,907 | 8,108 | 8,160 | 8,141 | 8,158 | 6,162 | 1,979 | 2,113 | 2,705 | 6,313 | 5,903 | 5,945 |
| OP PROC FAC FEE | REPAIR OF INGUINAL HERNIA AGE 5 AND UP | | | | | | | | | | | | | | | | | |
| OPERATING ROOM | 4144 | | | | | | | | | | | | | | | | | |
| RECOVERY ROOM | 575 | | | | | | | | | | | | | | | | | |
| HOSPITAL ANCILLARY | 3265 | | | | | | | | | | | | | | | | | |
| ANESTHESIA | 798 | | | | | | | | | | | | | | | | | |
| PRO FEE CRNA | 633 | | | | | | | | | | | | | | | | | |
| SURGEON FEE IS CHARGED SEPARATELY | | | | | | | | | | | | | | | | | | |
| TOTAL | 9415 | 9,415 | 8,916 | 9,200 | 9,198 | 8,916 | 8,916 | 9,142 | 9,200 | 9,180 | 9,198 | 6,948 | 2,231 | 2,382 | 3,050 | 7,118 | 6,656 | 6,703 |
| SERVICE NOT OFFERED | BIOPSY OF PROSTATE GLAND | SERVICE NOT OFFERED | | | | | | | | | | | | | | | | |
| SERVICE NOT OFFERED | SURGICAL REMOVAL OF PROSTATE GLAND | SERVICE NOT OFFERED | | | | | | | | | | | | | | | | |
| SERVICE NOT OFFERED | INJECTION OF ANESTHETIC/STEROID DRUG INTO SPINE | SERVICE NOT OFFERED | | | | | | | | | | | | | | | | |
| SERVICE NOT OFFERED | REMOVAL OF RECURRING CATARACT IN LENS CAPSULE USING LASER | SERVICE NOT OFFERED | | | | | | | | | | | | | | | | |
| OP PROC FAC FEE | CATARACT SURGERY | | | | | | | | | | | | | | | | | |
| OPERATING ROOM | 3628 | | | | | | | | | | | | | | | | | |
| RECOVERY ROOM | 437 | | | | | | | | | | | | | | | | | |
| HOSPITAL ANCILLARY | 1584 | | | | | | | | | | | | | | | | | |
| ANESTHESIA | 798 | | | | | | | | | | | | | | | | | |
| PRO FEE CRNA | 616 | | | | | | | | | | | | | | | | | |
| SURGEON FEE IS CHARGED SEPARATELY | | | | | | | | | | | | | | | | | | |
| TOTAL | 7063 | 7,063 | 6,689 | 6,902 | 6,901 | 6,689 | 6,689 | 6,858 | 6,902 | 6,886 | 6,901 | 5,212 | 1,674 | 1,787 | 2,288 | 5,340 | 4,994 | 5,029 |
| SERVICE NOT OFFERED | LEFT HEART CATHETERIZATION | SERVICE NOT OFFERED | | | | | | | | | | | | | | | | |
| SERVICE NOT OFFERED | SLEEP STUDY | SERVICE NOT OFFERED | | | | | | | | | | | | | | | | |
| SERVICE NOT OFFERED | Injection of Substance Into Spinal Canal of Lower Back | SERVICE NOT OFFERED | | | | | | | | | | | | | | | | |
| SERVICE NOT OFFERED | CARDIAC VALVE AND OTHER MAJOR CARDIOTHORACIC PROC | SERVICE NOT OFFERED | | | | | | | | | | | | | | | | |
| SERVICE NOT OFFERED | SPINAL FUSION EXCEPT CERVICAL | SERVICE NOT OFFERED | | | | | | | | | | | | | | | | |
| SERVICE NOT OFFERED | CERVICAL SPINAL FUSION | SERVICE NOT OFFERED | | | | | | | | | | | | | | | | |
| SERVICE NOT OFFERED | UTERINE AND ADNEXA PROCEDURES | SERVICE NOT OFFERED | | | | | | | | | | | | | | | | |
| Inpatient Services | Total Hip Replacement | | | | | | | | | | | | | | | | | |
| ROOM BOARD 1116 PER DAY X2 | 2321 | | | | | | | | | | | | | | | | | |
| OPERATING ROOM | 4992 | | | | | | | | | | | | | | | | | |
| RECOVERY ROOM | 588 | | | | | | | | | | | | | | | | | |
| ANESTHESIA | 1560 | | | | | | | | | | | | | | | | | |
| CRNA PRO FEE | 2184 | | | | | | | | | | | | | | | | | |
| IMPLANT SUPPLIES | 11431 | | | | | | | | | | | | | | | | | |
| HOSPITAL ANCILLARY | 6438 | | | | | | | | | | | | | | | | | |
| SURGEON PRO FEE | 3061 | | | | | | | | | | | | | | | | | |
| TOTAL | 32575 | 32,575 | 30,849 | 31,832 | 31,826 | 30,849 | 30,849 | 31,630 | 31,832 | 31,761 | 31,826 | 24,040 | 10,391 | 8,241 | 10,554 | 43,162 | 20,555 | 119,485 |
| Inpatient Services | Total Knee Replacement | | | | | | | | | | | | | | | | | |
| INPATIENT SERVICES | MAJOR JOINT REPLACEMENT OR REATTCHMENT OF LOWER EXTREMITY | | | | | | | | | | | | | | | | | |
| ROOM BOARD 1116 PER DAY X2 | 2321 | | | | | | | | | | | | | | | | | |
| OPERATING ROOM | 7019 | | | | | | | | | | | | | | | | | |
| RECOVERY ROOM | 588 | | | | | | | | | | | | | | | | | |
| ANESTHESIA | 2547 | | | | | | | | | | | | | | | | | |
| CRNA PRO FEE | 3172 | | | | | | | | | | | | | | | | | |
| IMPLANT SUPPLIES | 11440 | | | | | | | | | | | | | | | | | |
| HOSPITAL ANCILLARY | 11128 | | | | | | | | | | | | | | | | | |
| SURGEON PRO FEE | 3336 | | | | | | | | | | | | | | | | | |
| TOTAL | 41551 | 41,551 | 39,349 | 40,604 | 40,595 | 39,349 | 39,349 | 40,346 | 40,604 | 40,512 | 40,595 | 30,665 | 13,255 | 10,512 | 13,463 | 55,055 | 26,219 | 152,409 |
| 6901001 | NM MYOCARDIAL PERF SPECT MULTI | 2972 | | | | | | | | | | | | | | | | |
| 6902010 | SESTAMIBI REST | 70 | | | | | | | | | | | | | | | | |
| 6902015 | SESTAMIBI UP TO 40 MCI | 70 | | | | | | | | | | | | | | | | |

| | | | Negotiated Rates: | | | | | | | | | | Contracted but Rates are set by Government: | | | | | | |
|--------------------------|---|--------------|---------------------------|---------------------------|------------------|------------------------------|---|--|-----------------------|--------------------------------|----------------------------|---|---|---|------------------------------------|---|------------------------|---------------------------|--------------------|
| | | | Calc | Calc | Commercial | Commercial | Commercial | Commercial | Commercial | Commercial | Commercial | Commercial | Govt | Medicaid HMO | Medicaid HMO | Medicaid HMO | Medicare Advantage | Medicare Advantage | Medicare Advantage |
| | | | Minimum Negotiated Charge | Maximum Negotiated Charge | Aetna Commercial | Blue Care Network Commercial | Blue Cross Blue Shield of Michigan Commercial | Health Alliance Plan Commercial (includes ASR) | Priority - Commercial | United HealthCare - Commercial | Cofinity (PHSC, MultiPlan) | HealthCare - Veteran Affairs Community Care Program | Meridian - Medicaid HMO | United HealthCare Community Plan - Medicaid HMO | Blue Cross Complete - Medicaid HMO | Blue Cross of Michigan - Medicare Advantage | HAP Medicare Advantage | Humana Medicare Advantage | |
| | Service Description | Gross Charge | Cash Price* | | | | | | | | | | | | | | | | |
| 7301200 | STRESS TEST TREADMILL | 561 | | | | | | | | | | | | | | | | | |
| 13301100 | LEXISCAN | 469 | | | | | | | | | | | | | | | | | |
| 13301107 | STRESS TEST PRO SUPERVISION | 42 | | | | | | | | | | | | | | | | | |
| 13301107 | STRESS TEST PRO INTERPRETATION & REPORT | 27 | | | | | | | | | | | | | | | | | |
| | TOTAL | 4211 | 4,211 | 3,988 | 4,115 | 4,114 | 3,988 | 3,988 | 4,089 | 4,115 | 4,106 | 4,114 | 3,108 | 998 | 1,065 | 1,364 | 3,184 | 2,977 | 2,998 |
| LABORATORY CMS 70 | | | | | | | | | | | | | | | | | | | |
| 5301263 | BASIC METABOLIC PANEL | 113 | | 107 | 110 | 110 | 107 | 107 | 110 | 110 | 110 | 110 | 83 | 27 | 29 | 37 | 85 | 80 | 80 |
| 5301503 | COMPREHENSIVE METABOLIC PANEL | 198 | | 188 | 193 | 193 | 188 | 188 | 192 | 193 | 193 | 193 | 146 | 47 | 50 | 64 | 150 | 140 | 141 |
| SVC NOT OFFERED | | | | | | | | | | | | | | | | | | | |
