



Patient Price Information List

In compliance with state law, Cleveland Clinic is providing this price list containing our charges for room and board, emergency department, operating room, delivery, physical therapy and other procedures. The hospital's charges are the same for all patients, but a patient's responsibility may vary, depending on payment plans negotiated with individual health insurers. Uninsured or underinsured patients should consult with our admitting and billing staff to determine whether they qualify for discounts. These prices are correct as of January 1, 2020.

Room and Board – Per Day Charges

Coronary care	\$5,136	Chemical Dependency/Detox	\$1,699
Intensive care	\$5,136	Neonatal Intensive Care	\$5,136
Medical/Surgical	\$1,699	Skilled Nursing	\$1,699
Psychiatry	\$1,699	Rehabilitation	\$1,699

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	N/A	Cesarean Section Delivery Single	N/A
Vaginal Delivery Twins	N/A	Cesarean Section Delivery Twins	N/A
Vaginal Delivery Triplets	N/A	Cesarean Section Delivery Triplets	N/A

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, 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	\$ 329	Critical Care, Initial	\$3,876
Level 2	\$ 597	Critical Care, Additional	\$1,974
Level 3	\$1,050		
Level 4	\$1,704		
Level 5	\$2,498		

Operating Room Charges

Operating Room charges are based on the complexity level, with Type 1 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 reflected, and will be billed separately by your physician.

Per 30 minute increment

Level 1 – Initial 30 mins	\$2,113	Level 1 – each additional 30 mins	\$2,113
Level 2 – Initial 30 mins	\$2,424	Level 2 – each additional 30 mins	\$2,424
Level 3 – Initial 30 mins	\$2,953	Level 3 – each additional 30 mins	\$2,953
Level 4 – Initial 30 mins	\$3,610	Level 4 – each additional 30 mins	\$3,610
Level 5 – Initial 30 mins	\$3,726	Level 5 – each additional 30 mins	\$3,726
Level 6 – Initial 30 mins	\$3,981	Level 6 – each additional 30 mins	\$3,981

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	\$	494
Gait Training /per 15 min	\$	181
Therapeutic Exercise /per 15 min	\$	205
Therapeutic Group	\$	128

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	\$	534
Therapeutic Exercise /per 15 min	\$	205
Therapeutic Group	\$	128

Pulmonary Therapy Charges

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	\$	304
CPAP Initiation & Management	\$	304
Spirometry	\$	264

X-Ray and Radiological Charges

The following charges reflect the hospital's 30 most common x-ray and radiological procedures.

Bone Density DEXA	\$ 275	Ultrasound Pregnant Uterus Transvaginal	\$ 580
CT Abdomen & Pelvis w Contrast	\$ 2,570	Ultrasound Pregnant Uterus, Follow up	\$ 399
CT Head Brain wo Contrast	\$ 1,250	Ultrasound Retroperitoneal	\$ 856
CT Thorax w Contrast	\$ 1,511	Ultrasound Transvaginal NonOB	\$ 714
CT Thorax wo Contrast	\$ 1,447	XR Addomen 1 View	\$ 171
CT, Abdomen and Pelvis wo Cont	\$ 1,871	XR Ankle 3 Views	\$ 298
Diagnostic Mammography, unilateral, with CAD	\$ 405	XR Chest 1 View	\$ 158
MRI Brain w wo Contrast	\$ 2,915	XR Chest 2 Views	\$ 200
Myocardial Perfusion, Tomographic	\$ 5,272	XR Foot 3 Views Minimum	\$ 298
Screening Digital Tomography of Both Breasts	\$ 106	XR Hand 3 Views Minimum	\$ 363
Screening Mammography, bilateral, with CAD	\$ 460	XR Hip, Uniteral, 2-3 views	\$ 305
Ultrasound Abdomen Limited	\$ 688	XR Knee 4 Views or More	\$ 366
Ultrasound Breast Unilateral Limited	\$ 398	XR Shoulder 2 Views	\$ 339
Ultrasound of Head and Neck	\$ 990	XR Spine Lumbosacral 2 or 3 Views	\$ 306
Ultrasound Pelvic NonOB	\$ 602	XR Wrist 3 Views Minimum	\$ 296

Laboratory Charges

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

Antibody Screen	\$ 106	Ionized Calcium	\$ 100
Bacterial Urine Culture	\$ 67	Lactic Acid	\$ 78
Basic Metabolic Panel	\$ 109	Lipid Panel	\$ 111
Blood Gases	\$ 243	Magnesium	\$ 194
Blood Typing, ABO	\$ 61	Partial Thromboplastin Time	\$ 57
Blood Typing, Rh (D)	\$ 53	Phosphorus Serum	\$ 165
Carboxyhemoglobin	\$ 79	Potassium	\$ 28
CBC	\$ 58	Prothrombin Time	\$ 48
CBC/Differential	\$ 67	Sodium	\$ 29
Comprehensive Metabolic Panel	\$ 166	Surgical Pathology, Level 4	\$ 942
Glucose, Blood, Quantitative	\$ 45	Troponin	\$ 112
Glucose, Blood, Scan	\$ 20	TSH	\$ 143
HbA1c	\$ 76	Urinalysis w/microscopy	\$ 46
Hemoglobin	\$ 55	Urinalysis, routine	\$ 20
Hemoglobin, methemoglobin	\$ 52	Vitamin D	\$ 219

Hospital Billing Policies

We want to make sure that you receive the full benefits of your insurance coverage as well as consideration under our financial assistance programs, if applicable. Before we bill you, we bill your insurance provider, including Medicare and Medicaid, and any secondary insurance providers. We do not charge interest on any balance due after insurance payments are received. We will send an easy-to-understand 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, you may contact us regarding applying for financial assistance or being set up on a payment plan. Emergency service will never be delayed or withheld on the basis of a patient's ability to pay.

Consumers can access a number of government and private websites, which provide additional information on hospitals' charges and quality. For a complete listing of available online resources, please visit the Consumer's Guide to Quality Health Care in Ohio at ohanet.org/portal.