



Average charges based on actual cases for the period of October 1, 2025 through December 31, 2025.

Inpatient

Medical/Surgical		Average Charge	Average Length	Average Charge
DRG	Description	Per Case	of Stay	Per Day
871	SEPTICEMIA OR SEVERE SEPSIS W/O MV 96+ HOURS W MCC	\$ 25,899	5.48	\$ 4,723
291	HEART FAILURE & SHOCK W MCC	\$ 17,186	4.46	\$ 3,857
189	PULMONARY EDEMA & RESPIRATORY FAILURE	\$ 19,769	4.85	\$ 4,073
190	CHRONIC OBSTRUCTIVE PULMONARY DISEASE W MCC	\$ 15,141	2.71	\$ 5,578
603	CELLULITIS W/O MCC	\$ 10,641	2.87	\$ 3,708
640	MISC DISORDERS OF NUTRITION, METABOLISM, FLUIDS/ELECTROLYTES W MCC	\$ 17,112	4.05	\$ 4,230
638	DIABETES W CC	\$ 11,868	2.75	\$ 4,315
193	SIMPLE PNEUMONIA & PLEURISY W MCC	\$ 21,793	5.21	\$ 4,183
621	O.R. PROCEDURES FOR OBESITY W/O CC/MCC	\$ 25,396	1.18	\$ 21,587
690	KIDNEY & URINARY TRACT INFECTIONS W/O MCC	\$ 11,776	2.76	\$ 4,260

Psychiatry		Average Charge	Average Length	Average Charge
DRG	Description	Per Case	of Stay	Per Day
885	PSYCHOSES	\$ 14,728	7.00	\$ 2,104
897	ALCOHOL/DRUG ABUSE OR DEPENDENCE W/O REHABILITATION THERAPY W/O MCC	\$ 7,960	2.00	\$ 3,980
882	NEUROSES EXCEPT DEPRESSIVE	\$ 14,276	7.00	\$ 2,039
880	ACUTE ADJUSTMENT REACTION & PSYCHOSOCIAL DYSFUNCTION	\$ 12,851	5.63	\$ 2,285
886	BEHAVIORAL & DEVELOPMENTAL DISORDERS	\$ 15,280	7.40	\$ 2,065
883	DISORDERS OF PERSONALITY & IMPULSE CONTROL	\$ 7,247	2.50	\$ 2,899
881	DEPRESSIVE NEUROSES	\$ 8,779	3.67	\$ 2,394
884	ORGANIC DISTURBANCES & MENTAL RETARDATION	\$ 7,565	3.50	\$ 2,161

Obstetrics		Average Charge	Average Length	Average Charge
DRG	Description	Per Case	of Stay	Per Day
807	VAGINAL DELIVERY W/O STERILIZATION/D&C W/O CC/MCC	\$16,792	1.65	\$ 10,164
788	CESAREAN SECTION W/O STERILIZATION W/O CC/MCC	\$17,479	2.41	\$ 7,247
806	VAGINAL DELIVERY W/O STERILIZATION/D&C W CC	\$16,861	2.00	\$ 8,431
787	CESAREAN SECTION W/O STERILIZATION W CC	\$16,483	2.58	\$ 6,381
768	VAGINAL DELIVERY W O.R. PROC EXCEPT STERIL &/OR D&C	\$23,551	1.80	\$ 13,084
786	CESAREAN SECTION W/O STERILIZATION W MCC	\$17,730	1.75	\$ 10,132
784	CESAREAN SECTION W STERILIZATION W CC	\$15,655	2.50	\$ 6,262
805	VAGINAL DELIVERY W/O STERILIZATION/D&C W MCC	\$18,977	1.50	\$ 9,488
797	VAGINAL DELIVERY W STERILIZATION/D&C W CC	\$32,411	3.00	\$ 10,804

Newborn		Average Charge	Average Length	Average Charge
DRG	Description	Per Case	of Stay	Per Day
795	NORMAL NEWBORN	\$ 4,465.44	1.93	\$ 2,310

