

Table 3I - Obstetric/Gynecological Procedures (Laboratory Services, Delivery, Ultrasounds)

Physician and Hospital Pricing of Common Outpatient Procedures - Gross Charges

Under Act 53, the information in the table below was required to be submitted by the hospitals to the Vermont Department of Health. Most of the charges in the table are effective for the period of October 1, 2022 through September 30, 2023. They are based on Common Procedural Terminology (CPT®) codes, which are defined as "a listing of descriptive terms and identifying codes for reporting medical services and procedures performed by physicians. The purpose of the terminology is to provide a uniform language that will accurately describe medical, surgical, and diagnostic services, and will thereby provide an effective means for reliable nationwide communication among physicians, patients, and third parties" (CPT® 2012 Standard Edition codebook - American Medical Association).

The tables of CPT code charges shown on the Health Department's website provide hospital and physician gross charge information for selected commonly used outpatient procedures and related physician services. The charges listed are for the procedures themselves and do not represent other procedures that your physician may order or recommend. For some procedures, additional services such as blood collection or sedation may be required in conjunction with delivering the listed procedure. There may also be charges for supplies and pharmaceuticals used in the procedure. **To completely understand all possible charges that may apply for services received, please call your hospital and/or physician. Every patient event may have unique circumstances that could require additional services determined at the time of care, which can affect your total charges. The gross charges shown do NOT take into account any discounts or insurance. Please see the "Frequently Asked Questions" page for more information about pricing issues and considerations.**

For each table:

- **All charges shown are for hospitals and hospital-employed physicians only.**
- **"N/A" for hospital charges** indicates that the hospital does not perform this particular procedure. Check with the hospital as it may perform a similar procedure that is not listed.
- **"N/A" for physician charges** indicates that the hospital does not employ any physician who performs the service. In these cases, you may expect a separate charge from your physician or another doctor not employed directly by the hospital.
- The Hospital System Averages at the bottom of the table are the averages of the charges shown for each CPT code and do not include any charges that are "N/A".
- Note that many of the codes on the list are diagnostic tests in which the physician charge component represents the medical interpretation of a resulting image, lab specimen analysis, etc.

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§ Hospital in the table below did not submit the required CPT code pricing information to the Department of Health as of May 31, 2023.

