

# Hospital Price Estimates for Uninsured Patients\*\*

## OUTPATIENT SURGICAL PROCEDURES

| PROCEDURE                               | PRICE RANGE          |
|---|----------------------|
| • Tonsil Removal                        | \$6,700 to \$10,130  |
| • Colonoscopy with Biopsy               | \$3,801 to \$5,701   |
| • Appendectomy                          | \$10,184 to \$15,276 |
| • Small Bowel Endoscopy                 | \$2,737 to \$4,106   |
| • Breast Biopsy with Imaging            | \$2,460 to \$3,689   |
| • Arthroscopic Shoulder Surgery         | \$14,951 to \$22,427 |
| • Carpal Tunnel Surgery                 | \$4,061 to \$6,091   |
| • Arthroscopic Knee Surgery             | \$5,474 to \$8,212   |
| • Removal of Kidney Stone (Lithotripsy) | \$5,396 to \$8,095   |
| • Vaginal Hysterectomy                  | \$10,798 to \$16,197 |
| • Port Placement                        | \$5,887 to \$8,831   |
| • Revision of Cervix (Cerclage)         | \$3,816 to \$5,724   |
| • Drainage of Skin Abscess              | \$255 to \$383       |
| • Cystoscopy                            | \$16,893 to \$25,339 |
| • Hernia Repair with MESH               | \$8,541 to \$12,811  |
| • EGD Biopsy                            | \$3,042 to \$4,562   |
| • Diagnostic Laryngoscopy               | \$275 to \$412       |
| • Revision of Knee Joint                | \$16,614 to \$24,922 |
| • Hysteroscopy Biopsy                   | \$5,286 to \$7,930   |
| • Laparoscopy Remove Adnexal Structures | \$11,604 to \$17,406 |

## OUTPATIENT DIAGNOSTIC and LABORATORY SERVICES

| PROCEDURE                                      | PRICE RANGE        |
|--|--------------------|
| • Thoracic Spine CT                            | \$548 to \$822     |
| • Pelvic Ultrasound                            | \$240 to \$360     |
| • PET Scan with CT                             | \$3,062 to \$4,592 |
| • Diagnostic Colonoscopy                       | \$2,595 to \$3,892 |
| • ECG  | \$139 to \$208     |
| • C-Spine MRI                                  | \$691 to \$1,036   |
| • Bone Density (DEXA)                          | \$133 to \$199     |
| • Diagnostic Mammograms (both breasts)         | \$175 to \$263     |
| • Chest X-Ray (one view)                       | \$106 to \$160     |
| • CT Angio Chest                               | \$1,161 to \$1,741 |
| • Breast Biopsy Ultrasound Guidance            | \$2,742 to \$4,112 |
| • Whole Body Bone Scan                         | \$816 to \$1,224   |
| • MRI Both Breasts (with and without contrast) | \$1,562 to \$2,344 |
| • Barium/Rehab Swallow                         | \$244 to \$366     |
| • MRI Pelvis (with and without contrast)       | \$1,150 to \$1,725 |
| • MRI Neck Spine (w/o dye)                     | \$691 to \$1,036   |
| • Electrocardiogram                            | \$139 to \$208     |
| • Upper GI X-Ray                               | \$327 to \$491     |
| • Complete Blood Count                         | \$36 to \$54       |
| • Metabolic Panel                              | \$57 to \$86       |
| • Comprehensive Metabolic Panel                | \$78 to \$118      |
| • Drug Screen                                  | \$132 to \$198     |

\*\*Prices include the Orlando Health uninsured discount amount.

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## INPATIENT DIAGNOSIS RELATED GROUPS (DRG)

| PROCEDURE   | PRICE RANGE          | AVERAGE DAYS IN THE HOSPITAL |
|---|----------------------|------------------------------|
| • COPD ( <i>Chronic Obstructive Pulmonary Disease</i> ) | \$9,608 to \$14,411  | 3 to 5                       |
| • Heart Failure   | \$11,888 to \$17,832 | 4 to 5                       |
| • Chest Pain  | \$5,642 to \$8,464   | 1 to 2                       |
| • Gastrointestinal Bleed                                | \$9,459 to \$14,189  | 3 to 4                       |
| • Cellulitis  | \$7,454 to \$11,181  | 3 to 4                       |
| • Diabetes  | \$6,589 to \$9,884   | 3                            |
| • Kidney Failure  | \$8,147 to \$12,220  | 3 to 4                       |
| • Kidney and Urinary Tract Infection                    | \$6,445 to \$9,668   | 2 to 3                       |
| • Blood Poisoning                                       | \$18,227 to \$27,341 | 6                            |
| • Pneumonia   | \$9,392 to \$14,088  | 4                            |

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## SELF PAY OBSTETRICS PACKAGE PLANS

| PROCEDURE                               | PRICE RANGE |
|---|-------------|
| Florida Resident Rates                  |             |
| • Vaginal Delivery                      | \$5,000     |
| • Vaginal Delivery (High Risk Factors)  | \$7,000     |
| • Cesarean Delivery                     | \$8,000     |
| • Cesarean Delivery (High Risk Factors) | \$10,000    |
| Non – Florida Resident Rates            |             |
| • Vaginal Delivery                      | \$6,500     |
| • Vaginal Delivery (High Risk Factors)  | \$9,100     |
| • Cesarean Delivery                     | \$10,400    |
| • Cesarean Delivery (High Risk Factors) | \$13,400    |

Prices do not include physician fees, any visits at Orlando Health not resulting in delivery, concierge/amenities or newborns that stay longer than mother. There are additional costs for additional gestations, sterilization and circumcision procedures.

\*\*Payment in full is due prior to delivery for this agreement to be valid.

\*\* Please contact the Patient Access office for additional details at 321.843.1800.

# We thank you for choosing Orlando Health.

The charges provided in this guide are for hospital services only and do not reflect any charges you may receive from the physicians caring for you. In addition, these charges do not include any radiology, cardiology, anesthesiology or pathology fees.

The information provided is an estimate of charges associated with these procedures and diagnoses and does not account for unforeseen complications or additional healthcare conditions that may increase the cost of your care. Treatment plans vary for each patient and is dictated by your physician and individual condition. Therefore, the charges you incur may differ significantly from what is listed here.

It is Orlando Health's intent to be transparent with our pricing and provide you with the information you need to make decisions about your care, including an accurate financial estimate of charges. You can request a specific estimate, based on your physician(s) order by phone at 844.318.4855, Monday – Friday, 8:00 am – 4:30 pm or by email at [PriceEstimates@OrlandoHealth.com](mailto:PriceEstimates@OrlandoHealth.com).

Additionally, following your care, an itemized statement can be requested through our Patient Accounting Department by phone at 844.318.4855, Monday – Friday 8:00 am – 4:30 pm or by email at [Billing@OrlandoHealth.com](mailto:Billing@OrlandoHealth.com).

Orlando Health also offers assistance for patients who would like to obtain health plan coverage through the Health Insurance Marketplace. Through an affiliation with Primary Care Access Network, Patient Navigators are available by appointment by calling 877.564.5031 or email at [cflnavigator@gmail.com](mailto:cflnavigator@gmail.com).