| 5302493 | LIPID PANEL | 156 | 156 | 148 | 152 | 148 | 148 | 148 | 151 | 152 | 152 | 152 | 115 | 37 | 39 | 51 | 118 | 110 | 111 |
| 5302568 | RENAL PROFILE | 175 | 175 | 166 | 171 | 171 | 166 | 166 | 170 | 171 | 171 | 171 | 129 | 41 | 44 | 57 | 132 | 124 | 125 |
| 5301859 | HEPATIC FUNCTION | 163 | 163 | 154 | 159 | 159 | 154 | 154 | 158 | 159 | 159 | 159 | 120 | 39 | 41 | 53 | 123 | 115 | 116 |
| 5302105 | TSH3 | 147 | 147 | 139 | 144 | 144 | 139 | 139 | 143 | 144 | 144 | 144 | 108 | 35 | 37 | 48 | 111 | 104 | 105 |
| 5302360 | .CBC W/ AUTO DIFF | 77 | 77 | 73 | 75 | 75 | 73 | 73 | 75 | 75 | 75 | 75 | 57 | 18 | 19 | 25 | 58 | 54 | 55 |
| 5301016 | .CBC | 69 | 69 | 65 | 67 | 67 | 65 | 65 | 67 | 67 | 67 | 67 | 51 | 16 | 17 | 22 | 52 | 49 | 49 |
| 5301115 | PROTHROMBIN | 55 | 55 | 52 | 54 | 54 | 52 | 52 | 53 | 54 | 54 | 54 | 41 | 13 | 14 | 18 | 42 | 39 | 39 |
| 5301123 | ACTIVATED PTT | 67 | 67 | 63 | 65 | 65 | 63 | 63 | 65 | 65 | 65 | 65 | 49 | 16 | 17 | 22 | 51 | 47 | 48 |
| 5301883 | Urinalysis Using Microscope | 34 | 34 | 32 | 33 | 33 | 32 | 32 | 33 | 33 | 33 | 33 | 25 | 8 | 9 | 11 | 26 | 24 | 24 |
| 5301893 | Urinalysis, Automated | 16 | 16 | 15 | 16 | 16 | 15 | 15 | 16 | 16 | 16 | 16 | 12 | 4 | 4 | 5 | 12 | 11 | 11 |
| 5301941 | PSA (Prostate Specific Antigens) | 121 | 121 | 115 | 118 | 118 | 115 | 115 | 117 | 118 | 118 | 118 | 89 | 29 | 31 | 39 | 91 | 86 | 86 |
| LABORATORY | | | | | | | | | | | | | | | | | | | |
| 5300420 | SARS COV 2 IgG ANTIBODY | 103 | 103 | 98 | 101 | 101 | 98 | 98 | 100 | 101 | 100 | 101 | 76 | 24 | 26 | 33 | 78 | 73 | 73 |
| 5300062 | INFLUENZA A AG | 33 | 33 | 31 | 32 | 32 | 31 | 31 | 32 | 32 | 32 | 32 | 24 | 8 | 8 | 11 | 25 | 23 | 23 |
| 5300063 | INFLUENZA B AG | 33 | 33 | 31 | 32 | 32 | 31 | 31 | 32 | 32 | 32 | 32 | 24 | 8 | 8 | 11 | 25 | 23 | 23 |
| 5302261 | .BLOOD DRAWING FEE | 54 | 54 | 51 | 53 | 53 | 51 | 51 | 52 | 53 | 53 | 53 | 40 | 13 | 14 | 17 | 41 | 38 | 38 |
| 5301180 | ELECTROLYTES | 107 | 107 | 101 | 105 | 105 | 101 | 101 | 104 | 105 | 104 | 105 | 79 | 25 | 27 | 35 | 81 | 76 | 76 |
| 5304158 | HEPATITIS ACUTE PANEL W/REFLEX | 424 | 424 | 402 | 414 | 414 | 402 | 402 | 412 | 414 | 413 | 414 | 313 | 100 | 107 | 137 | 321 | 300 | 302 |
| 5301636 | DIGOXIN | 119 | 119 | 113 | 116 | 116 | 113 | 113 | 116 | 116 | 116 | 116 | 88 | 28 | 30 | 39 | 90 | 84 | 85 |
| 5302162 | VALPROIC ACID (DEPAKOTE) | 144 | 144 | 136 | 141 | 141 | 136 | 136 | 140 | 141 | 140 | 141 | 106 | 34 | 36 | 47 | 109 | 102 | 103 |
| 5300128 | GABAPENTIN, (NEURONTIN) | 114 | 114 | 108 | 111 | 111 | 108 | 108 | 111 | 111 | 111 | 111 | 84 | 27 | 29 | 37 | 86 | 81 | 81 |
| 5300088 | LAMOTRIGINE | 152 | 152 | 144 | 149 | 149 | 144 | 144 | 148 | 149 | 148 | 149 | 112 | 36 | 38 | 49 | 115 | 107 | 108 |
| 5302219 | TACROLIMUS | 125 | 125 | 118 | 122 | 122 | 118 | 118 | 121 | 122 | 122 | 122 | 92 | 30 | 32 | 41 | 95 | 88 | 89 |
| 5300060 | VANCOMYCIN PEAK | 112 | 112 | 106 | 109 | 109 | 106 | 106 | 109 | 109 | 109 | 109 | 83 | 27 | 28 | 36 | 85 | 79 | 80 |
| 5300125 | URINE DRUG SCREEN | 107 | 107 | 101 | 105 | 105 | 101 | 101 | 104 | 105 | 104 | 105 | 79 | 25 | 27 | 35 | 81 | 76 | 76 |
| 5300336 | PH URINE(SO) | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 7 | 2 | 2 | 3 | 7 | 6 | 6 |
| 5309225 | PREGNANCY TEST URINE QUAL | 45 | 45 | 43 | 44 | 44 | 43 | 43 | 44 | 44 | 44 | 44 | 33 | 11 | 11 | 15 | 34 | 32 | 32 |
| 5302535 | ALBUMIN SERUM | 53 | 53 | 50 | 52 | 52 | 50 | 50 | 51 | 52 | 52 | 52 | 39 | 13 | 13 | 17 | 40 | 37 | 38 |
| 5305432 | ALBUMIN BODY FLUID URINE | 49 | 49 | 46 | 48 | 48 | 46 | 46 | 48 | 48 | 48 | 48 | 36 | 12 | 12 | 16 | 37 | 35 | 35 |
| 5304003 | AMMONIA | 133 | 133 | 126 | 130 | 130 | 126 | 126 | 129 | 130 | 130 | 130 | 98 | 32 | 34 | 43 | 101 | 94 | 95 |
| 5301255 | AMYLASE SERUM | 67 | 67 | 63 | 65 | 65 | 63 | 63 | 65 | 65 | 65 | 65 | 49 | 16 | 17 | 22 | 51 | 47 | 48 |
| 5303005 | AMYLASE URINE | 67 | 67 | 63 | 65 | 65 | 63 | 63 | 65 | 65 | 65 | 65 | 49 | 16 | 17 | 22 | 51 | 47 | 48 |
| 5301271 | BILIRUBIN TOTAL | 55 | 55 | 52 | 54 | 54 | 52 | 52 | 53 | 54 | 54 | 54 | 41 | 13 | 14 | 18 | 42 | 39 | 39 |
| 5302311 | BILIRUBIN DIRECT | 50 | 50 | 47 | 49 | 49 | 47 | 47 | 49 | 49 | 49 | 49 | 37 | 12 | 13 | 16 | 38 | 35 | 36 |
| 5300010 | CALCIFEDIOL(25-OH VIT D-3) | 144 | 144 | 136 | 141 | 141 | 136 | 136 | 140 | 141 | 140 | 141 | 106 | 34 | 36 | 47 | 109 | 102 | 103 |
| 5302012 | CALCIUM IONIZED | 125 | 125 | 118 | 122 | 122 | 118 | 118 | 121 | 122 | 122 | 122 | 92 | 30 | 32 | 41 | 95 | 88 | 89 |
| 5303024 | CARBOXYHEMOGLOBIN | 197 | 197 | 187 | 193 | 192 | 187 | 187 | 191 | 193 | 192 | 192 | 145 | 47 | 50 | 64 | 149 | 139 | 140 |
| 5301206 | CEA | 173 | 173 | 164 | 169 | 169 | 164 | 164 | 168 | 169 | 169 | 169 | 128 | 41 | 44 | 56 | 131 | 122 | 123 |
| 5301339 | CPK TOTAL | 73 | 73 | 69 | 71 | 71 | 69 | 69 | 71 | 71 | 71 | 71 | 54 | 17 | 18 | 24 | 55 | 52 | 52 |
| 5303512 | CKMB | 131 | 131 | 124 | 128 | 128 | 124 | 124 | 127 | 128 | 128 | 128 | 97 | 31 | 33 | 42 | 99 | 93 | 93 |
| 5301321 | CREATININE SERUM | 51 | 51 | 48 | 50 | 50 | 48 | 48 | 50 | 50 | 50 | 50 | 38 | 12 | 13 | 17 | 39 | 36 | 36 |
| 5300121 | RANDOM URINE CREATININE | 53 | 53 | 50 | 52 | 52 | 50 | 50 | 51 | 52 | 52 | 52 | 39 | 13 | 13 | 17 | 40 | 37 | 38 |
| 5301297 | VITAMIN B12 | 94 | 94 | 89 | 92 | 92 | 89 | 89 | 91 | 92 | 92 | 92 | 69 | 22 | 24 | 30 | 71 | 66 | 67 |
| 5303064 | ESTRADIOL | 302 | 302 | 286 | 295 | 295 | 286 | 286 | 293 | 295 | 294 | 295 | 223 | 72 | 76 | 98 | 228 | 214 | 215 |
| 5302295 | FERRITIN | 113 | 113 | 107 | 110 | 110 | 107 | 107 | 110 | 110 | 110 | 110 | 83 | 27 | 29 | 37 | 85 | 80 | 80 |
| 5301727 | FOLATE SERUM | 85 | 85 | 80 | 83 | 83 | 80 | 80 | 83 | 83 | 83 | 83 | 63 | 20 | 22 | 28 | 64 | 60 | 61 |
| 5301354 | GLUCOSE | 44 | 44 | 42 | 43 | 43 | 42 | 42 | 43 | 43 | 43 | 43 | 32 | 10 | 11 | 14 | 33 | 31 | 31 |
| 5302451 | GGTP | 67 | 67 | 63 | 65 | 65 | 63 | 63 | 65 | 65 | 65 | 65 | 49 | 16 | 17 | 22 | 51 | 47 | 48 |

| Service Description | Gross Charge | Negotiated Rates: | | | | | | | | | | Contracted but Rates are set by Government: | | | | | | | | |
|---------------------|---------------------------------------|---------------------------|---------------------------|------------------|------------------------------|---|--|-----------------------|--------------------------------|----------------------------|---|---|---|------------------------------------|--|------------------------|---------------------------|--------------------|-----|-----|
| | | Cash Price* | Calc | Calc | Commercial | Commercial | Commercial | Commercial | Commercial | Commercial | Commercial | Govt | Medicaid HMO | Medicaid HMO | Medicaid HMO | Medicare Advantage | Medicare Advantage | Medicare Advantage | | |