Table 3I - Obstetric/Gynecological Procedures

Hospital	CPT Code	Laboratory Services						Delivery ^{3, 13}		
		57454 ^{4, 8}	80081 ⁹	81025 ^{1, 10}	88142 ¹¹	88175 ^{2, 12}	82746 ¹²	59400 ^{5, 14, 15}	59510 ^{6, 7}	59610 ^{4, 15}
	Description	Colposcopy: cervical biopsy(s) of cervix and endocervical curettage	Obstetric panel	Urine pregnancy test	Pap test (with liquid base preparation)	Pap test (with liquid base preparation), automated	Blood test for folic acid level	Vaginal delivery	C-section (Cesarean delivery)	Routine obstetric care for vaginal delivery, including pre- and post-delivery care
§ Brattleboro Memorial Hospital	Hospital Charge									
	Physician Charge									
	Total Charge									
Central Vermont Medical Center	Hospital Charge	\$0	\$155	\$41	n/a	\$97	\$105	\$9,743	n/a	\$0
	Physician Charge	\$580	\$0	\$25	n/a	\$0	\$0	\$4,948	\$5,465	\$5,177
	Total Charge	\$580	\$155	\$66	n/a	\$97	\$105	\$14,691	n/a	\$5,177
Copley Hospital	Hospital Charge	n/a	n/a	\$46	n/a	\$127	\$66	n/a	n/a	n/a
	Physician Charge	\$310	n/a	n/a	n/a	n/a	n/a	\$4,311	\$4,882	\$4,420
	Total Charge	\$310	n/a	\$46	n/a	\$127	\$66	\$4,311	\$4,882	\$4,420
University of Vermont Medical Center	Hospital Charge	n/a	\$155	\$60	\$77	\$77	\$85	\$6,956	n/a	n/a
	Physician Charge	\$887	n/a	n/a	n/a	n/a	n/a	\$4,002	\$4,502	\$12,593
	Total Charge	\$887	\$155	\$60	\$77	\$77	\$85	\$10,958	\$4,502	\$12,593
§ Gifford Medical Center	Hospital Charge									
	Physician Charge									
	Total Charge									
Grace Cottage Family Health & Hospital	Hospital Charge	n/a	n/a	\$30	n/a	\$106	\$149	n/a	n/a	n/a
	Physician Charge	n/a	n/a	\$0	n/a	\$0	\$0	n/a	n/a	n/a
	Total Charge	n/a	n/a	\$30	n/a	\$106	\$149	n/a	n/a	n/a
Mt. Ascutney Hospital	Hospital Charge	n/a	n/a	\$122	\$399	n/a	\$268	n/a	n/a	n/a
	Physician Charge	n/a	n/a	\$0	\$0	n/a	\$0	n/a	n/a	n/a
	Total Charge	n/a	n/a	\$122	\$399	n/a	\$268	n/a	n/a	n/a
North Country Hospital	Hospital Charge	n/a	n/a	\$64	n/a	\$219	\$424	\$12,180	\$31,911	\$10,338
	Physician Charge	\$581	n/a	\$41	n/a	\$0	\$0	\$3,981	\$4,913	\$4,363
	Total Charge	\$581	n/a	\$105	n/a	\$219	\$424	\$16,161	\$36,824	\$14,701
Northeastern Vermont Regional Hospital	Hospital Charge	n/a	\$602	\$125	\$311	\$311	\$259	\$9,265	\$45,120	\$9,265
	Physician Charge	\$331	n/a	n/a	n/a	n/a	n/a	\$3,981	\$4,408	\$4,173
	Total Charge	\$331	\$602	\$125	\$311	\$311	\$259	\$13,246	\$49,528	\$13,438
Northwestern Medical Center	Hospital Charge	\$236	n/a	\$177	\$119	\$142	\$51	\$4,933	\$15,203	\$7,978
	Physician Charge	n/a	n/a	n/a	n/a	n/a	n/a	\$5,142	\$5,683	\$5,391
	Total Charge	n/a	n/a	n/a	n/a	n/a	n/a	\$10,075	\$20,886	\$13,369
Porter Hospital	Hospital Charge	\$212	n/a	\$69	\$103	\$78	\$91	N/A	N/A	N/A
	Physician Charge	\$179	n/a	\$0	\$0	\$0	\$0	\$4,962	\$5,493	\$5,201
	Total Charge	\$391	n/a	\$69	\$103	\$78	\$91	\$4,962	\$5,493	\$5,201
Rutland Regional Medical Center	Hospital Charge	\$642	n/a	\$57	\$123	n/a	\$280	\$6,544	\$11,536	\$6,544
	Physician Charge	\$697	n/a	n/a	n/a	n/a	n/a	\$5,273	\$5,969	\$5,547
	Total Charge	\$1,339	n/a	\$57	\$123	n/a	\$280	\$11,817	\$17,505	\$12,091
Southwestern Vermont Medical Center	Hospital Charge	n/a	n/a	\$0	\$180	\$180	\$103	\$15,287	\$22,516	\$15,287
	Physician Charge	\$358	n/a	\$25	\$0	\$0	\$0	\$3,955	\$4,476	\$4,161
	Total Charge	n/a	n/a	\$25	\$180	\$180	\$103	\$19,242	\$26,992	\$19,448
Springfield Hospital	Hospital Charge	\$224	n/a	\$85	\$70	n/a	n/a	n/a	n/a	n/a
	Physician Charge	\$229	n/a	n/a	n/a	n/a	n/a	\$4,694	\$6,156	n/a
	Total Charge	\$453	n/a	\$85	\$70	n/a	n/a	\$4,694	\$6,156	n/a
Hospital System Averages	Hospital Charge	\$263	\$304	\$73	\$173	\$149	\$171	\$9,272	\$25,257	\$8,235
	Physician Charge	\$461	\$0	\$15	\$0	\$0	\$0	\$4,525	\$5,195	\$5,670
	Total Charge	\$609	\$304	\$72	\$180	\$149	\$183	\$11,016	\$19,196	\$11,160

1. At CVMC charge is either or, not combined. 5. UVMMC uses CPT code 59409 9. For NCH done by individual test not panel 13. For NCH average of procedures in FY23.
 2. For Porter Hospital, this is the highest amount for this CPT in the chargemaster. 6. UVMMC and Porter use CPT code 59514 10. For NCH Hospital and Clinic, only one or the other not both will be charged.
 3. At SVMC these are based on average charges. 7. At CVMC and SVMC hospital charge is time based fee. 11. NCH uses CPT code 88175 14. CVMC uses CPT code 59409
 4. At UVMMC this is a full global fee. 8. At SVMC this is an office procedure 12. For NCH Hospital only 15 For Porter hospital charge varies on complexity.

