Hospital Price Transparency

CPT/HCPCS	<u>Code</u>	Service Provider	<u>Description</u>	Gross Cha	rge	Minimum Negotiated Charge		Maximum Negotiated Charge		Discounted Cash Rate
90832	914	Therapist	Psychotherapy, 30 min	\$	150	\$	50	\$	160	Uninsured or underinsured patients should reference our Financial Assistance policy for additional information.
90832	914	MD	Psychotherapy, 30 min	\$	160	\$	50	\$	160	Uninsured or underinsured patients should reference our Financial Assistance policy for additional information.
90834	914	Therapist	Psychotherapy, 45 min	\$	160	\$	50	\$	160	Uninsured or underinsured patients should reference our Financial Assistance policy for additional information.
90834	914	MD	Psychotherapy, 45 min	\$	220	\$	50	\$	160	Uninsured or underinsured patients should reference our Financial Assistance policy for additional information.
90837	914	Therapist	Psychotherapy, 60 min	\$	170	\$	50	\$	160	Uninsured or underinsured patients should reference our Financial Assistance policy for additional information.
90837	914	MD	Psychotherapy, 60 min	\$	260	\$	50	\$	160	Uninsured or underinsured patients should reference our Financial Assistance policy for additional information.
90846	916	Therapist	Family psychotherapy, not including patient, 50 min	\$	158	\$	50	\$	160	Uninsured or underinsured patients should reference our Financial Assistance policy for additional information.
90846	916	MD	Family psychotherapy, not including patient, 50 min	\$	220	\$	50	\$	160	Uninsured or underinsured patients should reference our Financial Assistance policy for additional information.
90847	916	Therapist	Family psychotherapy, including patient, 50 min	\$	158	\$	50	\$	160	Uninsured or underinsured patients should reference our Financial Assistance policy for additional information.
90847	916	MD	Family psychotherapy, including patient, 50 min	\$	220	\$	50	\$	160	Uninsured or underinsured patients should reference our Financial Assistance policy for additional information.
90853	915	Therapist	Group psychotherapy	\$	100	\$	30	\$	107	Uninsured or underinsured patients should reference our Financial Assistance policy for additional information.
90853	915	MD	Group psychotherapy	\$	120	\$	30	\$	107	Uninsured or underinsured patients should reference our Financial Assistance policy for additional information.