| | | Minimum Negotiated Charge | Maximum Negotiated Charge | Aetna Commercial | Blue Care Network Commercial | Blue Cross Blue Shield of Michigan Commercial | Health Alliance Plan - Commercial (includes ASR) | Priority - Commercial | United HealthCare - Commercial | Cofinity (PHSC, MultiPlan) | HealthCare - Veteran Affairs Community Care Program | Meridian - Medicaid HMO | United HealthCare Community Plan - Medicaid HMO | Blue Cross Complete - Medicaid HMO | Blue Shield of Michigan - Medicare Advantage | HAP Medicare Advantage | Humana Medicare Advantage | | | |
| 5300007 | GROWTH HORMONE | 154 | 154 | 146 | 150 | 150 | 146 | 146 | 146 | 150 | 150 | 150 | 150 | 114 | 36 | 39 | 50 | 116 | 109 | 110 |
| 5301230 | HEMOGLOBIN A1C | 68 | 68 | 64 | 66 | 66 | 64 | 64 | 64 | 66 | 66 | 66 | 66 | 50 | 16 | 17 | 22 | 51 | 48 | 48 |
| 5301685 | IRON | 67 | 67 | 63 | 65 | 65 | 63 | 63 | 63 | 65 | 65 | 65 | 65 | 49 | 16 | 17 | 22 | 51 | 47 | 48 |
| 5301677 | IRON & TIBC | 69 | 69 | 65 | 67 | 67 | 65 | 65 | 65 | 67 | 67 | 67 | 67 | 51 | 16 | 17 | 22 | 52 | 49 | 49 |
| 5301388 | LDH | 67 | 67 | 63 | 65 | 65 | 63 | 63 | 63 | 65 | 65 | 65 | 65 | 49 | 16 | 17 | 22 | 51 | 47 | 48 |
| 5301966 | LEAD | 32 | 32 | 30 | 31 | 31 | 30 | 30 | 30 | 31 | 31 | 31 | 31 | 24 | 8 | 8 | 10 | 24 | 23 | 23 |
| 5301602 | LIPASE | 69 | 69 | 65 | 67 | 67 | 65 | 65 | 65 | 67 | 67 | 67 | 67 | 51 | 16 | 17 | 22 | 52 | 49 | 49 |
| 5305478 | LDL DIRECT | 84 | 84 | 80 | 82 | 82 | 80 | 80 | 80 | 82 | 82 | 82 | 82 | 62 | 20 | 21 | 27 | 64 | 59 | 60 |
| 5301669 | MAGNESIUM | 61 | 61 | 58 | 60 | 60 | 58 | 58 | 58 | 59 | 60 | 59 | 60 | 45 | 14 | 15 | 20 | 46 | 43 | 43 |
| 5300124 | BNP,QUANT | 203 | 203 | 192 | 198 | 198 | 192 | 192 | 192 | 197 | 198 | 198 | 198 | 150 | 48 | 51 | 66 | 153 | 144 | 145 |
| 5301396 | ALK PHOSP | 55 | 55 | 52 | 54 | 54 | 52 | 52 | 52 | 53 | 54 | 54 | 54 | 41 | 13 | 14 | 18 | 42 | 39 | 39 |
| 5301594 | PHOSPHORUS | 50 | 50 | 47 | 49 | 49 | 47 | 47 | 47 | 49 | 49 | 49 | 49 | 37 | 12 | 13 | 16 | 38 | 35 | 36 |
| 5301453 | POTASSIUM | 126 | 126 | 119 | 123 | 123 | 119 | 119 | 119 | 122 | 123 | 123 | 123 | 93 | 30 | 32 | 41 | 95 | 89 | 90 |
| 5303118 | PREALBUMIN | 140 | 140 | 133 | 137 | 137 | 133 | 133 | 133 | 136 | 137 | 137 | 137 | 103 | 33 | 35 | 45 | 106 | 99 | 100 |
| 5303121 | PROLACTIN | 186 | 186 | 176 | 182 | 182 | 176 | 176 | 176 | 181 | 182 | 181 | 182 | 137 | 44 | 47 | 60 | 141 | 132 | 132 |
| 5302115 | PROTEIN TOTAL | 53 | 53 | 50 | 52 | 52 | 50 | 50 | 50 | 51 | 52 | 52 | 52 | 39 | 13 | 13 | 17 | 40 | 37 | 38 |
| 5301412 | PROTEIN TOTAL, URINE RAND | 44 | 44 | 42 | 43 | 43 | 42 | 42 | 42 | 43 | 43 | 43 | 43 | 32 | 10 | 11 | 14 | 33 | 31 | 31 |
| 5301446 | SODIUM SERUM | 50 | 50 | 47 | 49 | 49 | 47 | 47 | 47 | 49 | 49 | 49 | 49 | 37 | 12 | 13 | 16 | 38 | 35 | 36 |
| 5302063 | TESTOSTERONE TOTAL | 168 | 168 | 159 | 164 | 164 | 159 | 159 | 159 | 163 | 164 | 164 | 164 | 124 | 40 | 43 | 54 | 127 | 119 | 120 |
| 5300179 | VITAMIN B1 (THIAMINE) | 312 | 312 | 295 | 305 | 305 | 295 | 295 | 295 | 303 | 305 | 304 | 305 | 230 | 74 | 79 | 101 | 236 | 221 | 222 |
| 5301370 | THYROXINE FREE T4 (SO) | 110 | 110 | 104 | 107 | 107 | 104 | 104 | 104 | 107 | 107 | 107 | 107 | 81 | 26 | 28 | 36 | 83 | 78 | 78 |
| 5301461 | AST/SGOT | 53 | 53 | 50 | 52 | 52 | 50 | 50 | 50 | 51 | 52 | 52 | 52 | 39 | 13 | 13 | 17 | 40 | 37 | 38 |
| 5301479 | ALT/SGPT | 53 | 53 | 50 | 52 | 52 | 50 | 50 | 50 | 51 | 52 | 52 | 52 | 39 | 13 | 13 | 17 | 40 | 37 | 38 |
| 5302147 | TRANSFERRIN | 125 | 125 | 118 | 122 | 122 | 118 | 118 | 118 | 121 | 122 | 122 | 122 | 92 | 30 | 32 | 41 | 95 | 88 | 89 |
| 5301552 | TRIGLYCERIDES | 53 | 53 | 50 | 52 | 52 | 50 | 50 | 50 | 51 | 52 | 52 | 52 | 39 | 13 | 13 | 17 | 40 | 37 | 38 |
| 5302246 | T3 UPTAKE | 60 | 60 | 57 | 59 | 59 | 57 | 57 | 57 | 58 | 59 | 59 | 59 | 44 | 14 | 15 | 19 | 45 | 42 | 43 |
| 5302238 | T3 TOTAL, RIA | 103 | 103 | 98 | 101 | 101 | 98 | 98 | 98 | 100 | 101 | 100 | 101 | 76 | 24 | 26 | 33 | 78 | 73 | 73 |
| 5302048 | T3 FREE | 181 | 181 | 171 | 177 | 177 | 171 | 171 | 171 | 176 | 177 | 176 | 177 | 134 | 43 | 46 | 59 | 137 | 128 | 129 |
| 5301097 | T3 REVERSE | 115 | 115 | 109 | 112 | 112 | 109 | 109 | 109 | 112 | 112 | 112 | 112 | 85 | 27 | 29 | 37 | 87 | 81 | 82 |
| 5303146 | TROPONIN I (QUANT) | 154 | 154 | 146 | 150 | 150 | 146 | 146 | 146 | 150 | 150 | 150 | 150 | 114 | 36 | 39 | 50 | 116 | 109 | 110 |
| 5301487 | BUN | 47 | 47 | 45 | 46 | 46 | 45 | 45 | 45 | 46 | 46 | 46 | 46 | 35 | 11 | 12 | 15 | 36 | 33 | 33 |
| 5301495 | URIC ACID BLOOD | 50 | 50 | 47 | 49 | 49 | 47 | 47 | 47 | 49 | 49 | 49 | 49 | 37 | 12 | 13 | 16 | 38 | 35 | 36 |
| 5303016 | BHCG QUANTITATIVE | 142 | 142 | 134 | 139 | 139 | 134 | 134 | 134 | 138 | 139 | 138 | 139 | 105 | 34 | 36 | 46 | 107 | 100 | 101 |
| 5300376 | TESTOSTERONE, TOTAL, FREE, & BIOAVAIL | 94 | 94 | 89 | 92 | 92 | 89 | 89 | 89 | 91 | 92 | 92 | 92 | 69 | 22 | 24 | 30 | 71 | 66 | 67 |
| 5301073 | BLEEDING TIME | 47 | 47 | 45 | 46 | 46 | 45 | 45 | 45 | 46 | 46 | 46 | 46 | 35 | 11 | 12 | 15 | 36 | 33 | 33 |
| 5301042 | MANUAL DIFFERENTIAL | 34 | 34 | 32 | 33 | 33 | 32 | 32 | 32 | 33 | 33 | 33 | 33 | 25 | 8 | 9 | 11 | 26 | 24 | 24 |
| 5301032 | HEMATOCRIT | 36 | 36 | 34 | 35 | 35 | 34 | 34 | 34 | 35 | 35 | 35 | 35 | 27 | 9 | 9 | 12 | 27 | 25 | 26 |
| 5301024 | HEMOGLOBIN | 34 | 34 | 32 | 33 | 33 | 32 | 32 | 32 | 33 | 33 | 33 | 33 | 25 | 8 | 9 | 11 | 26 | 24 | 24 |
| 5301156 | RETICULOCYTE COUNT | 67 | 67 | 63 | 65 | 65 | 63 | 63 | 63 | 65 | 65 | 65 | 65 | 49 | 16 | 17 | 22 | 51 | 47 | 48 |
| 5301040 | WHITE COUNT(WBC) | 43 | 43 | 41 | 42 | 42 | 41 | 41 | 41 | 42 | 42 | 42 | 42 | 32 | 10 | 11 | 14 | 33 | 30 | 31 |
| 5301131 | PLATELET COUNT | 55 | 55 | 52 | 54 | 54 | 52 | 52 | 52 | 53 | 54 | 54 | 54 | 41 | 13 | 14 | 18 | 42 | 39 | 39 |
| 5301164 | SEDIMENTATION RT | 51 | 51 | 48 | 50 | 50 | 48 | 48 | 48 | 50 | 50 | 50 | 50 | 38 | 12 | 13 | 17 | 39 | 36 | 36 |
| 5301123 | ACTIVATED PTT | 67 | 67 | 63 | 65 | 65 | 63 | 63 | 63 | 65 | 65 | 65 | 65 | 49 | 16 | 17 | 22 | 51 | 47 | 48 |
| 5301452 | CRP (CARDIO) HS | 121 | 121 | 115 | 118 | 118 | 115 | 115 | 115 | 117 | 118 | 118 | 118 | 89 | 29 | 31 | 39 | 91 | 86 | 86 |
| 5301792 | HELICOBACTER PYLORI AB IgG | 230 | 230 | 218 | 225 | 225 | 218 | 218 | 218 | 223 | 225 | 224 | 225 | 170 | 55 | 58 | 75 | 174 | 163 | 164 |
| 5301008 | HEPATITIS B SURF AB QUAL/QUANT | 98 | 98 | 93 | 96 | 96 | 93 | 93 | 93 | 95 | 96 | 96 | 96 | 72 | 23 | 25 | 32 | 74 | 69 | 70 |
| 5303012 | ANTI-THYROGLOBULIN AB | 197 | 197 | 187 | 193 | 193 | 187 | 187 | 187 | 191 | 193 | 192 | 192 | 145 | 47 | 50 | 64 | 149 | 139 | 140 |
| 5303076 | HEPATITIS C AB | 204 | 204 | 193 | 199 | 199 | 193 | 193 | 193 | 198 | 199 | 199 | 199 | 151 | 48 | 52 | 66 | 154 | 144 | 145 |
