

**PROVIDENCE EXTENDED CARE  
SCHEDULE OF CHARGES  
JANUARY 1, 2020**

<u>SERVICE:</u> _____	<u>CHARGE:</u> _____
Nursing Care, Room and Board, Laundry, Housekeeping, Social and Activities Services	\$ 1,041.00/day
Therapies: Physical, Occupational, Speech, Respiratory	\$ 137.00/unit (15 minutes)
Prescription Drugs	List Price
Medical Supplies	List Price
In House Physician Services	Per Fee Schedule
 Specialty Beds:	
KinAir MedSurg	\$ 169.00/day
First Step Select Overlay	\$ 70.00/day
BariMaxx	\$ 268.00/day
BariMaxx II	\$ 308.00/day
MaxxAir ETS	\$ 160.00/day
Synergy 48"	\$ 38.00/day
Synergy 36"	\$ 18.00/day
P500	\$ 57.00/day
300WS	\$ 23.00/day
Total Care	\$ 118.00/day
TotalCare Bariatric Plus	\$ 150.00/day
Burke Tri-Flex w/o Air mat	\$ 100.00/day
Burke Tri-Flex w/ Air Mat	\$ 138.00/day
Versa Care	\$ 62.00/day
Envision	\$ 39.00/day
Envella	\$ 108.00/day
Specialty Beds	\$ 118.00/day
 Wound Vacs:	
VAC Freedom	\$ 246.00/day
VAC ATS Therapy	\$ 244.00/day
Kalypto Wound Vac	\$ 161.00/day
Veriflow	\$ 73.00/day

The following services are not provided by Providence Extended Care and are billed separately by the provider. (Exception: Lab and X-ray are provided to Medicare patients on a Part A covered stay and VA patients on a VA covered stay.)

- Laboratory
- X-ray
- Physician Fees
- Emergency Transportation
- Personal Services (i.e., beauty/barber shop, newspaper, cable TV, internet access, special hygiene supplies for personal preferences, etc.).

CPT Code	Description	Time in Min	Billed Charge
92507	Speech.language Treatment	Varies	\$ 137.00/unit (15 minutes)
92521	Evaluation of speech fluency	Varies	\$ 137.00/unit (15 minutes)
92522	Evaluation of speech sound pr	Varies	\$ 137.00/unit (15 minutes)
92523	Evaluation of speech sound	Varies	\$ 137.00/unit (15 minutes)
92524	Behavioral and qualitative ana	Varies	\$ 137.00/unit (15 minutes)
92526	Swalloe Function Therapy	Varies	\$ 137.00/unit (15 minutes)
92607	Exam for speech device Rx	Varies	\$ 137.00/unit (15 minutes)
92608	Eval of speech Device add (15)	Varies	\$ 137.00/unit (15 minutes)
92609	Use of speech device	Varies	\$ 137.00/unit (15 minutes)
92610	Evaluate swallowing function	Varies	\$ 137.00/unit (15 minutes)
96105	Assessment of Aphasia add (15)	Varies	\$ 137.00/unit (15 minutes)
97032	E-Stim 1:1	15	\$ 137.00
97110	Therapeutic Exercises	15	\$ 137.00
97112	Neuromuscular ReEd	15	\$ 137.00
97116	Gait Training	15	\$ 137.00
97129	Ther IVNTJ 1 <sup>st</sup> 15 Min	15	\$ 137.00
97130	Ther IVNT J EA ADD 15 Min	Varies	\$ 137.00/unit (15 minutes)
97140	Manual Therapy	15	\$ 137.00
97161	PT Eval Low Complex	20	\$ 183.00
97162	PT Eval Mod Complex	30	\$ 274.00
97163	PT Eval High Complex	45	\$ 411.00
97164	PT Re-eval Est Plan Care	Varies	\$ 137.00/unit (15 minutes)
97165	OT Eval Low Complex	30	\$ 274.00
97166	OT Eval Mod Complex	30	\$ 274.00
97167	OT Eval High Complex	30	\$ 274.00
97168	OT Re-eval Est Plan Care	Varies	\$ 137.00/unit (15 minutes)
97530	Functional Training	15	\$ 137.00
97535	Self Care Mangement Trg	15	\$ 137.00
97537	Reintergration Training	15	\$ 137.00
97542	Wheelchair Training	15	\$ 137.00
97760	Initial Orthot Training	15	\$ 137.00
97761	Initial Prost Training	15	\$ 137.00
97763	Orth/Proth Mgnt/Train	15	\$ 137.00

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