

**Top 18 Procedure Codes - Sample Savings Comparison PHCS/Beech Street**

**PHCS**

Procedure Code	Description	UCR	Discount	Allowable	Percent Savings
99391	Well Child Visit Under 1 Year	\$ 125.00	\$ 38.57	\$ 86.43	31%
99285	Emergency Dept Visit	\$ 325.00	\$ 142.00	\$ 183.00	44%
99214	Est Patient Office Visit Level 4	\$ 150.00	\$ 63.00	\$ 87.00	42%
99213	Est Patient Office Visit Level 3	\$ 109.00	\$ 39.40	\$ 69.60	36%
99205	New Patient Office Visit - Specialist	\$ 250.00	\$ 82.19	\$ 167.81	33%
99202	New Patient Office Visit - Level 1	\$ 98.00	\$ 39.15	\$ 58.85	40%
93000	Electro Cardiogram	\$ 65.00	\$ 35.27	\$ 29.73	54%
81002	Urinalysis	\$ 25.00	\$ 18.00	\$ 7.00	72%
80061	Lipid Panel	\$ 45.00	\$ 29.00	\$ 16.00	64%
80048	Basic Metabolic Panel	\$ 38.00	\$ 34.00	\$ 4.00	89%
76092	Mammogram	\$ 125.00	\$ 59.00	\$ 84.00	47%
71020	Chest X-Ray	\$ 59.00	\$ 25.73	\$ 33.27	44%
70553	MRI	\$ 1,375.00	\$ 399.72	\$ 975.28	29%
70450	CT Head/Brain w/o dye	\$ 350.00	\$ 133.98	\$ 216.02	38%
59410	Global Charge - Vaginal Delivery	\$ 2,100.00	\$ 1,098.00	\$ 1,002.00	52%
47600	Gall Bladder Removal	\$ 2,300.00	\$ 941.72	\$ 1,358.28	41%
45378	Colonoscopy	\$ 890.00	\$ 324.56	\$ 565.44	36%
36415	Routine Blood Draw	\$ 20.00	\$ 15.00	\$ 5.00	75%

**Beech Street**

Procedure Code	Description	UCR	Discount	Allowable	Percent Savings
99391	Well Child Visit Under 1 Year	\$ 125.00	\$ 31.25	\$ 93.75	25%
99285	Emergency Dept Visit	\$ 325.00	\$ 81.25	\$ 243.75	25%
99214	Est Patient Office Visit Level 4	\$ 150.00	\$ 42.52	\$ 107.48	28%
99213	Est Patient Office Visit Level 3	\$ 109.00	\$ 39.40	\$ 69.60	36%
99205	New Patient Office Visit - Specialist	\$ 250.00	\$ 17.10	\$ 232.90	7%
99202	New Patient Office Visit - Level 1	\$ 98.00	\$ 37.00	\$ 61.00	38%
93000	Electro Cardiogram	\$ 65.00	\$ 35.27	\$ 29.73	54%
81002	Urinalysis	\$ 25.00	\$ 16.07	\$ 3.93	64%
80061	Lipid Panel	\$ 45.00	\$ 29.00	\$ 16.00	64%
80048	Basic Metabolic Panel	\$ 38.00	\$ 34.00	\$ 4.00	89%
76092	Mammogram	\$ 125.00	\$ 5.00	\$ 120.00	4%
71020	Chest X-Ray	\$ 59.00	\$ 19.39	\$ 39.61	33%
70553	MRI	\$ 1,375.00	\$ 649.52	\$ 725.48	47%
70450	CT Head/Brain w/o dye	\$ 350.00	\$ 92.84	\$ 257.16	27%
59410	Global Charge - Vaginal Delivery	\$ 2,100.00	\$ 1,061.18	\$ 1,038.82	51%
47600	Gall Bladder Removal	\$ 2,300.00	\$ 1,097.55	\$ 1,202.45	48%
45378	Colonoscopy	\$ 890.00	\$ 385.99	\$ 504.01	43%
36415	Routine Blood Draw	\$ 20.00	\$ 15.00	\$ 5.00	75%

The actual savings experienced by going to an in-network provider will vary by area and provider. This is a sample only and is not guarantee of savings.