



# KETTERING HEALTH NETWORK<sup>SM</sup>

## *Patient Price Information List*

*January 1, 2010*

*Physical, Occupational & Pulmonary Therapy*

<i>Procedure Description</i>	<i>Price</i>
<b>PHYSICAL AND OCCUPATIONAL THERAPY</b>	
PT/OT THERAPY EVALUATION 1ST VISIT	\$441.50
PT/OT SELF-CARE/HOME MGT 15 MIN **	\$151.25
PT/OT THERAPUETIC ACTIVITIES 15 MIN **	\$170.75
PT/OT THERAPUETIC EXERCISE 15 MIN **	\$170.75
PT/OT E-STIM UNATT NON WOUND CARE **	\$122.00
PT/OT ULTRASOUND RX 15 MIN **	\$125.75
PT/OT GAIT TRAINING 15 MIN **	\$117.25
PT/OT MANUAL THERAPY 15 MIN **	\$175.50
PT/OT RE-EVALUATION **	\$285.75
<b>Pulmonary Services</b>	
<b>Pulmonary Rehab</b>	
IND TX/15 MIN > STRENGTH RESP **	\$172.50
IND TX/15 MIN IMPROVE RESP FUNC **	\$172.50
GRP TX/VISIT IMPROVE RESP FUNC **	\$132.25
PULM REHAB RE-EVALUATION **	\$129.50
PULMONARY ASSESSMENT **	\$90.00
SMOKE/TOBACCO CESSATION > 10 MIN **	\$30.50
SMOKE/TOBACCO CESSATION 3 - 10 MIN **	\$30.50
<b>COMPLETE PULMONARY FUNCTION TEST COMPONENTS</b>	
PRE/POST BRONCH SPIROGRAM **	\$187.00
PULMONARY DIFFUSION CAPACITY **	\$224.75
AEROSOL INHAL TREATMENT **	\$136.50
PULSE OX-MULTIPLE **	\$79.50
ARTERIAL BLOOD GAS **	\$201.00

*\*\* These may be done in combination of one or more of the items. Some of the items are timed and can be billed in multiple units.*

**Please note: The prices listed are at our standard rate for each line item charge.**

Your actual bill may contain procedures, tests, supplies and medications specific to your case.

**If you have insurance, including Medicare or Medicaid plans,** the amount you pay out of pocket will be lower depending on your insurance plan's contracted rate, your specific benefit plan, and which hospital

**If you do not have insurance,** you will qualify for one of our discount programs. For specific program information, please contact one of our Financial Counselors at any of the numbers below:

Grandview Hospital	937-723-4072
Kettering Medical Center	937-298-3399 ext 55838
Kettering Medical Center-Sycamore	937-866-0551 ext 46172
Southview Hospital	937-401-6190

**\*\* These Prices apply to Kettering, Grandview, Sycamore, and Southview Hospitals and all associated affiliates \*\***