

Signature Psychiatric Hospital
 Shoppable Services Summary
 Updated January 1, 2021

CPT code	90792	90833							
Description	Inpatient /	Inpatient /	Partial Hos	Intensive C	Transcrani	Transcrani	Transcrani	Outpatien	Outpatien
Charge Ma	2100	2100	700	525	600	400	500	185	80
Cash Price	900	900	225	175	270	175	225	N/A	N/A
Aetna Uscl	886	886	381	220	360	240	300	111	80
All Savers (880	880	365	225				185	80
AMB Cenpatico Home State H								96.37	
Beacon He	849	849	398	260					
Blue Cross	915	915	300	215	474.72	226.01			
Blue Shield	1000		375					70.92	11.58
Cenpatico,	825	825	300	180					
Cigna Health Springs									
Cigna PPO	910	910	390	224	273	192		75	28
Cigna - Val	970								
Comp Allia	1000		375	275					
Corphealth/LifeSynch								185	80
Coventry									
Fox-Everett Inc									
GEHA/Ubh	880	880	365	225	270	280	275	185	
General Motors Detroit Clm								92.5	40
Goldenrule	880	880	365	225				95	36.25
Great West/Cigna GWH-CIGNA								185	
Healthy Exchange								70.92	11.58
Humana	915	915	375	245					
Lewermark Student									
Medicare Complete									36.25
Mercy Ma	918	819	353	270	300	275	300		
Missouri Medicare Select									
New Direc	975	975	340	240	370.57	176.54	455.27		
New Directions Behavioral Health-VALOR Program									
North Kan:	850	850							
Optum He	880	880	365	225					36.25
Oscar Uhc									
Penn Western Global Care I									
Railroad Medicare									
Tricare West Region Claims								108.1	
UBH-Unite	880	880	365	225				95	36.25
UMR	880	880	365	225					
United Healthcare Medicare			350	225				95	36.25
Value Opti	849	849	398	260				92.5	40
Minimum	825	819	300	180	270	176.54	275	70.92	11.58

Maximum	1000	975	398	275	474.72	280	455.27	185	80
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Notes:

- 1) Inpatient service packages identified in the "Description" line above include all supplies and services EXCEPT
- 2) Hospital Price Transparency Requirements include "300 shoppable services". The services listed above represent
- 3) Blank fields indicate services/codes not provided/billed in at least 12 months, or services for which no negative
- 4) Data presented in the table above will be updated at least annually, but is subject to change between updates

99203 Outpatient	99204 Outpatient	99213 Outpatient	99214 Outpatient	99231 Subsequer	99306 New Inpat	99307 Subsequer	99308 Subsequer	99309 Subsequer	9079295 Telemedic
150	225	140	155	85	175	75	85	90	185
N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
		38	57.01		175	75	85		
		140							
		38.93	155						
		33.04	49.34		175		85		
		38.93							
		49.17	77.33				85		185
									185
		140							
		140	155		175	75	85	90	185
							85		
		95							
		70	155						
		33							
									185
		33.04	49.34						
		33					65		185
					164.59		57.7	88.2	
		33			160		65		
			155						
150	110.84	43.93	67.53	85					
		33	43		160		65		
		33			160		65	90	
		70							
150	110.84	33	43	85	160	75	57.7	88.2	185

150 110.84 140 155 85 175 75 85 90 185

T Physician/Non-Physician Practitioner services and ECT services, where applicable.
resent a comprehensive list of all service offerings currently available (billed since 1/1/2020) under the hospital's negotiated rate exists.
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9083395	9921395	9921495	9930695	9930895	90792GT	90792SA	90833GT	99204GT	99205GT
Telemedic	Telemedic	Telemedic	Telemedic	Telemedic	Telemedic	Telemedic	Telemedic	Telemedic	Telemedic
80	140	155	175	85	185	185	80	225	275
N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
			175	85	111		80		
					185				
						70.92			
						70.92	11.58		
							96.37		
80	125		175	85					
80	140	155	175						
		155		85	185		80		
					185				
					92.5		36.25		
							40		
							36.25		
	140								
						70.92	11.58		
							80		
				85					
			175	57.7					
					85				
					185				
			175	85				110.88	275
					185				
					95			36.25	
								36.25	
			175	65					
80	125	155	175	57.7	70.92	70.92	11.58	110.88	275

80	140	155	175	85	185	96.37	80	110.88	275
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al's license, including inpatient, outpatient, and ancillary service offerings. Total service offerings do not amou

99213GT 99214GT 99306GW 99308GW

Telemedic Telemedic Telemedic Telemedicine Subsequent Inpatient Services - Expanded problem focused

125 155 175 85
N/A N/A N/A N/A

38 155 175 85
140

33.04 175
33.04

125

33
70
33

33.04

125

65

85

65

63.35 155
33 43 175 65
33

33 43 175 65

140

155

175

85

nt to 300 separately-identifiable shoppable services.