| 5302543 | BB ANTIBODY SCREEN | 67 | 67 | 63 | 65 | 65 | 63 | 63 | 63 | 65 | 65 | 65 | 65 | 49 | 16 | 17 | 22 | 51 | 47 | 48 |
| 5302014 | BB ABO TYPING | 51 | 51 | 48 | 50 | 50 | 48 | 48 | 48 | 50 | 50 | 50 | 50 | 38 | 12 | 13 | 17 | 39 | 36 | 36 |
| 5302154 | CULTURE THROAT | 98 | 98 | 93 | 96 | 96 | 93 | 93 | 93 | 95 | 96 | 96 | 96 | 72 | 23 | 25 | 32 | 74 | 69 | 70 |
| 5301917 | CULTURE URINE | 67 | 67 | 63 | 65 | 65 | 63 | 63 | 63 | 65 | 65 | 65 | 65 | 49 | 16 | 17 | 22 | 51 | 47 | 48 |
| 5300021 | CULTURE ID DEFINITIVE | 57 | 57 | 54 | 56 | 56 | 54 | 54 | 54 | 55 | 56 | 56 | 56 | 42 | 14 | 14 | 18 | 43 | 40 | 41 |
| 5300153 | RSV Influenza A/B (PCR) | 124 | 124 | 117 | 121 | 121 | 117 | 117 | 117 | 120 | 121 | 121 | 121 | 92 | 29 | 31 | 40 | 94 | 88 | 88 |
| 5300236 | CANDIDA DNA PROBE | 72 | 72 | 68 | 70 | 70 | 68 | 68 | 68 | 70 | 70 | 70 | 70 | 53 | 17 | 18 | 23 | 54 | 51 | 51 |
| 5300040 | HPV W / GENOTYPE | 343 | 343 | 325 | 335 | 335 | 325 | 325 | 325 | 333 | 335 | 334 | 335 | 253 | 81 | 87 | 111 | 259 | 243 | 244 |
| 5300426 | SARS-COV-2 PCR (COVID-19) | 161 | 161 | 152 | 157 | 157 | 152 | 152 | 152 | 156 | 157 | 157 | 157 | 119 | 38 | 41 | 52 | 122 | 114 | 115 |
| 5305471 | STREP SCREEN | 33 | 33 | 31 | 32 | 32 | 31 | 31 | 31 | 32 | 32 | 32 | 32 | 24 | 8 | 8 | 11 | 25 | 23 | 23 |

| | | Negotiated Rates: | | | | | | | | | | Contracted but Rates are set by Government: | | | | | | |
|---------------------|---------------------------------|-------------------|---------------------------|---------------------------|------------------|------------------------------|---|--|-----------------------|--------------------------------|----------------------------|---|-------------------------|---|------------------------------------|---|------------------------|---------------------------|
| | | Calc | Calc | Commercial | Commercial | Commercial | Commercial | Commercial | Commercial | Commercial | Commercial | Govt | Medicaid HMO | Medicaid HMO | Medicaid HMO | Medicare Advantage | Medicare Advantage | Medicare Advantage |
| Service Description | Gross Charge | Cash Price* | Minimum Negotiated Charge | Maximum Negotiated Charge | Aetna Commercial | Blue Care Network Commercial | Blue Cross Blue Shield of Michigan Commercial | Health Alliance Plan - Commercial (includes ASR) | Priority - Commercial | United HealthCare - Commercial | Cofinity (PHSC, MultiPlan) | HealthCare - Veteran Affairs Community Care Program | Meridian - Medicaid HMO | United HealthCare Community Plan - Medicaid HMO | Blue Cross Complete - Medicaid HMO | Blue Cross of Michigan - Medicare Advantage | HAP Medicare Advantage | Humana Medicare Advantage |
| 5301560 | DILANTIN TOTAL | 122 | 116 | 119 | 119 | 116 | 116 | 118 | 119 | 119 | 119 | 90 | 29 | 31 | 40 | 92 | 86 | 87 |
| 5305149 | DILANTIN FREE | 126 | 119 | 123 | 123 | 119 | 119 | 122 | 123 | 123 | 123 | 93 | 30 | 32 | 41 | 95 | 89 | 90 |
| 5303148 | VANCOMYCIN | 112 | 106 | 109 | 109 | 106 | 106 | 109 | 109 | 109 | 109 | 83 | 27 | 28 | 36 | 85 | 79 | 80 |
| 5301248 | ACETONE SERUM | 50 | 47 | 49 | 49 | 47 | 47 | 49 | 49 | 49 | 49 | 37 | 12 | 13 | 16 | 38 | 35 | 36 |
| 5302536 | MICROALBUMIN URINE | 46 | 44 | 45 | 45 | 44 | 44 | 45 | 45 | 45 | 45 | 34 | 11 | 12 | 15 | 35 | 33 | 33 |
| 5300194 | AMINO ACIDS, URINE (QUANT) | 233 | 221 | 228 | 228 | 221 | 221 | 226 | 228 | 227 | 228 | 172 | 55 | 59 | 75 | 176 | 165 | 166 |
| 5303222 | ACE | 215 | 204 | 210 | 210 | 204 | 204 | 209 | 210 | 210 | 210 | 159 | 51 | 54 | 70 | 163 | 152 | 153 |
| 5300688 | VITAMIN C | 110 | 104 | 107 | 107 | 104 | 104 | 107 | 107 | 107 | 107 | 81 | 26 | 28 | 36 | 83 | 78 | 78 |
| 5301909 | OCCULT BLOOD SCREEN | 34 | 32 | 33 | 33 | 32 | 32 | 33 | 33 | 33 | 33 | 25 | 8 | 9 | 11 | 26 | 24 | 24 |
| 5301289 | CALCIUM | 50 | 47 | 49 | 49 | 47 | 47 | 49 | 49 | 49 | 49 | 37 | 12 | 13 | 16 | 38 | 35 | 36 |
| 5309226 | CHLORIDE | 50 | 47 | 49 | 49 | 47 | 47 | 49 | 49 | 49 | 49 | 37 | 12 | 13 | 16 | 38 | 35 | 36 |
| 5301313 | CHOLESTEROL | 53 | 50 | 52 | 52 | 50 | 50 | 51 | 52 | 52 | 52 | 39 | 13 | 13 | 17 | 40 | 37 | 38 |
| 5305543 | EPINEPHRINE | 147 | 139 | 144 | 144 | 139 | 139 | 143 | 144 | 143 | 144 | 108 | 35 | 37 | 48 | 111 | 104 | 105 |
| 5301701 | CPK ISOENZYMES | 124 | 117 | 121 | 121 | 117 | 117 | 120 | 121 | 121 | 121 | 92 | 29 | 31 | 40 | 94 | 88 | 88 |
| 5303050 | CREATININE URINE 24HR | 53 | 50 | 52 | 52 | 50 | 50 | 51 | 52 | 52 | 52 | 39 | 13 | 13 | 17 | 40 | 37 | 38 |
| 5301347 | CREATININE CLEARANCE | 110 | 104 | 107 | 107 | 104 | 104 | 107 | 107 | 107 | 107 | 81 | 26 | 28 | 36 | 83 | 78 | 78 |
| 5305557 | VIT D,1,25-DIHYDROXY | 420 | 398 | 410 | 410 | 398 | 398 | 408 | 410 | 410 | 410 | 310 | 100 | 106 | 136 | 318 | 297 | 299 |
| 5301693 | FOLATE RBC | 99 | 94 | 97 | 97 | 94 | 94 | 96 | 97 | 97 | 97 | 73 | 23 | 25 | 32 | 75 | 70 | 70 |
| 5300297 | ABG ANALYSIS | 190 | 180 | 186 | 186 | 180 | 180 | 184 | 186 | 185 | 186 | 140 | 45 | 48 | 62 | 144 | 134 | 135 |
| 5303067 | FSH | 174 | 165 | 170 | 170 | 165 | 165 | 169 | 170 | 170 | 170 | 128 | 41 | 44 | 56 | 132 | 123 | 124 |
| 5300052 | GLIADIN ANTIBODY IGA | 116 | 110 | 113 | 113 | 110 | 110 | 113 | 113 | 113 | 113 | 86 | 27 | 29 | 38 | 88 | 82 | 83 |
| 5300053 | ELASTASE STOOL | 116 | 110 | 113 | 113 | 110 | 110 | 113 | 113 | 113 | 113 | 86 | 27 | 29 | 38 | 88 | 82 | 83 |
| 5300090 | IA-2 ANTIBODY | 484 | 458 | 473 | 473 | 458 | 458 | 470 | 473 | 472 | 473 | 357 | 115 | 122 | 157 | 366 | 342 | 345 |
| 5300095 | LIPOPROTEIN A | 154 | 146 | 150 | 150 | 146 | 146 | 150 | 150 | 150 | 150 | 114 | 36 | 39 | 50 | 116 | 109 | 110 |
| 5300369 | THYROTROPIN RECEPTOR AB, SERUM | 154 | 146 | 150 | 150 | 146 | 146 | 150 | 150 | 150 | 150 | 114 | 36 | 39 | 50 | 116 | 109 | 110 |
| 5305114 | IMMUNOASSAY RIA | 154 | 146 | 150 | 150 | 146 | 146 | 150 | 150 | 150 | 150 | 114 | 36 | 39 | 50 | 116 | 109 | 110 |
| 5300008 | INSULIN SERUM | 78 | 74 | 76 | 76 | 74 | 74 | 76 | 76 | 76 | 76 | 58 | 18 | 20 | 25 | 59 | 55 | 56 |
| 5300636 | LACTIC ACID | 56 | 53 | 55 | 55 | 53 | 53 | 54 | 55 | 55 | 55 | 41 | 13 | 14 | 18 | 42 | 40 | 40 |
| 5300289 | LEAD URINE | 32 | 30 | 31 | 31 | 30 | 30 | 31 | 31 | 31 | 31 | 24 | 8 | 8 | 10 | 24 | 23 | 23 |
| 5302279 | LIPOPROTEIN | 132 | 125 | 129 | 129 | 125 | 125 | 128 | 129 | 129 | 129 | 97 | 31 | 33 | 43 | 100 | 93 | 94 |
| 5302258 | VAP CHOLESTEROL | 135 | 128 | 132 | 132 | 128 | 128 | 131 | 132 | 132 | 132 | 100 | 32 | 34 | 44 | 102 | 95 | 96 |
| 5302303 | HDL | 54 | 51 | 53 | 53 | 51 | 51 | 52 | 53 | 53 | 53 | 40 | 13 | 14 | 17 | 41 | 38 | 38 |
| 5300233 | MAGNESIUM, RBC | 61 | 58 | 60 | 60 | 58 | 58 | 59 | 60 | 60 | 60 | 45 | 14 | 15 | 20 | 46 | 43 | 43 |
