

Patient Price Information List

In compliance with state law, Cleveland Clinic Akron General is providing this price list containing our charges for Room and Board, Labor and Delivery, Emergency Department, Operating Room, Physical Therapy, Occupational Therapy, Respiratory Therapy, Radiology and Lab. The hospital's charges are the same for all patients. Patients needing financial assistance with their hospital bills should review the information on the back of their billing statement, or call us at 330.344.6924. These prices are correct as of January 1, 2026.

Room and Board — Per Day Charge

Coronary Care	\$8,166	Step Down	\$6,125
Intensive Care	\$8,166	Psychiatry	\$2,811
Medical/Surgical	\$3,675		

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.

Vaginal Delivery Single Cesarean	\$3,778	Cesarean Section Delivery Twins	\$7,981
Section Delivery Single Vaginal	\$6,039	Vaginal Delivery Triplets	\$6,976
Delivery Twins	\$4,279	Cesarean Section Delivery Triplets	\$8,738

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, appliances, 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	\$608	Level 5	\$4,230
Level 2	\$1,093	Critical care, Initial	\$5,814
Level 3	\$1,911	Critical care, Additional	\$2,487
Level 4	\$2,938		

Operating Room Charges

Charges for our Operating Room services generally depend on the complexity of the particular operation. There are five levels of complexity, with level 5 being the most complex.

Level 1	\$3,394	Level 1 each additional 30 mins	\$3,387
Level 2	\$4,184	Level 2 each additional 30 mins	\$3,885
Level 3	\$4,734	Level 3 each additional 30 mins	\$4,734
Level 4	\$5,786	Level 4 each additional 30 mins	\$5,786
Level 5	\$5,971	Level 5 each additional 30 mins	\$5,971
Level 6	\$6,381	Level 6 each additional 30 mins	\$6,381

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	\$605	Therapeutic Exercise/per 15 min	\$258
Gait Training	\$228	Therapeutic Group	\$234

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 Therapeutic	\$674	Therapeutic Group	\$234
Exercise/per 15 min	\$258		

Pulmonary Charges

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

Airway Inhilation Treatment	\$936	Spirometry	\$720
CPAP Initiation and Management	\$936		

X-Ray & Radiological Charges

The following charges reflect the hospital's most common X-ray and radiological procedures. These prices do not include the price of supplies that may be required for some procedures. Physicians bill separately for their services.

XR Chest 2 Views	\$608	CT Scan of Abdomen and Pelvis with Contrast	\$2,464
XR Shoulder 2 Views	\$608	XR Spine Lumbosacral 2 or 3 Views	\$734
XR Chest 1 View	\$608	CT Scan of Chest with Contrast	\$1,228
CT Scan of Abdomen and Pelvis without Contrast	\$1,668	XR Ankle 3 Views	\$608
Screening Mammography	\$609	XR Foot 3 Views Minimum	\$608
Ultrasound Abdomen Limited	\$734	DXA Bone Density Measurement of Hip, Pelvis, Spine	\$734
CT Scan Head or Brain without Contrast	\$734	CT Scan of Upper Spine without Contrast	\$734
CT Scan of Chest without Contrast	\$734	XR Hip, Unilateral, 2-3 views	\$608
Screening Digital Tomography of Both Breasts	\$140	XR Addomen 1 View	\$608
XR Hand 3 Views Minimum	\$608	XR Wrist 3 Views Minimum	\$608

Laboratory Charges

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

Glucose Blood Test	\$23	Troponin	\$86
Lactic Acid	\$80	Prothrombin Time	\$30
CBC/Differential	\$54	Magnesium	\$46
Ionized Calcium	\$94	Glucose, Blood, Quantitative	\$27
Basic Metabolic Panel	\$58	Urinalysis w/microscopy	\$22
Sodium	\$33	Vitamin D	\$204
Comprehensive Metabolic Panel Partial	\$73	TSH	\$116
Thromboplastin Time	\$41	Bacterial Urine Culture Lipid	\$56
CBC	\$45	Lipid Panel	\$92
Potassium	\$33	Phosphorus Serum	\$33

Hospital Billing Policies

Akron General will bill all of your medical insurance carriers. Please be sure we have your correct and complete insurance information. This is most easily accomplished if you present your insurance cards when you are registering. Copayments should be paid at the time of service. Balances remaining after insurance payments and adjustments will be billed to you. You may also be billed if your insurance company denies payment or fails to respond. We encourage you to appeal denials with your insurance company and to call them when you have not received notice that they have paid your bill. When you do receive your bill, payment in full is expected, and appreciated. If you cannot pay your entire balance, please call us and we will try to help.

Having trouble paying your bill? Uninsured? You may be eligible for financial assistance. For information call 330.344.6924 or 1.866.440.0257, or you can go to www.akrongeneral.org/financialpolicy.