## MOUNTAIN VIEW HOSPITAL

## 3001 Scenic Highway Gadsden, AL 35904 Shoppable Services Table

Updated 02/01/2024 State License H2802

Service Desciprion	Code	Settings	Standard Gross Charge	Standard Negotiate d Charge	Payer	Plan		Charge Based On	Minimum	Standard Maximum Charge	
Behavioral Health; Hospital Acute Care; rm and board; pe	124	RC	1000	822	Aetna Insurance	AllPlans	822	per diem	575		
E & M New Low Complexity	99221	CPT	200	77.69	Aetna Insurance	AllPlans	77.69	fee schedule	62	111.71	
E & M New Moderate Complexity	99222	CPT	225	104.42	Aetna Insurance	AllPlans	104.42	fee schedule	104.42	164.33	
E & M New High Complexity	99223	CPT	250	141	Aetna Insurance	AllPlans	141	fee schedule	141	211.58	
Rounding Low Complexity	99231	CPT	125	41	Aetna Insurance	AllPlans	41	fee schedule	24.34	51.78	
Rounding Moderate Complexity	99232	CPT	150	60	Aetna Insurance	AllPlans	60	fee schedule	44	73.95	
Rounding High Complexity	99233	CPT	175	87	Aetna Insurance	AllPlans	87	fee schedule	64.27	103.93	
Discharge Services	99236	CPT	225	72	Aetna Insurance	AllPlans	72	fee schedule	44.84	77.34	
Behavioral Health; Hospital Acute Care; rm and board; pe	124	RC	1000	827.49	Alabama Medicaid Insurance	AllPlans	827.49	per diem	575	925	
E & M New Low Complexity	99221	CPT	200	88.96	Alabama Medicaid Insurance	AllPlans	88.96	fee schedule	62	111.71	
E & M New Moderate Complexity	99222	CPT	225	120.44	Alabama Medicaid Insurance	AllPlans	120.44	fee schedule	104.42	164.33	
E & M New High Complexity	99223	CPT	250	177.14	Alabama Medicaid Insurance	AllPlans	177.14	fee schedule	141	211.58	
Rounding Low Complexity	99231	CPT	125	34.43	Alabama Medicaid Insurance	AllPlans	34.43	fee schedule	24.34	51.78	
Rounding Moderate Complexity	99232	CPT	150	63.99	Alabama Medicaid Insurance	AllPlans	63.99	fee schedule	44	73.95	
Rounding High Complexity	99233	CPT	175	91.33	Alabama Medicaid Insurance	AllPlans	91.33	fee schedule	64.27	103.93	
Discharge Services	99236	CPT	225	63.57	Alabama Medicaid Insurance	AllPlans	63.57	fee schedule	44.84	77.34	

Service Desciprion	Code	Settings	Standard Gross Charge	Standard Negotiate d Charge	Payer	Plan		Charge Based On	Minimum	Standard Maximum Charge
Behavioral Health; Hospital Acute Care; rm and board; pe	124	RC	1000	575	All Kids Health Insurance	AllPlans	575	per diem	575	
E & M New Low Complexity	99221	CPT	200	111.71	All Kids Health Insurance	AllPlans	111.71	fee schedule	62	111.71
E & M New Moderate Complexity	99222	CPT	225	151.7	All Kids Health Insurance	AllPlans	151.7	fee schedule	104.42	164.33
E & M New High Complexity	99223	CPT	250	211.58	All Kids Health Insurance	AllPlans	211.58	fee schedule	141	211.58
Rounding Low Complexity	99231	CPT	125	51.78	All Kids Health Insurance	AllPlans	51.78	fee schedule	24.34	51.78
Rounding Moderate Complexity	99232	CPT	150	73.95	All Kids Health Insurance	AllPlans	73.95	fee schedule	44	73.95
Rounding High Complexity	99233	CPT	175	103.93	All Kids Health Insurance	AllPlans	103.93	fee schedule	64.27	103.93
Discharge Services	99236	CPT	225	75.99	All Kids Health Insurance	AllPlans	75.99	fee schedule	44.84	77.34
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Behavioral Health; Hospital Acute Care; rm and board; pe	124	RC	1000	693	BCBSof Alabama Insurance	AllPlans	693	per diem	575	
E & M New Low Complexity	99221	CPT	200	111.71	BCBSof Alabama Insurance	AllPlans	111.71	fee schedule	62	
E & M New Moderate Complexity	99222	CPT	225	151.7	BCBSof Alabama Insurance	AllPlans	151.7	fee schedule	104.42	164.33
E & M New High Complexity	99223	CPT	250	211.58	BCBSof Alabama Insurance	AllPlans	211.58	fee schedule	141	211.58
Rounding Low Complexity	99231	CPT	125	51.78	BCBSof Alabama Insurance	AllPlans	51.78	fee schedule	24.34	51.78
Rounding Moderate Complexity	99232	CPT	150	73.95	BCBSof Alabama Insurance	AllPlans	73.95	fee schedule	44	73.95
Rounding High Complexity	99233	CPT	175	103.93	BCBSof Alabama Insurance	AllPlans	103.93	fee schedule	64.27	103.93
Discharge Services	99236	CPT	225	75.99	BCBSof Alabama Insurance	AllPlans	75.99	fee schedule	44.84	77.34
Debaggional Health, Heavited Acute Company and beauty	104	DC.	1000	000	Oleman Income and	A II DI	000		F 575	050
Behavioral Health; Hospital Acute Care; rm and board; pe	124	RC	1000	800	Cigna Insurance	AllPlans	800	per diem	575	
E & M New Low Complexity	99221	CPT	200	62	Cigna Insurance	AllPlans	62	fee schedule	62	
E & M New Moderate Complexity	99222	CPT	225	107.68	Cigna Insurance	AllPlans	107.68	fee schedule	104.42	164.33
E & M New High Complexity	99223	CPT	250	172.55	Cigna Insurance	AllPlans	172.55	fee schedule	141	
Rounding Low Complexity	99231	CPT	125	37.35	Cigna Insurance	AllPlans	37.35	fee schedule	24.34	51.78
Rounding Moderate Complexity	99232	CPT	150	60	Cigna Insurance	AllPlans	60	fee schedule	44	73.95
Rounding High Complexity	99233	CPT	175	75.01	Cigna Insurance	AllPlans	75.01	fee schedule	64.27	103.93
Discharge Services	99236	CPT	225	77.34	Cigna Insurance	AllPlans	77.34	fee schedule	44.84	77.34