Outpatient

Surgery		
CPT Code	Description	Average Charge
43239	EGD BIOPSY SINGLE/MULTIPLE	\$ 3,249
52356	CYSTO/URETERO W/LITHOTRIPSY	\$ 5,018
47562	LAPAROSCOPIC CHOLECYSTECTOMY	\$ 10,729
58558	HYSTEROSCOPY BIOPSY	\$ 5,595
45378	DIAGNOSTIC COLONOSCOPY	\$ 2,679
49505	PRP I/HERN INIT REDUC >5 YR	\$ 8,895
45385	COLONOSCOPY W/LESION REMOVAL	\$ 4,410
36561	INSERT TUNNELED CV CATH	\$ 5,186
45380	COLONOSCOPY AND BIOPSY	\$ 3,324
64721	CARPAL TUNNEL SURGERY	\$ 4,876

Diagnostic Radiology		
CPT Code	Description	Average Charge
71045	CHEST 1 VIEW	\$ 130
71046	CHEST 2 VIEWS	\$ 194
73562	KNEE 3 VIEWS	\$ 229
93971	UNILATERAL VENOUS DOPPLER	\$ 914
76705	US ABDOMEN, LIMITED	\$ 584
73030	SHOULDER 2+ VIEWS	\$ 162
73130	HAND 3+ VIEWS	\$ 197
73610	ANKLE 3+ VIEWS	\$ 194
93976	ABD/PEL VEN-ART BLOODFLOW	\$ 1,138
93975	COMPLETE ABD/PEL VEN-ART FLOW	\$ 2,057

Nuclear Medicine		
CPT Code	Description	Average Charge
78582	LUNG SCAN VENT/PERFUSION	\$ 2,181
78264	GASTRIC EMPTYING	\$ 2,335
78227	HEPATO-BILIARY SCAN W CCK	\$ 3,173
78072	PARTHYROID PLANAR W/SPECT CT	\$ 2,672
78452	CARDIAC REST SAME DAY	\$ 3,161
78709	MULTI RENAL SCAN WO/W PHARM	\$ 2,391
78830	SPECT with CT	\$ 3,192
78014	THYROID SCAN W/UPTAKE	\$ 1,759
78451	CARDIAC STRESS/REST TEST	\$ 2,021
78306	BONE SCAN WHOLE BODY	\$ 1,704

Cat Scan		
CPT Code	Description	Average Charge
70450	CT,HEAD;W/O CONTRAST	\$ 128
74177	CT ABDOMEN & PELVIS W	\$ 378
74176	CT ABDOMEN & PELVIS W/O	\$ 195
72125	CT,CERVICAL SPINE;WO/CONTRAST	\$ 226
71275	CT ANGIO CHEST WITH CONTRAST	\$ 360
70498	CT ANGIO NECK WITH CONTRAST	\$ 350
70496	CT ANGIO HEAD WITH CONTRAST	\$ 356
71250	CT, THORAX; WO/CONTRAST	\$ 219
74174	CT ANGIO ABD & PELVIS W/CONT	\$ 472
72131	CT, LUMBAR SPINE; WO/CONTRAST	\$ 221

Magnetic Resonance Imaging (MRI)		
CPT Code	Description	Average Charge
70551	MRI HEAD/BRAIN W/O	\$ 378
70553	MRI HEAD/BRAIN W/O & W	\$ 638
72148	MRI L-SPINE W/O	\$ 363
72141	MRI C-SPINE W/O	\$ 362
70544	MRI ANGIO HEAD W/O CONTRAST	\$ 792
76018	MR SAFETY IMPLANT ELEC PREPJ	\$ 208
70547	MRI ANGIO NECK W/O CONTRAST	\$ 796
72156	MRI C-SPINE W/O & W	\$ 641
73721	MRI LOWER EXT JOINT W/O CONT	\$ 401
72146	MRI T-SPINE W/O	\$ 363

Laboratory Services		
CPT Code	Description	Average Charge
85025	CBC-COMplete	\$ 28
80053	COMPREHENSIVE METABOLIC PANEL	\$ 42
84484	TROPONIN, QUANTITATIVE	\$ 75
82948	WHOLE BLOOD GLUCOSE	\$ 12
83735	MAGNESIUM-SERUM/URINE	\$ 18
81003	URINALYSIS AUTO W/O MICRO	\$ 12
83690	LIPASE	\$ 24
84703	BETA HCG-QUALITATIVE	\$ 30
87635	COVID-19	\$ 354
80048	BASIC METABOLIC PANEL	\$ 32