



# Cleveland Clinic

Akron General  
Lodi Hospital

## Patient Price Information List

In compliance with state law, Lodi Hospital is providing this price list containing our charges for Room and Board, Emergency Department, Operating Room, Physical Therapy, Occupational Therapy, Respiratory, 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, 2024.

### Room and Board — Per Day Charges

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Semi-Private Room – Swing	\$3,150
Semi-Private Room	\$3,150

### Emergency Department Charges

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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, 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.

Room Charge - Level 1	\$375	Room Charge - Level 5	\$2,741
Room Charge - Level 2	\$698	Critical care - Initial	\$2,957
Room Charge - Level 3	\$1,225	Critical care - Additional	\$1,478
Room Charge - Level 4	\$1,908		

### Operating Room Charges

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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.

Complexity Level	Initial 30 Minutes	Each Addtl. 30 Minutes
1	\$2,619	\$2,613
2	\$3,228	\$2,997
3	\$3,652	\$3,652
4	\$4,464	\$4,464
5	\$4,607	\$4,607
6	\$4,923	\$4,923

## Physical Therapy Charges

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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	\$518	Therapeutic Exercise Per 15 Min	\$221
Gait Training	\$195	Therapeutic Group	\$200

## Occupational Therapy Charges

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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	\$577	Therapeutic Group	\$200
Therapeutic Activity Per 15 Min	\$221		

## Respiratory Charges

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

Airway Inhalation Treatment	\$575	Spirometry	\$436
CPAP Initiation and Management	\$575		

## X-Ray and Radiological Charges

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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 1 View	\$521	XR Spine Lumbosacral 2 or 3 Views	\$641
Ultrasound Abdomen Limited	\$641	CT Scan of Upper Spine without Contrast	\$641
CT Scan of Abdomen and Pelvis with Contrast	\$2,211	XR Abdomen 1 View	\$521
Ultrasound Breast Unilateral Limited	\$521	XR Foot 3 Views Minimum	\$521
XR Chest 2 Views	\$521	XR Knee, 1 or 2 Views	\$521
XR Hip, Unilateral, 2-3 views	\$521	XR Hand 3 Views Minimum	\$521
CT Scan Head or Brain without Contrast	\$641	MRI Abdomen without Contrast Material w/ Dye	\$2,211
MRI Brain with and without Contrast	\$2,211	XR Shoulder 2 Views	\$521
Screening Mammography	\$522	Radex Spine Lumbosacral Min 4 Views	\$641
XR Wrist 3 Views Minimum	\$521	CT Scan of Chest without Contrast	\$641
Screening Digital Tomography of Both Breasts	\$120	Diagnostic Mammography of 1 Breast	\$482
DXA Bone Density Measurement of Hip, Pelvis, Spine	\$641	XR Ankle 3 Views	\$521
CT Scan of Chest with Contrast	\$1,082	MRI Lumbar Spine without Contrast	\$1,401
Ultrasound Retroperitoneal	\$641	XR Knee 4 Views or More	\$641
CT Scan of Abdomen and Pelvis without Contrast	\$1,401	CT Scan of Blood Vessels of Head with Contrast	\$1,082

## Laboratory Charges

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The following charges reflect the hospital's most common laboratory procedures. Patients may have additional charges, depending on the services performed.

Comprehensive Metabolic Panel	\$171	Pregnancy Test, Urine	\$94
Bacterial Blood Culture	\$159	TSH	\$154
Glucose Blood Test	\$22	Antimicrobial Susceptibility	\$93
Bacterial Urine Culture	\$72	Magnesium	\$211
CBC/Differential	\$72	Iron	\$59
Creatine	\$54	HbA1c	\$86
CBC	\$63	Potassium	\$29
Bacterial Culture, aerobic	\$71	Prothrombin Time	\$52
Basic Metabolic Panel	\$112	Iron Binding Capacity	\$81
Thyroxin	\$106	Lipase	\$67
Troponin	\$121	PSA Measurement	\$175
Natriuretic Peptide	\$281	Lactic Acid	\$84
Lipid Panel	\$120	C-Reactive Protein	\$83
Vitamin B12	\$138	Vitamin D	\$237
Urinalysis w/microscopy	\$50	Ferritin	\$126

## Hospital Billing Policies

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Lodi Community Hospital 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](http://www.akrongeneral.org/financialpolicy).