Service Desciprion	Code	Settings	Standard Gross Charge	Standard Negotiate d Charge	Payer	Plan		Charge Based On	Minimum	Standard Maximum Charge
Behavioral Health; Hospital Acute Care; rm and board; pe	124	RC	1000	725	Tricare Insurance	AllPlans	725	per diem	575	950
E & M New Low Complexity	99221	CPT	200	93.17	Tricare Insurance	AllPlans	93.17	fee schedule	62	111.71
E & M New Moderate Complexity	99222	CPT	225	164.33	Tricare Insurance	AllPlans	164.33	fee schedule	104.42	164.33
E & M New High Complexity	99223	CPT	250	161.4	Tricare Insurance	AllPlans	161.4	fee schedule	141	211.58
Rounding Low Complexity	99231	CPT	125	24.34	Tricare Insurance	AllPlans	24.34	fee schedule	24.34	51.78
Rounding Moderate Complexity	99232	CPT	150	44	Tricare Insurance	AllPlans	44	fee schedule	44	73.95
Rounding High Complexity	99233	CPT	175	64.27	Tricare Insurance	AllPlans	64.27	fee schedule	64.27	103.93
Discharge Services	99236	CPT	225	44.84	Tricare Insurance	AllPlans	44.84	fee schedule	44.84	77.34
Behavioral Health; Hospital Acute Care; rm and board; pe	124	RC	1000	925	United Healthcare Insurance	AllPlans	925	fee schedule	*	
E & M New Low Complexity	99221	CPT	200	160	United Healthcare Insurance	AllPlans	720	fee schedule	t	
E & M New Moderate Complexity	99222	CPT	225	180	United Healthcare Insurance	AllPlans		fee schedule	†	
E & M New High Complexity	99223	CPT	250	200	United Healthcare Insurance	AllPlans		fee schedule	†	
Rounding Low Complexity	99231	CPT	125	100	United Healthcare Insurance	AllPlans		fee schedule	‡	
Rounding Moderate Complexity	99232	CPT	150	120	United Healthcare Insurance	AllPlans		fee schedule	‡	
Rounding High Complexity	99233	CPT	175	140	United Healthcare Insurance	AllPlans		fee schedule	‡	
Discharge Services	99236	CPT	225	180	United Healthcare Insurance	AllPlans		fee schedule	‡	
Debouional Health, Heavital Acute Consumo and beauthor	104	DC	1000	050	Calf Day	AUDlana	050	la an aliana	F 7.5	050
Behavioral Health; Hospital Acute Care; rm and board; pe	124	RC	1000	950	Self Pay	AllPlans	950	per diem	575	950
E & M New Low Complexity	99221	CPT CPT	200 225	160 180	Self Pay	AllPlans	128 144	fee schedule	62	111.71 164.33
E & M New Moderate Complexity	99222				Self Pay	AllPlans		fee schedule	104.42	
E & M New High Complexity	99223	CPT	250	200	Self Pay	AllPlans	160	fee schedule	141	211.58
Rounding Low Complexity	99231	CPT	125	100	Self Pay	AllPlans	80	fee schedule	24.34	51.78
Rounding Moderate Complexity	99232	CPT	150	120	Self Pay	AllPlans	96	fee schedule	44	73.95
Rounding High Complexity	99233	CPT	175	140	Self Pay	AllPlans	112	fee schedule	64.27	103.93
Discharge Services	99236	CPT	225	75.99	BCBSof Alabama Insurance	AllPlans	75.99	fee schedule	44.84	77.34

\* United Behavioral Health Payer contracted with a high per Diem but the rate is all iniclusive.

†No charges on E&M services for new pateints the daily per Diem is higher to account for all inclusivity

‡No Charges on E&M Services daily rounding regarding the complexity of the case these services are included in those covered by the all inclusive rate.

Currently all vendors are negotiating for all inclusive daily rates known as "per diem" rates. this type of billing. Per diem billing will capture everything that is provided to the client and billed at a set rate. Professional Services Fees such as admission assessment, hospital rounding, discharging and documentation of the treatment of the client and billable by that professional services provider are most often not part of the 'per diem rates". They are billed separately and subject to your Copays and deductible or co-insurance are billed separately to your Medical Service Behavioral Health payer. Only Copay and Deductible amounts that are specified in the Explanation of Benefits as provided by your payer will be billed to the client or guardian