| 5301130 | CORTISONE 24 HOUR URINE | 229 | 217 | 224 | 224 | 217 | 217 | 222 | 224 | 223 | 224 | 169 | 54 | 58 | 74 | 173 | 162 | 163 |
| 5300403 | NICKEL SERUM | 79 | 75 | 77 | 77 | 75 | 75 | 77 | 77 | 77 | 77 | 58 | 19 | 20 | 26 | 60 | 56 | 56 |
| 5302015 | ALKALINE PHOSPHATASE ISOENZYMES | 74 | 70 | 72 | 72 | 70 | 70 | 72 | 72 | 72 | 72 | 55 | 18 | 19 | 24 | 56 | 52 | 53 |
| 5304000 | PHOSPHORUS URINE | 57 | 54 | 56 | 56 | 54 | 54 | 55 | 56 | 56 | 56 | 42 | 14 | 14 | 18 | 43 | 40 | 41 |
| 5300293 | POTASSIUM, RBC | 126 | 119 | 123 | 123 | 119 | 119 | 122 | 123 | 123 | 123 | 93 | 30 | 32 | 41 | 95 | 89 | 90 |
| 5303117 | POTASSIUM RANDOM URINE | 73 | 69 | 71 | 71 | 69 | 69 | 71 | 71 | 71 | 71 | 54 | 17 | 18 | 24 | 55 | 52 | 52 |
| 5300413 | VITAMIN B2 RIBOFLAVIN | 116 | 110 | 113 | 113 | 110 | 110 | 113 | 113 | 113 | 113 | 86 | 27 | 29 | 38 | 88 | 82 | 83 |
| 5309240 | SODIUM 24 HR URINE | 73 | 69 | 71 | 71 | 69 | 69 | 71 | 71 | 71 | 71 | 54 | 17 | 18 | 24 | 55 | 52 | 52 |
| 5302253 | T4 TOTAL (THYROXINE) | 62 | 59 | 61 | 61 | 59 | 59 | 60 | 61 | 60 | 61 | 46 | 15 | 16 | 20 | 47 | 44 | 44 |
| 5302055 | T4 FREE | 110 | 104 | 107 | 107 | 104 | 104 | 107 | 107 | 107 | 107 | 81 | 26 | 28 | 36 | 83 | 78 | 78 |
| 5305641 | THYROID STIM IMMUNOGLOBULIN | 525 | 497 | 513 | 513 | 497 | 497 | 510 | 513 | 512 | 513 | 387 | 124 | 133 | 170 | 397 | 371 | 374 |
| 5300177 | VITAMIN E (TOCOPHEROL) | 171 | 162 | 167 | 167 | 162 | 162 | 166 | 167 | 167 | 167 | 126 | 41 | 43 | 55 | 129 | 121 | 122 |
| 5300065 | URIC ACID FLUID | 40 | 38 | 39 | 39 | 38 | 38 | 39 | 39 | 39 | 39 | 30 | 9 | 10 | 13 | 30 | 28 | 28 |
| 5305143 | VITAMIN A (RETINOL) | 110 | 104 | 107 | 107 | 104 | 104 | 107 | 107 | 107 | 107 | 81 | 26 | 28 | 36 | 83 | 78 | 78 |
| 5300385 | VITAMIN B3 NIACIN (MISC) | 159 | 151 | 155 | 155 | 151 | 151 | 154 | 155 | 155 | 155 | 117 | 38 | 40 | 52 | 120 | 112 | 113 |
| 5302215 | ZINC | 41 | 39 | 40 | 40 | 39 | 39 | 40 | 40 | 40 | 40 | 30 | 10 | 10 | 13 | 31 | 29 | 29 |
| 5300006 | C-PEPTIDE | 190 | 180 | 186 | 186 | 180 | 180 | 184 | 186 | 185 | 186 | 140 | 45 | 48 | 62 | 144 | 134 | 135 |
| 5301057 | RED COUNT | 43 | 41 | 42 | 42 | 41 | 41 | 42 | 42 | 42 | 42 | 32 | 10 | 11 | 14 | 33 | 30 | 31 |
| 5301081 | CLOTTING TIME | 49 | 46 | 48 | 48 | 46 | 46 | 48 | 48 | 48 | 48 | 36 | 12 | 12 | 16 | 37 | 35 | 35 |
| 5305416 | D-DIMER QUAL | 102 | 97 | 100 | 100 | 97 | 97 | 99 | 100 | 99 | 100 | 75 | 24 | 26 | 33 | 77 | 72 | 73 |
| 5303564 | PLATELET NEUTRALIZATION | 136 | 129 | 133 | 133 | 129 | 129 | 132 | 133 | 133 | 133 | 100 | 32 | 34 | 44 | 103 | 96 | 97 |
| 5303020 | CA 15-3 | 215 | 204 | 210 | 210 | 204 | 204 | 209 | 210 | 210 | 210 | 159 | 51 | 54 | 70 | 163 | 152 | 153 |
| 5303021 | CA-27.29 | 215 | 204 | 210 | 210 | 204 | 204 | 209 | 210 | 210 | 210 | 159 | 51 | 54 | 70 | 163 | 152 | 153 |
| 5304233 | CA 19-9 | 277 | 262 | 271 | 271 | 262 | 262 | 269 | 271 | 270 | 271 | 204 | 66 | 70 | 90 | 209 | 196 | 197 |
| 5301543 | CA 125 | 190 | 180 | 186 | 186 | 180 | 180 | 184 | 186 | 185 | 186 | 140 | 45 | 48 | 62 | 144 | 134 | 135 |

| | | | Negotiated Rates: | | | | | | | | | | Contracted but Rates are set by Government: | | | | | | |
|----------------------------|--------------------------------------|-------------|---------------------------|---------------------------|------------------|------------------------------|---|--|-----------------------|--------------------------------|----------------------------|---|---|---|------------------------------------|--|------------------------|---------------------------|--------------------|
| | | | Calc | Calc | Commercial | Commercial | Commercial | Commercial | Commercial | Commercial | Commercial | Commercial | Govt | Medicaid HMO | Medicaid HMO | Medicaid HMO | Medicare Advantage | Medicare Advantage | Medicare Advantage |
| Service Description | Gross Charge | Cash Price* | Minimum Negotiated Charge | Maximum Negotiated Charge | Aetna Commercial | Blue Care Network Commercial | Blue Cross Blue Shield of Michigan Commercial | Health Alliance Plan Commercial (includes ASR) | Priority - Commercial | United HealthCare - Commercial | Cofinity (PHSC, MultiPlan) | HealthCare - Veteran Affairs Community Care Program | Meridian - Medicaid HMO | United HealthCare Community Plan - Medicaid HMO | Blue Cross Complete - Medicaid HMO | Blue Shield of Michigan - Medicare Advantage | HAP Medicare Advantage | Humana Medicare Advantage | |
| 5302007 | CHROMOGRAMIN A | 232 | 220 | 227 | 227 | 220 | 220 | 225 | 227 | 226 | 227 | 171 | 55 | 59 | 75 | 175 | 164 | 165 | |
| 5301132 | HEPATITIS B VIRAL DNA QUANT PCR | 515 | 488 | 503 | 503 | 488 | 488 | 500 | 503 | 502 | 503 | 380 | 122 | 130 | 167 | 389 | 364 | 367 | |
| 5300131 | SURG PATH LEVEL I GROSS | 56 | 53 | 55 | 55 | 53 | 53 | 54 | 55 | 55 | 55 | 41 | 13 | 14 | 18 | 42 | 40 | 40 | |
| 5300132 | SURG PATH LEVEL II G & M | 140 | 133 | 137 | 137 | 133 | 133 | 136 | 137 | 137 | 137 | 103 | 33 | 35 | 45 | 106 | 99 | 100 | |
| 5300133 | SURG PATH LEVEL III G & M | 168 | 159 | 164 | 164 | 159 | 159 | 163 | 164 | 164 | 164 | 124 | 40 | 43 | 54 | 127 | 119 | 120 | |
| 5300135 | SURG PATH LEVEL IV G & M | 225 | 213 | 220 | 220 | 213 | 213 | 218 | 220 | 219 | 220 | 166 | 53 | 57 | 73 | 170 | 159 | 160 | |
| 5300136 | SURG PATH LEVEL V G & M | 337 | 319 | 329 | 329 | 319 | 319 | 327 | 329 | 329 | 329 | 249 | 80 | 85 | 109 | 255 | 238 | 240 | |
| 5300137 | SURG PATH LEVEL VI G & M | 562 | 532 | 549 | 549 | 532 | 532 | 546 | 549 | 548 | 549 | 415 | 133 | 142 | 182 | 425 | 397 | 400 | |
| DIAG IMAGING CMS 70 | | | | | | | | | | | | | | | | | | | |
| 5702288 | CT HEAD W/O CONT | 1627 | 1,541 | 1,590 | 1,590 | 1,541 | 1,541 | 1,580 | 1,590 | 1,586 | 1,590 | 1,201 | 386 | 412 | 527 | 1,230 | 1,150 | 1,158 | |
| SVC NOT OFFERED | MRI BRAIN | | | | | | | | | | | | | | | | | | |
| 6101405 | XR LS SP COMP MIN 4VWS | 382 | 362 | 373 | 373 | 362 | 362 | 371 | 373 | 372 | 373 | 282 | 91 | 97 | 124 | 289 | 270 | 272 | |
| SVC NOT OFFERED | MRI LUMBAR SPINE | | | | | | | | | | | | | | | | | | |
| 5702205 | CT PEL WIV/ORAL CON Q9967 (21.00) | 2300 | 2,178 | 2,248 | 2,247 | 2,178 | 2,178 | 2,233 | 2,248 | 2,243 | 2,247 | 1,697 | 545 | 582 | 745 | 1,739 | 1,626 | 1,638 | |
| SVC NOT OFFERED | MRI LOWER EXT | | | | | | | | | | | | | | | | | | |
| 5702308 | CT A/P IVCON ONLY Q9967 (21.00) | 3505 | 3,319 | 3,425 | 3,424 | 3,319 | 3,319 | 3,403 | 3,425 | 3,417 | 3,424 | 2,587 | 831 | 887 | 1,136 | 2,650 | 2,478 | 2,496 | |
| 7700086 | US ABD COMPLETE | 967 | 916 | 945 | 945 | 916 | 916 | 939 | 945 | 943 | 945 | 714 | 229 | 245 | 313 | 731 | 684 | 689 | |
| SVC NOT OFFERED | US PREG UT TA 2ND TRI | | | | | | | | | | | | | | | | | | |
