

Department	Department Description	Charge Number	Description	UB04 Rev Code	In Price	Discounted Price	Medicaid	Medicare	Anthem				Amerigroup	Peach State	Ambetter
							Payment Amount	Payment Amount	Blue Cross	Wellcare					
3010	Hos Med-Surg Unit 1	100305	INTENSIVE CARE	200	620.00	\$ 372.00	\$ 315.83	\$ 134.79						\$ 315.83	\$ 194.87
3010	Hos Med-Surg Unit 1	12347	ROOM & BOARD BH PVT-ROOM CORR.	114	.00	\$ -	\$ -	\$ -						\$ -	\$ -
3010	Hos Med-Surg Unit 1	12346	ROOM & BOARD BH SEMI-PVT CORR.	124	.00	\$ -	\$ -	\$ -						\$ -	\$ -
3010	Hos Med-Surg Unit 1	12344	ROOM & BOARD PRIV CORRECTION	111	.00	\$ -	\$ -	\$ -						\$ -	\$ -
3010	Hos Med-Surg Unit 1	12349	ROOM & BOARD SB PVT CORRECTION	119	.00	\$ -	\$ -	\$ -						\$ -	\$ -
3010	Hos Med-Surg Unit 1	12348	ROOM & BOARD SB SEMI-PVT	129	.00	\$ -	\$ -	\$ -						\$ -	\$ -
3010	Hos Med-Surg Unit 1	12345	ROOM & BOARD SEMI CORRECTION	121	.00	\$ -	\$ -	\$ -						\$ -	\$ -
3200	Hos Outpatient Treatment	3259	ADD SEQUEN. IV PUSH NEW DRUG	260	62.00	\$ 37.20	\$ 31.58	\$ 13.48	\$ 46.50	\$ 13.48	\$ 13.48	\$ 13.48	\$ 31.58	\$ 19.486667	
3200	Hos Outpatient Treatment	3264	ADD SEQUEN. IV PUSH SAME DRUG	260	37.00	\$ 22.20	\$ 18.85	\$ 8.04	\$ 27.75	\$ 8.04	\$ 8.04	\$ 8.04	\$ 18.85	\$ 11.62914	
3200	Hos Outpatient Treatment	3260	ADD. SEQUEN. INFUSION NEW DRUG	260	90.00	\$ 54.00	\$ 45.85	\$ 19.57	\$ 67.50	\$ 19.57	\$ 19.57	\$ 19.57	\$ 45.85	\$ 28.2870972	
3200	Hos Outpatient Treatment	3266	ARTHROCENTESIS MAJOR JOINT	360	374.00	\$ 224.40	\$ 190.52	\$ 81.31	\$ 280.50	\$ 81.31	\$ 81.31	\$ 190.52	\$ 117.548604		
3200	Hos Outpatient Treatment	3251	BLADDER IRRIGATION	761	244.00	\$ 146.40	\$ 124.29	\$ 53.05	\$ 183.00	\$ 53.05	\$ 53.05	\$ 124.29	\$ 76.6894635		
3200	Hos Outpatient Treatment	3247	BONE MARROW ASPIRATION	761	846.00	\$ 507.60	\$ 430.95	\$ 183.92	\$ 634.50	\$ 183.92	\$ 183.92	\$ 430.95	\$ 265.898714		
3200	Hos Outpatient Treatment	3248	BONE MARROW ASPIRATION & BX	761	26.00	\$ 15.60	\$ 13.24	\$ 5.65	\$ 19.50	\$ 5.65	\$ 5.65	\$ 13.24	\$ 8.17182808		
3200	Hos Outpatient Treatment	3246	BONE MARROW NEEDLE BX (CHIP)	761	124.00	\$ 74.40	\$ 63.17	\$ 26.96	\$ 93.00	\$ 26.96	\$ 26.96	\$ 63.17	\$ 38.9733339		
3200	Hos Outpatient Treatment	3065689	CARIMUNE 500MG INJ	636	143.00	\$ 85.80	\$ 72.84	\$ 31.09	\$ 107.25	\$ 31.09	\$ 31.09	\$ 72.84	\$ 44.9450544		
3200	Hos Outpatient Treatment	3200904	CENTRAL LINE INSERTION >AGE 5	760	2568.00	\$ 1,540.80	\$ 1,308.14	\$ 558.28	\$ 1,926.00	\$ 558.28	\$ 558.28	\$ 1,308.14	\$ 807.125173		
3200	Hos Outpatient Treatment	3200011	CHANGE G-TUBE	761	531.00	\$ 318.60	\$ 270.49	\$ 115.44	\$ 398.25	\$ 115.44	\$ 115.44	\$ 270.49	\$ 166.893873		
3200	Hos Outpatient Treatment	3258	COLLECT BLOOD FROM IMPLANT/VAD	300	56.00	\$ 33.60	\$ 28.53	\$ 12.17	\$ 42.00	\$ 12.17	\$ 12.17	\$ 28.53	\$ 17.6008605		
3200	Hos Outpatient Treatment	5047	CONCURRENT INFUSION	260	44.00	\$ 26.40	\$ 22.41	\$ 9.57	\$ 33.00	\$ 9.57	\$ 9.57	\$ 22.41	\$ 13.8292475		
3200	Hos Outpatient Treatment	3263	FOLEY CATH INSERTION	761	92.00	\$ 55.20	\$ 46.86	\$ 20.00	\$ 69.00	\$ 20.00	\$ 20.00	\$ 46.86	\$ 28.9156994		
