

**PROVIDENCE TRANSITIONAL CARE CENTER  
SCHEDULE OF CHARGES  
JANUARY 1, 2021**

<u>SERVICE:</u>	<u>CHARGE:</u>
Nursing Care, Room and Board, Laundry, Housekeeping, Social and Activities Services	\$ 1,592.00/day
Therapies: Physical, Occupational, Speech, Respiratory Common CPT codes: see next page	\$ 141.00/unit (15 minutes)
Prescription Drugs	List Price
Medical Supplies	List Price
In House Physician Services	Per Fee Schedule
<b>Specialty Beds:</b>	
KinAir MedSurg	\$ 174.00/day
First Step Select Overlay	\$ 72.00/day
BariMaxx	\$ 276.00/day
BariMaxx II	\$ 317.00/day
MaxxAir ETS	\$ 165.00/day
Synergy 48"	\$ 39.00/day
Synergy 36"	\$ 18.50/day
P500	\$ 59.00/day
300WS	\$ 24.00/day
TotalCare Bariatric Plus	\$ 155.00/day
Total Care	\$ 122.00/day
Burke Tri-Flex w/o Air mat	\$ 103.00/day
Burke Tri-Flex w/ Air Mat	\$ 142.00/day
Versa Care	\$ 64.00/day
Envision	\$ 40.00/day
Envella	\$ 111.00/day
Specialty Beds	\$ 122.00/day
<b>Wound Vacs:</b>	
VAC Freedom	\$ 253.00/day
VAC ATS Therapy	\$ 251.00/day
Kalypto Wound Vac	\$ 166.00/day
Veriflow	\$ 75.00/day

The following services are not provided by Providence Transitional Care Center 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	\$ 279.00
92521	Evaluation of speech fluency	Varies	\$ 421.00
92522	Evaluation of speech sound pr	Varies	\$ 421.00
92523	Evaluation of speech sound	Varies	\$ 421.00
92524	Behavioral and qualitative ana	Varies	\$ 421.00
92526	Swallow Function Therapy	Varies	\$ 279.00
92607	Exam for speech device Rx	Varies	\$ 421.00
92608	Eval of speech Device add (15)	Varies	\$ 141.00/unit (15 minutes)
92609	Use of speech device	Varies	\$ 279.00
92610	Evaluate swallowing function	Varies	\$ 421.00
96105	Assessment of Aphasia add (15)	Varies	\$ 279.00/unit (15 minutes)
97032	E-Stim 1:1	15	\$ 141.00
97110	Therapeutic Exercises	15	\$ 141.00/unit (15 minutes)
97112	Neuromuscular ReEd	15	\$ 141.00/unit (15 minutes)
97116	Gait Training	15	\$ 141.00/unit (15 minutes)
97129	Ther IVNTJ 1 <sup>st</sup> 15 Min	15	\$ 141.00
97130	Ther IVNT J EA ADD 15 Min	Varies	\$ 141.00/unit (15 minutes)
97140	Manual Therapy	15	\$ 141.00/unit (15 minutes)
97161	PT Eval Low Complex	20	\$ 279.00
97162	PT Eval Mod Complex	30	\$ 279.00
97163	PT Eval Hlgh Complex	45	\$ 279.00
97164	PT Re-eval Est Plan Care	Varies	\$ 141.00/unit
97165	OT Eval Low Complex	30	\$ 279.00
97166	OT Eval Mod Complex	30	\$ 279.00
97167	OT Eval High Complex	30	\$ 279.00
97168	OT Re-eval Est Plan Care	Varies	\$ 141.00
97530	Functional Training	15	\$ 141.00/unit (15 minutes)
97535	Self Care Mangement Trg	15	\$ 141.00/unit (15 minutes)
97537	Reintergration Training	15	\$ 141.00/unit (15 minutes)
97542	Wheelchair Training	15	\$ 141.00/unit (15 minutes)
97760	Initial Orthot Training	15	\$ 141.00/unit (15 minutes)
97761	Initial Prost Training	15	\$ 141.00/unit (15 minutes)
97763	Orth/Proth Mgnt/Train	15	\$ 141.00/unit (15 minutes)

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