| 7700268 | US PELVIS TV | 751 | 711 | 734 | 734 | 711 | 711 | 729 | 734 | 732 | 734 | 554 | 178 | 190 | 243 | 568 | 531 | 535 | |
| 6501055 | MM MAMMO UNI DIAGNOSTIC 3D + 77061 | 296 | 280 | 289 | 289 | 280 | 280 | 287 | 289 | 289 | 289 | 218 | 70 | 75 | 96 | 224 | 209 | 211 | |
| 6501050 | MM MAMMO BIL DIAGNOSTIC 3D + 77062 | 380 | 360 | 371 | 371 | 360 | 360 | 369 | 371 | 371 | 371 | 280 | 90 | 96 | 123 | 287 | 269 | 271 | |
| 6501045 | MM MAMMO BIL SCREEN 3D + 77063 | 311 | 295 | 304 | 304 | 295 | 295 | 302 | 304 | 303 | 304 | 230 | 74 | 79 | 101 | 235 | 220 | 221 | |
| DIAGNOSTIC IMAGING | | | | | | | | | | | | | | | | | | | |
| 6501060 | MM MAMMO UNI SCREEN 3D + 77063 | 311 | 295 | 304 | 304 | 295 | 295 | 302 | 304 | 303 | 304 | 230 | 74 | 79 | 101 | 235 | 220 | 221 | |
| 6101489 | XR SCAPULA LT OR RT | 188 | 178 | 184 | 184 | 178 | 178 | 183 | 184 | 183 | 184 | 139 | 45 | 48 | 61 | 142 | 133 | 134 | |
| 6101491 | XR SCAPULA BILAT | 188 | 178 | 184 | 184 | 178 | 178 | 183 | 184 | 183 | 184 | 139 | 45 | 48 | 61 | 142 | 133 | 134 | |
| 6101497 | XR SHOULDER 1VW LT OR RT | 292 | 277 | 285 | 285 | 277 | 277 | 284 | 285 | 285 | 285 | 215 | 69 | 74 | 95 | 221 | 206 | 208 | |
| 6101086 | XR SHOULDER 1VW BILAT | 292 | 277 | 285 | 285 | 277 | 277 | 284 | 285 | 285 | 285 | 215 | 69 | 74 | 95 | 221 | 206 | 208 | |
| 6101504 | XR SHOULDER 2-4 VW LT OR RT | 234 | 222 | 229 | 229 | 222 | 222 | 227 | 229 | 228 | 229 | 173 | 55 | 59 | 76 | 177 | 165 | 167 | |
| 6101505 | XR SHOULDER 2-4 VW BILAT | 234 | 222 | 229 | 229 | 222 | 222 | 227 | 229 | 228 | 229 | 173 | 55 | 59 | 76 | 177 | 165 | 167 | |
| 6101512 | XR HUMERUS 2VWS LT OR RT | 442 | 419 | 432 | 432 | 419 | 419 | 429 | 432 | 431 | 432 | 326 | 105 | 112 | 143 | 334 | 312 | 315 | |
| 6101510 | XR HUMERUS 2VWS BILAT | 442 | 419 | 432 | 432 | 419 | 419 | 429 | 432 | 431 | 432 | 326 | 105 | 112 | 143 | 334 | 312 | 315 | |
| 6101520 | XR ELB AP&LAT LT OR RT | 374 | 354 | 365 | 365 | 354 | 354 | 363 | 365 | 365 | 365 | 276 | 89 | 95 | 121 | 283 | 264 | 266 | |
| 6101050 | XR ELB AP&LAT BILAT | 374 | 354 | 365 | 365 | 354 | 354 | 363 | 365 | 365 | 365 | 276 | 89 | 95 | 121 | 283 | 264 | 266 | |
| 6101538 | XR ELB COMPL LT OR RT | 222 | 210 | 217 | 217 | 210 | 210 | 216 | 217 | 216 | 217 | 164 | 53 | 56 | 72 | 168 | 157 | 158 | |
| 6101539 | XR ELB COMPL BILAT | 222 | 210 | 217 | 217 | 210 | 210 | 216 | 217 | 216 | 217 | 164 | 53 | 56 | 72 | 168 | 157 | 158 | |
| 6101548 | XR FOREARM 2VWS LT OR RT | 442 | 419 | 432 | 432 | 419 | 419 | 429 | 432 | 431 | 432 | 326 | 105 | 112 | 143 | 334 | 312 | 315 | |
| 6101546 | XR FOREARM 2VWS BILAT | 442 | 419 | 432 | 432 | 419 | 419 | 429 | 432 | 431 | 432 | 326 | 105 | 112 | 143 | 334 | 312 | 315 | |
| 6101560 | XR WRIST AP&LAT LT OR RT | 186 | 176 | 182 | 182 | 176 | 176 | 181 | 182 | 181 | 182 | 137 | 44 | 47 | 60 | 141 | 132 | 132 | |
| 6101562 | XR WRIST AP&LAT BILAT | 186 | 176 | 182 | 182 | 176 | 176 | 181 | 182 | 181 | 182 | 137 | 44 | 47 | 60 | 141 | 132 | 132 | |
| 6101579 | XR WRIST COMP LT OR RT | 222 | 210 | 217 | 217 | 210 | 210 | 216 | 217 | 216 | 217 | 164 | 53 | 56 | 72 | 168 | 157 | 158 | |
| 6101580 | XR WRIST COMP BILAT | 222 | 210 | 217 | 217 | 210 | 210 | 216 | 217 | 216 | 217 | 164 | 53 | 56 | 72 | 168 | 157 | 158 | |
| 6101587 | XR HAND 3VWS LT OR RT | 215 | 204 | 210 | 210 | 204 | 204 | 209 | 210 | 210 | 210 | 159 | 51 | 54 | 70 | 163 | 152 | 153 | |
| 6101588 | XR HAND 3VWS BILAT | 215 | 204 | 210 | 210 | 204 | 204 | 209 | 210 | 210 | 210 | 159 | 51 | 54 | 70 | 163 | 152 | 153 | |
| 5702270 | CT UPPEXT WO CON BILAT | 1470 | 1,392 | 1,436 | 1,436 | 1,392 | 1,392 | 1,427 | 1,436 | 1,433 | 1,436 | 1,085 | 348 | 372 | 476 | 1,111 | 1,039 | 1,047 | |
| 5702114 | CT UPP EXT W CON BILAT + Q9967 21.00 | 2300 | 2,178 | 2,248 | 2,247 | 2,178 | 2,178 | 2,233 | 2,248 | 2,243 | 2,247 | 1,697 | 545 | 582 | 745 | 1,739 | 1,626 | 1,638 | |
| 6101992 | XR HIP 1 VW LT OR RT | 166 | 157 | 162 | 162 | 157 | 157 | 161 | 162 | 162 | 162 | 123 | 39 | 42 | 54 | 125 | 117 | 118 | |
| 6101660 | XR HIP COMP 2VWS LT OR RT | 254 | 241 | 248 | 248 | 241 | 241 | 247 | 248 | 248 | 248 | 187 | 60 | 64 | 82 | 192 | 180 | 181 | |
| 6101696 | XR FEMUR 2VWS LT OR RT | 476 | 451 | 465 | 465 | 451 | 451 | 462 | 465 | 464 | 465 | 351 | 113 | 120 | 154 | 360 | 337 | 339 | |
| 6101045 | XR FEMUR 2VWS BILAT | 476 | 451 | 465 | 465 | 451 | 451 | 462 | 465 | 464 | 465 | 351 | 113 | 120 | 154 | 360 | 337 | 339 | |
| 6101701 | XR KNEE 1-2 VWS LT OR RT | 128 | 121 | 125 | 125 | 121 | 121 | 124 | 125 | 125 | 125 | 94 | 30 | 32 | 41 | 97 | 90 | 91 | |
| 6101088 | XR KNEE 2 VWS BILAT | 128 | 121 | 125 | 125 | 121 | 121 | 124 | 125 | 125 | 125 | 94 | 30 | 32 | 41 | 97 | 90 | 91 | |
| 6103526 | XR KNEE 3 VWS LT OR RT | 288 | 273 | 281 | 281 | 273 | 273 | 280 | 281 | 281 | 281 | 213 | 68 | 73 | 93 | 218 | 204 | 205 | |
| 6101095 | XR KNEE 3 VWS BILAT | 288 | 273 | 281 | 281 | 273 | 273 | 280 | 281 | 281 | 281 | 213 | 68 | 73 | 93 | 218 | 204 | 205 | |
| 6101710 | XR KNEE 4-5 VW LT OR RT | 230 | 218 | 225 | 225 | 218 | 218 | 223 | 225 | 224 | 225 | 170 | 55 | 58 | 75 | 174 | 163 | 164 | |
| 6101711 | XR KNEE COMP BILAT | 230 | 218 | 225 | 225 | 218 | 218 | 223 | 225 | 224 | 225 | 170 | 55 | 58 | 75 | 174 | 163 | 164 | |
| 6101093 | XR KNEES BILATERAL STANDING | 152 | 144 | 149 | 149 | 144 | 144 | 148 | 149 | 148 | 149 | 112 | 36 | 38 | 49 | 115 | 107 | 108 | |
| 6101726 | XR TIB/FIB 2VWS LT OR RT | 253 | 240 | 247 | 247 | 240 | 240 | 246 | 247 | 247 | 247 | 187 | 60 | 64 | 82 | 191 | 179 | 180 | |

| | | | Negotiated Rates: | | | | | | | | | | Contracted but Rates are set by Government: | | | | | | |
|--------------------------------|--|---------------------|-------------------|---------------------------|---------------------------|------------------|------------------------------|---|-------------------------------------|-----------------------|--------------------------------|----------------------------|---|-------------------------|---|------------------------------------|--|------------------------|---------------------------|
| | | | Calc | Calc | Commercial | Commercial | Commercial | Commercial | Commercial | Commercial | Commercial | Commercial | Govt | Medicaid HMO | Medicaid HMO | Medicaid HMO | Medicare Advantage | Medicare Advantage | Medicare Advantage |
| Service Description | | | Cash Price* | Minimum Negotiated Charge | Maximum Negotiated Charge | Aetna Commercial | Blue Care Network Commercial | Blue Cross Blue Shield of Michigan Commercial | Health Alliance Plan (includes ASR) | Priority - Commercial | United HealthCare - Commercial | Cofinity (PHSC, MultiPlan) | HealthCare - Veteran Affairs Community Care Program | Meridian - Medicaid HMO | United HealthCare Community Plan - Medicaid HMO | Blue Cross Complete - Medicaid HMO | Blue Shield of Michigan - Medicare Advantage | HAP Medicare Advantage | Humana Medicare Advantage |