3200	Hos Outpatient Treatment	3253	FOLEY CATH INSERTION DIFFICULT	761	148.00	\$ 88.80	\$ 75.39	\$ 32.18	\$ 111.00	\$ 32.18	\$ 32.18	\$ 75.39	\$ 46.5165988		
3200	Hos Outpatient Treatment	3262	HYDRATION INFUS EA HR UP TO 8H	260	72.00	\$ 43.20	\$ 36.68	\$ 15.65	\$ 54.00	\$ 15.65	\$ 15.65	\$ 36.68	\$ 22.6296778		
3200	Hos Outpatient Treatment	3065690	IMMUNE GLOBULIN 500MG INJ	636	143.00	\$ 85.80	\$ 72.84	\$ 31.09	\$ 107.25	\$ 31.09	\$ 31.09	\$ 72.84	\$ 44.9450544		
3200	Hos Outpatient Treatment	3255	INITIAL IV ACCESS	260	95.00	\$ 57.00	\$ 48.39	\$ 20.65	\$ 71.25	\$ 20.65	\$ 20.65	\$ 48.39	\$ 29.8586026		
3200	Hos Outpatient Treatment	3265	IRRIGATION OF IMPLANTED VENOUS	260	95.00	\$ 57.00	\$ 48.39	\$ 20.65	\$ 71.25	\$ 20.65	\$ 20.65	\$ 48.39	\$ 29.8586026		
3200	Hos Outpatient Treatment	3261	IV HYDRATION INITIAL 31-60MIN	260	178.00	\$ 106.80	\$ 90.67	\$ 38.70	\$ 133.50	\$ 38.70	\$ 38.70	\$ 90.67	\$ 55.945922		
3200	Hos Outpatient Treatment	3200045	IV INJECTION; SINGLE/INITIAL	260	120.00	\$ 72.00	\$ 61.13	\$ 26.09	\$ 90.00	\$ 26.09	\$ 26.09	\$ 61.13	\$ 37.7161296		
3200	Hos Outpatient Treatment	3200029	IV THERAPY INFUSION UP TO 1 HR	260	301.00	\$ 180.60	\$ 153.33	\$ 65.44	\$ 225.75	\$ 65.44	\$ 65.44	\$ 153.33	\$ 94.6046251		
3200	Hos Outpatient Treatment	3203007	LEGAL BLOOD DRAW	300	80.00	\$ 48.00	\$ 40.75	\$ 17.39	\$ 60.00	\$ 17.39	\$ 17.39	\$ 40.75	\$ 25.1440864		
3200	Hos Outpatient Treatment	3203759	LUMB PUNC DX (SPINAL TAP)	761	878.00	\$ 526.80	\$ 447.25	\$ 190.88	\$ 658.50	\$ 190.88	\$ 190.88	\$ 447.25	\$ 275.956348		
3200	Hos Outpatient Treatment	3220092	LUMBAR CATH INSERT & INJECT	761	389.00	\$ 233.40	\$ 198.16	\$ 84.57	\$ 291.75	\$ 84.57	\$ 84.57	\$ 198.16	\$ 122.26312		
3200	Hos Outpatient Treatment	3200052	OTHER DIAG. INJECTION	761	95.00	\$ 57.00	\$ 48.39	\$ 20.65	\$ 71.25	\$ 20.65	\$ 20.65	\$ 48.39	\$ 29.8586026		
3200	Hos Outpatient Treatment	3200292	REPEAT IM INJECT ANTIBIOTIC	761	113.00	\$ 67.80	\$ 57.56	\$ 24.57	\$ 84.75	\$ 24.57	\$ 24.57	\$ 57.56	\$ 35.516022		
3200	Hos Outpatient Treatment	3200003	REPEAT SQ OR IM INJECTION	260	95.00	\$ 57.00	\$ 48.39	\$ 20.65	\$ 71.25	\$ 20.65	\$ 20.65	\$ 48.39	\$ 29.8586026		
3200	Hos Outpatient Treatment	3200037	SQ OR IM INJ	260	113.00	\$ 67.80	\$ 57.56	\$ 24.57	\$ 84.75	\$ 24.57	\$ 24.57	\$ 57.56	\$ 35.516022		
3200	Hos Outpatient Treatment	3252	STRAIGHT CATH - TEMPORARY	761	63.00	\$ 37.80	\$ 32.09	\$ 13.70	\$ 47.25	\$ 13.70	\$ 13.70	\$ 32.09	\$ 19.800968		
3200	Hos Outpatient Treatment	3249	THERA. INFUSION EA ADD HR	260	72.00	\$ 43.20	\$ 36.68	\$ 15.65	\$ 54.00	\$ 15.65	\$ 15.65	\$ 36.68	\$ 22.6296778		
3200	Hos Outpatient Treatment	3101367	TX ROOM WITHOUT PROCEDURE	761	172.00	\$ 103.20	\$ 87.62	\$ 37.39	\$ 129.00	\$ 37.39	\$ 37.39	\$ 87.62	\$ 54.0597858		
3200	Hos Outpatient Treatment	3254	VENIPUNCTURE (PORT/VAD)	761	84.00	\$ 50.40	\$ 42.79	\$ 18.26	\$ 63.00	\$ 18.26	\$ 18.26	\$ 42.79	\$ 26.4012907		
3200	Hos Outpatient Treatment	3256	VENIPUNCTURE (CVL/PICC)	300	92.00	\$ 55.20	\$ 46.86	\$ 20.00	\$ 69.00	\$ 20.00	\$ 20.00	\$ 46.86	\$ 28.9156994		
3200	Hos Outpatient Treatment	3257	VENIPUNCTURE (PERIPHERAL VENUS)	761	14.00	\$ 8.40	\$ 7.13	\$ 3.04	\$ 10.50	\$ 3.04	\$ 3.04	\$ 7.13	\$ 4.40021512		