All Vermont Community Hospitals

		Ultrasounds			
CPT Code		76801 ¹	76805 ²	76816 ¹	76817 ¹
Hospital	Description	Obstetric transabdominal ultrasound, first trimester	Obstetric transabdominal ultrasound, after first trimester	Obstetric transabdominal ultrasound re-evaluation of pregnant uterus, per fetus	Obstetric transvaginal ultrasound, pregnant uterus
§ Brattleboro Memorial Hospital	Hospital Charge				
	Physician Charge				
	Total Charge				
Central Vermont Medical Center	Hospital Charge	\$735	\$843	\$881	\$839
	Physician Charge	\$376	\$381	\$168	\$222
	Total Charge	\$1,110	\$1,224	\$1,049	\$1,061
Copley Hospital	Hospital Charge	\$694	\$797	n/a	\$437
	Physician Charge	n/a	n/a	n/a	n/a
	Total Charge	\$694	\$797	n/a	n/a
University of Vermont Medical Center	Hospital Charge	\$944	\$1,082	\$661	\$873
	Physician Charge	\$633	\$729	\$592	\$501
	Total Charge	\$1,577	\$1,811	\$1,253	\$1,374
§ Gifford Medical Center	Hospital Charge				
	Physician Charge				
	Total Charge				
Grace Cottage Family Health & Hospital	Hospital Charge	\$1,015	\$873	\$873	\$873
	Physician Charge	\$198	\$198	\$198	\$198
	Total Charge	\$1,213	\$1,071	\$1,071	\$1,071
Mt. Ascutney Hospital	Hospital Charge	\$2,234	\$1,405	n/a	\$1,826
	Physician Charge	\$0	\$0	n/a	\$0
	Total Charge	\$2,234	\$1,405	n/a	\$1,826
North Country Hospital	Hospital Charge	\$1,966	\$933	\$1,633	\$1,586
	Physician Charge	\$378	\$339	\$207	\$369
	Total Charge	\$2,344	\$1,271	\$1,840	\$1,955
Northeastern Vermont Regional Hospital	Hospital Charge	\$232	\$232	\$254	\$254
	Physician Charge	n/a	n/a	n/a	n/a
	Total Charge	\$232	\$232	\$254	\$254
Northwestern Medical Center	Hospital Charge	\$369	\$531	\$579	\$579
	Physician Charge	\$125	\$143	\$116	\$0
	Total Charge	\$494	\$674	\$695	\$579
Porter Hospital	Hospital Charge	\$657	\$445	\$470	\$521
	Physician Charge	\$229	\$338	\$164	\$161
	Total Charge	\$886	\$783	\$634	\$682
Rutland Regional Medical Center	Hospital Charge	\$1,078	\$1,195	\$758	\$758
	Physician Charge	\$301	\$301	\$259	\$228
	Total Charge	\$1,379	\$1,496	\$1,017	\$986
Southwestern Vermont Medical Center	Hospital Charge	\$980	\$996	\$932	\$689
	Physician Charge	n/a	n/a	n/a	n/a
	Total Charge	n/a	n/a	n/a	n/a
Springfield Hospital	Hospital Charge	\$1,470	\$1,470	\$1,213	\$1,641
	Physician Charge	n/a	n/a	n/a	n/a
	Total Charge	\$1,470	\$1,470	\$1,213	\$1,641
Hospital System Averages	Hospital Charge	\$1,031	\$900	\$825	\$906
	Physician Charge	\$280	\$304	\$244	\$210
	Total Charge	\$1,239	\$1,112	\$1,003	\$1,143

1. For Porter Hospital, these are the highest amounts for this CPT in the Chargemaster.

2. For Porter Hospital this is the highest physician amount for this CPT in the Chargemaster.