| 10090832 | PSYCHOTHERAPY 30 MIN - PHYSICIAN | 114 | 114 | 70 | 87 | 75 | 72 | 87 | 82 | 81 | 70 | 80 | 70 | 57 | 49 | 35 | 54 | 71 | 75 |
| 11090832 | PSYCHOTHERAPY 30 MIN - SOCIAL WORKER | 114 | 114 | 70 | 87 | 75 | 72 | 87 | 82 | 81 | 70 | 80 | 70 | 57 | 49 | 35 | 54 | 71 | 75 |
| 10090837 | PSYCHOTHERAPY 60 MIN - PHYSICIAN | 225 | 225 | 137 | 172 | 149 | 142 | 172 | 162 | 161 | 137 | 157 | 137 | 112 | 97 | 69 | 107 | 140 | 147 |
| 11090837 | PSYCHOTHERAPY 60 MIN - SOCIAL WORKER | 221 | 221 | 135 | 169 | 146 | 139 | 169 | 159 | 158 | 135 | 154 | 135 | 110 | 96 | 68 | 105 | 138 | 145 |
| SERVICE NOT OFFERED | Family psychotherapy, not including patient, 50 min | SERVICE NOT OFFERED | | | | | | | | | | | | | | | | | |
| SERVICE NOT OFFERED | Family psychotherapy, including patient, 50 min | SERVICE NOT OFFERED | | | | | | | | | | | | | | | | | |
| SERVICE NOT OFFERED | Group Psychotherapy | SERVICE NOT OFFERED | | | | | | | | | | | | | | | | | |
| 10093000 | EKG WITH INTERPRETATION AND REPORT | 124 | 124 | 76 | 95 | 82 | 78 | 95 | 89 | 89 | 76 | 87 | 76 | 62 | 54 | 38 | 59 | 77 | 81 |
| 10099203 | OFFICE VISIT NEW MOD 99203 | 145 | 145 | 88 | 111 | 96 | 91 | 111 | 104 | 104 | 88 | 101 | 88 | 72 | 63 | 45 | 69 | 90 | 95 |
| 10099204 | OFFICE VISIT NEW MOD-HIGH 99204 | 215 | 215 | 131 | 164 | 142 | 136 | 164 | 155 | 154 | 131 | 150 | 131 | 107 | 93 | 66 | 102 | 134 | 141 |
| 10099205 | OFFICE VISIT NEW HIGH 99205 | 272 | 272 | 166 | 208 | 180 | 172 | 208 | 196 | 194 | 166 | 190 | 166 | 135 | 118 | 84 | 129 | 169 | 178 |
| SERVICE NOT OFFERED | PATIENT OFFICE CONSULTATION TYPICALLY 40 MIN | SERVICE NOT OFFERED | | | | | | | | | | | | | | | | | |
| SERVICE NOT OFFERED | PATIENT OFFICE CONSULTATION TYPICALL 60 MIN | SERVICE NOT OFFERED | | | | | | | | | | | | | | | | | |
| 10099385 | Initial new patient preventive medicine evaluation (18-39 years) | 180 | 180 | 110 | 137 | 119 | 114 | 137 | 130 | 129 | 110 | 126 | 110 | 89 | 78 | 55 | 85 | 112 | 118 |
| 10099386 | Initial New Patient Preventative Evaluation, 40-64 years | 205 | 205 | 125 | 156 | 135 | 129 | 156 | 148 | 146 | 125 | 143 | 125 | 102 | 89 | 63 | 97 | 128 | 134 |
| PHYSICIAN SVC CLINICS | | | | | | | | | | | | | | | | | | | |
| 10099202 | OFFICE VISIT NEW LOW 99202 | 99 | 99 | 60 | 76 | 65 | 62 | 76 | 71 | 71 | 60 | 69 | 60 | 49 | 43 | 30 | 47 | 62 | 65 |
| 10099203 | OFFICE VISIT NEW MOD 99203 | 145 | | | | | | | | | | | | | | | | | |
| 10099204 | OFFICE VISIT NEW MOD-HIGH 99204 | 215 | 215 | 131 | 164 | 142 | 136 | 164 | 155 | 154 | 131 | 150 | 131 | 107 | 93 | 66 | 102 | 134 | 141 |
| 10099212 | OFFICE VISIT OR OP EST LOW 99212 | 66 | 66 | 40 | 50 | 44 | 42 | 50 | 48 | 47 | 40 | 46 | 40 | 33 | 29 | 20 | 31 | 41 | 43 |
| 10099213 | OFFICE VISIT OR OP EST MOD 99213 | 103 | 103 | 63 | 79 | 68 | 65 | 79 | 74 | 74 | 63 | 72 | 63 | 51 | 45 | 32 | 49 | 64 | 67 |
| 10099214 | OFFICE VISIT OR O/P EST MOD-HIGH 99214 | 149 | 149 | 91 | 114 | 98 | 94 | 114 | 107 | 106 | 91 | 104 | 91 | 74 | 65 | 46 | 71 | 93 | 97 |
| 10099215 | OFFICE VISIT OR O/P EST HIGH 99215 | 200 | 200 | 122 | 153 | 132 | 126 | 153 | 144 | 143 | 122 | 140 | 122 | 99 | 87 | 61 | 95 | 125 | 131 |
| SENIOR LIFE SOLN CMS 70 | | | | | | | | | | | | | | | | | | | |
| 3102345 | PSYCHIATRIC DIAGNOSTIC EVALUATION | 348 | 348 | 330 | 340 | 340 | 330 | 330 | 338 | 340 | 339 | 340 | 257 | 82 | 88 | 113 | 263 | 246 | 248 |
| 3102380 | TELEHEALTH FACILITY FEE | 33 | 33 | 31 | 32 | 32 | 31 | 31 | 32 | 32 | 32 | 32 | 24 | 8 | 8 | 11 | 25 | 23 | 23 |
| 3102378 | GROUP PSYCHOTHERAPY 3 SESSIONS | 213 | 213 | 202 | 208 | 208 | 202 | 202 | 207 | 208 | 208 | 208 | 157 | 50 | 54 | 69 | 161 | 151 | 152 |
| SENIOR LIFE SOLUTIONS | | | | | | | | | | | | | | | | | | | |
| 3102350 | INDIVIDUAL PSYCHOTHERAPY 16-37 MIN | 256 | 256 | 242 | 250 | 250 | 242 | 242 | 249 | 250 | 250 | 250 | 189 | 61 | 65 | 83 | 194 | 181 | 182 |
| 3102355 | INDIVIDUAL PSYCHOTHERAPY 38-52 MIN | 294 | 294 | 278 | 287 | 287 | 278 | 278 | 285 | 287 | 287 | 287 | 217 | 70 | 74 | 95 | 222 | 208 | 209 |
| 3102360 | INDIVIDUAL PSYCHOTHERAPY 53-67 MIN | 310 | 310 | 294 | 303 | 303 | 294 | 294 | 301 | 303 | 302 | 303 | 229 | 73 | 78 | 100 | 234 | 219 | 221 |
| PT OT THERAPY CMS 70 | | | | | | | | | | | | | | | | | | | |
| OP THERAPY | PT THERAPEUTIC EXER UNIT | 112 | 112 | 106 | 109 | 109 | 106 | 106 | 109 | 109 | 109 | 109 | 83 | 27 | 28 | 36 | 85 | 79 | 80 |
| PT OT THERAPY | | | | | | | | | | | | | | | | | | | |
| 8500146 | PT EVAL LOW COMPLEX | 208 | 208 | 197 | 203 | 203 | 197 | 197 | 202 | 203 | 203 | 203 | 154 | 49 | 53 | 67 | 157 | 147 | 148 |
| 8500147 | PT EVAL MOD COMPLEX | 242 | 242 | 229 | 236 | 236 | 229 | 229 | 235 | 236 | 236 | 236 | 179 | 57 | 61 | 78 | 183 | 171 | 172 |
| 8500148 | PE EVAL HIGH COMPLEX | 278 | 278 | 263 | 272 | 272 | 263 | 263 | 270 | 272 | 271 | 272 | 205 | 66 | 70 | 90 | 210 | 197 | 198 |
| 8100018 | OT EVAL LOW COMPLEX | 208 | 208 | 197 | 203 | 203 | 197 | 197 | 202 | 203 | 203 | 203 | 154 | 49 | 53 | 67 | 157 | 147 | 148 |
| 8100019 | OT EVAL MOD COMPLEX | 242 | 242 | 229 | 236 | 236 | 229 | 229 | 235 | 236 | 236 | 236 | 179 | 57 | 61 | 78 | 183 | 171 | 172 |
| 8100020 | OT EVAL HIGH COMPLEX | 278 | 278 | 263 | 272 | 272 | 263 | 263 | 270 | 272 | 271 | 272 | 205 | 66 | 70 | 90 | 210 | 197 | 198 |
| 8100282 | OT MUSCLE STIMULATION 1 UNIT | 113 | 113 | 107 | 110 | 110 | 107 | 107 | 110 | 110 | 110 | 110 | 83 | 27 | 29 | 37 | 85 | 80 | 80 |
| 8500282 | PT ELECT STIMUL SUPERVISED I UNIT | 113 | 113 | 107 | 110 | 110 | 107 | 107 | 110 | 110 | 110 | 110 | 83 | 27 | 29 | 37 | 85 | 80 | 80 |
| 8100399 | OT ULTRASOUND 15 MIN | 106 | 106 | 100 | 104 | 104 | 100 | 100 | 103 | 104 | 103 | 104 | 78 | 25 | 27 | 34 | 80 | 75 | 75 |
| 8500399 | PT ULTRASOUND/PHONOPHORESIS 15 MIN | 106 | 106 | 100 | 104 | 104 | 100 | 100 | 103 | 104 | 103 | 104 | 78 | 25 | 27 | 34 | 80 | 75 | 75 |
| 8102050 | OT THERAPEUTIC EXER 15 MIN | 117 | 117 | 111 | 114 | 114 | 111 | 111 | 114 | 114 | 114 | 114 | 86 | 28 | 30 | 38 | 88 | 83 | 83 |
| 8500092 | PT THERAPEUTIC EXER 15 MIN | 117 | 117 | 111 | 114 | 114 | 111 | 111 | 114 | 114 | 114 | 114 | 86 | 28 | 30 | 38 | 88 | 83 | 83 |
| 8102010 | OT NEUROMUSCULAR RE-ED 15 MIN | 135 | 135 | 128 | 132 | 132 | 128 | 128 | 131 | 132 | 132 | 132 | 100 | 32 | 34 | 44 | 102 | 95 | 96 |
| 8500235 | PT NEUROMUSCULAR RE-ED 15 MIN | 135 | 135 | 128 | 132 | 132 | 128 | 128 | 131 | 132 | 132 | 132 | 100 | 32 | 34 | 44 | 102 | 95 | 96 |
| 8500159 | PT GAIT TRAINING 15 MIN | 122 | 122 | 116 | 119 | 119 | 116 | 116 | 118 | 119 | 119 | 119 | 90 | 29 | 31 | 40 | 92 | 86 | 87 |
| 8102000 | OT MASSAGE | 111 | 111 | 105 | 108 | 108 | 105 | 105 | 108 | 108 | 108 | 108 | 82 | 26 | 28 | 36 | 84 | 78 | 79 |
| 8502000 | PT THERAPEUTIC MASSAGE 15 MIN | 111 | 111 | 105 | 108 | 108 | 105 | 105 | 108 | 108 | 108 | 108 | 82 | 26 | 28 | 36 | 84 | 78 | 79 |

| | | Negotiated Rates: | | | | | | | | | | | Contracted but Rates are set by Government: | | | | | | |
|---|--|-------------------|-------------|---------------------------|---------------------------|------------------|------------------------------|---|--|-----------------------|--------------------------------|----------------------------|---|-------------------------|---|------------------------------------|--|------------------------|---------------------------|
| | | Calc | Calc | Commercial | Commercial | Commercial | Commercial | Commercial | Commercial | Commercial | Commercial | Commercial | Govt | Medicaid HMO | Medicaid HMO | Medicaid HMO | Medicare Advantage | Medicare Advantage | Medicare Advantage |
| Service Description | | Gross Charge | Cash Price* | Minimum Negotiated Charge | Maximum Negotiated Charge | Aetna Commercial | Blue Care Network Commercial | Blue Cross Blue Shield of Michigan Commercial | Health Alliance Plan Commercial (includes ASR) | Priority - Commercial | United HealthCare - Commercial | Cofinity (PHSC, MultiPlan) | HealthCare - Veteran Affairs Community Care Program | Meridian - Medicaid HMO | United HealthCare Community Plan - Medicaid HMO | Blue Cross Complete - Medicaid HMO | Blue Shield of Michigan - Medicare Advantage | HAP Medicare Advantage | Humana Medicare Advantage |
| 8102070 | OT MANUAL THER TECH 15 MIN | 122 | 122 | 116 | 119 | 119 | 116 | 116 | 118 | 119 | 119 | 119 | 90 | 29 | 31 | 40 | 92 | 86 | 87 |
| 8500217 | PT MANUAL THERAPY TECH 15 MIN | 122 | 122 | 116 | 119 | 119 | 116 | 116 | 118 | 119 | 119 | 119 | 90 | 29 | 31 | 40 | 92 | 86 | 87 |
| 8102084 | OT THERAPEUTIC ACT 15 MIN | 100 | 100 | 95 | 98 | 98 | 95 | 95 | 97 | 98 | 98 | 98 | 74 | 24 | 25 | 32 | 76 | 71 | 71 |
| 8501010 | PT THERAPEUTIC ACT 15 MIN | 100 | 100 | 95 | 98 | 98 | 95 | 95 | 97 | 98 | 98 | 98 | 74 | 24 | 25 | 32 | 76 | 71 | 71 |
| 8100033 | OT ADL 15 MIN | 92 | 92 | 87 | 90 | 90 | 87 | 87 | 89 | 90 | 90 | 90 | 68 | 22 | 23 | 30 | 70 | 65 | 66 |
| MEDICAL NUTRITIONAL THERAPY/DIABETIC EDUCATION | | | | | | | | | | | | | | | | | | | |
| 1370009 | MEDICAL NUTR THERAPY 1ON1 SUBSEQ. 15MIN | 42 | 42 | 40 | 41 | 41 | 40 | 40 | 41 | 41 | 41 | 41 | 31 | 10 | 11 | 14 | 32 | 30 | 30 |
| 1370010 | MEDICAL NUTR THERAPY GROUP 30 MIN | 36 | 36 | 34 | 35 | 35 | 34 | 34 | 35 | 35 | 35 | 35 | 27 | 9 | 9 | 12 | 27 | 25 | 26 |
| 1370008 | MEDICAL NUTRITIONAL THERAPY 1ON1-15MIN | 42 | 42 | 40 | 41 | 41 | 40 | 40 | 41 | 41 | 41 | 41 | 31 | 10 | 11 | 14 | 32 | 30 | 30 |
| 1370007 | DIABETIC EDUCATION:GROUP MGMT 30MIN | 36 | 36 | 34 | 35 | 35 | 34 | 34 | 35 | 35 | 35 | 35 | 27 | 9 | 9 | 12 | 27 | 25 | 26 |
| 1370006 | DIABETIC EDUCATION:ONE ON ONE MGMT 30MIN | 67 | 67 | 63 | 65 | 65 | 63 | 63 | 65 | 65 | 65 | 65 | 49 | 16 | 17 | 22 | 51 | 47 | 48 |
| PULMONARY REHAB | | | | | | | | | | | | | | | | | | | |
| 4500140 4500130 4500021 | PFT BRONCHODILATOR(COMPLETE) | 919 | 919 | 870 | 898 | 898 | 870 | 870 | 892 | 898 | 896 | 898 | 678 | 218 | 233 | 298 | 695 | 650 | 654 |
| 4509025 | PR PULMONARY STRESS TEST SIMPLE | 215 | 215 | 204 | 210 | 210 | 204 | 204 | 209 | 210 | 210 | 210 | 159 | 51 | 54 | 70 | 163 | 152 | 153 |
| 4509030 | PR PULMONARY STRESS COMPLEX | 380 | 380 | 360 | 371 | 371 | 360 | 360 | 369 | 371 | 371 | 371 | 280 | 90 | 96 | 123 | 287 | 269 | 271 |
| 4509065 | PR RESPIRATORY CARE ONE ON ONE (PER 15) | 40 | 40 | 38 | 39 | 39 | 38 | 38 | 39 | 39 | 39 | 39 | 30 | 9 | 10 | 13 | 30 | 28 | 28 |
| 4509066 | PR RESPIRATORY ED ONE ON ONE (PER 15) | 40 | 40 | 38 | 39 | 39 | 38 | 38 | 39 | 39 | 39 | 39 | 30 | 9 | 10 | 13 | 30 | 28 | 28 |
| 4509067 | PR GROUP THERAPY | 54 | 54 | 51 | 53 | 53 | 51 | 51 | 52 | 53 | 53 | 53 | 40 | 13 | 14 | 17 | 41 | 38 | 38 |
| 4509068 | PR PULMONARY REHAB 01-36 SESSIONS/60 MIN | 74 | 74 | 70 | 72 | 72 | 70 | 70 | 72 | 72 | 72 | 72 | 55 | 18 | 19 | 24 | 56 | 52 | 53 |
| EMERGENCY ROOM FACILITY | | | | | | | | | | | | | | | | | | | |
| 500014 | MINOR ER | 208 | 208 | 197 | 203 | 203 | 197 | 197 | 202 | 203 | 203 | 203 | 154 | 49 | 53 | 67 | 157 | 147 | 148 |
| 500015 | ER LOW TO MODERATE | 290 | 290 | 275 | 283 | 283 | 275 | 275 | 282 | 283 | 283 | 283 | 214 | 69 | 73 | 94 | 219 | 205 | 206 |
| 500016 | ER MODERATE SEVERITY | 434 | 434 | 411 | 424 | 424 | 411 | 411 | 421 | 424 | 423 | 424 | 320 | 103 | 110 | 141 | 328 | 307 | 309 |
| 500017 | ER HIGH NO IMMEDIATE THREAT | 626 | 626 | 593 | 612 | 612 | 593 | 593 | 608 | 612 | 610 | 612 | 462 | 148 | 158 | 203 | 473 | 443 | 446 |
| 500018 | ER HIGH IMMEDIATE THREAT | 1009 | 1,009 | 956 | 986 | 986 | 956 | 956 | 980 | 986 | 984 | 986 | 745 | 239 | 255 | 327 | 763 | 713 | 718 |
| 500019 | ER CRITICAL CARE | 1460 | 1,460 | 1,383 | 1,427 | 1,426 | 1,383 | 1,383 | 1,418 | 1,427 | 1,424 | 1,426 | 1,077 | 346 | 369 | 473 | 1,104 | 1,032 | 1,040 |
| 500020 | ER CRITICAL CARE EACH ADDITIONAL 30 MIN | 728 | 728 | 689 | 711 | 711 | 689 | 689 | 707 | 711 | 710 | 711 | 537 | 173 | 184 | 236 | 550 | 515 | 518 |
| EMERGENCY ROOM PROFESSIONAL FEES | | | | | | | | | | | | | | | | | | | |
| 13301015 | EMERGENCY DEPT VISIT MINOR PRO FEE | 60 | 60 | 37 | 46 | 40 | 38 | 46 | 43 | 43 | 37 | 42 | 37 | 30 | 26 | 18 | 28 | 37 | 39 |
| 13301018 | EMERGENCY VISIT LOW TO MOD PRO FEE | 75 | 75 | 46 | 57 | 50 | 47 | 57 | 54 | 54 | 46 | 52 | 46 | 37 | 32 | 23 | 36 | 47 | 49 |
| 13301021 | EMERGENCY VISIT MOD PRO FEE | 112 | 112 | 68 | 85 | 74 | 71 | 85 | 81 | 80 | 68 | 78 | 68 | 56 | 48 | 34 | 53 | 70 | 73 |
| 13301025 | EMERGENCY VISIT HIGH PRO FEE | 238 | 238 | 145 | 182 | 157 | 150 | 182 | 171 | 170 | 145 | 166 | 145 | 118 | 103 | 73 | 113 | 148 | 156 |
| 13301028 | EMERGENCY VISIT HIGH PRO | 354 | 354 | 216 | 270 | 234 | 223 | 270 | 255 | 253 | 216 | 247 | 216 | 176 | 153 | 109 | 168 | 221 | 232 |
| 13301030 | EMERGENCY VISIT CRITICAL CARE PRO FEE | 403 | 403 | 246 | 307 | 266 | 254 | 307 | 290 | 288 | 246 | 281 | 246 | 200 | 174 | 124 | 191 | 251 | 264 |
| 13301035 | CRITICAL CARE EACH ADDITIONAL 30 MIN PRO | 202 | 202 | 123 | 154 | 133 | 127 | 154 | 145 | 144 | 123 | 141 | 123 | 100 | 87 | 62 | 96 | 126 | 132 |

Information shown are estimates. Actual charges and rates may vary.

*Cash Price: Uninsured patients who pay their bill within 28 days of the billing date are eligible for a 20% discount

Financial assistance is available up to 200% of the federal poverty level using a sliding fee schedule.