

BID TABULATION - OCCUPATIONAL HEALTH SERVICES 2012 REVISED

OCCUPATIONAL HEALTH SERVICES BID OPENING 11-13-08	OCCUPATIONAL MEDICINE CENTER	MERCY CORPORATE HEALTH	CONCENTRA MEDICAL CENTERS	ST ANTHONYS MEDICAL CENTER
<b>Pre-Employment Physical (NON-DOT):</b>				
Physician Exam with Health History Review:	\$45.00	\$47.00	<b>\$45.00</b>	\$45.00
<b>Pre-Employment work fitness screening:</b>	\$175.00	\$165.00	\$75.00	\$45.00
<b>Pre-Employment Physical (DOT):</b>				
DOT Physical	\$50.00	\$47.00	\$95.00 \$45.00	\$45.00
DOT Urine Drug Screening consisting of: Urine Collection 5 Panel Drug Screen Medical Review & Reporting	\$40.00	\$46.00	\$40.00	\$60.00
<b>Re-Certification Physical (DOT):</b>				
DOT Physical	\$45.00	\$47.00	\$45.00	\$45.00
<b>Substance Abuse (NON-DOT) Post Accident/Reasonable Suspicion:</b>				
Urine Drug Screening consists of: Urine Collection 8 Panel Drug Screen Medical Review & Reporting	\$45.00 - 10 PANEL	\$46.00	<b>\$40.00</b>	\$45.00
<b>Substance Abuse (DOT) Post Accident/Reasonable Suspicion/Random:</b>				
DOT Urine Drug Screening consists of: Urine Collection 8 Panel Drug Screen Medical Review & Reporting	\$40.00 - 5 PANEL	\$46.00	\$40.00	\$45.00
Breath Alcohol Screen with confirmation	\$25.00	\$25.00	\$25.00	\$35.00
<b>Fit for Duty Physical:</b>				
Physician Exam with Return to Work Short Narrative Note	\$45.00	\$48.00	<b>\$75.00</b>	\$45.00
<b>On-Call After Hours/On-Site Substance Abuse Services:</b>				
On-Call Drug/Alcohol Collection: Per hour, portal to portal	N/A	\$110.00 PER HR. 2HR MIN.	\$190.00 PLUS COST OF SERVICE PROVIDED	\$75.00
On-Site Drug/Alcohol Collection: Per hour, portal to portal	\$25.00	\$45.00	\$130.00 PLUS COST OF SERVICE PROVIDED	\$40.00
<b>Worker's Compensation (In-Clinic Treatment Of Work-Related Injuries/Illness)</b>				
<b>Initial Visit and Report:</b>				
99202 Limited Visit	\$70.00	\$61.00	\$148.78	\$55.00
99203 Intermediate Visit	\$72.00	\$74.00	\$193.76	\$65.00
99204 Extensive Visit	\$80.00	\$87.00	\$276.80	\$80.00
<b>Return Visit and Report:</b>				
99212 Limited Visit	\$60.00	\$50.00	\$82.43	\$45.00
99213 Intermediate Visit	\$62.00	\$59.00	\$105.33	\$55.00
99214 Extensive Visit	\$70.00	\$72.00	\$152.65	\$65.00
<b>Worker's Compensation Contracted Service Rates Per CPT Code</b>				
73610 Ankle X-ray 3 or more views	\$82.00	\$142.00	\$105.33	\$90.00
73600 Ankle X-ray 2 views	\$73.00	\$125.00	\$92.88	\$90.00
73080 Elbow X-ray Complete	\$85.00	\$154.00	\$116.39	\$90.00
95904 Nerve Conduction	N/A	85% Of Billed Charges	\$262.08	\$90.00
95903 Nerve Conduction	N/A	85% Of Billed Charges	\$334.88	\$140.00

OCCUPATIONAL HEALTH SERVICES BID OPENING 11-13-08	OCCUPATIONAL MEDICINE CENTER	MERCY CORPORATE HEALTH	CONCENTRA MEDICAL CENTERS	ST ANTHONYS MEDICAL CENTER
95900 Nerve Conduction	N/A	85% Of Billed Charges	\$291.20	\$90.00
96860 EMG 1 Extremity	N/A	85% Of Billed Charges	SEE ADDITIONAL PRICING	\$90.00
73721 MRI Lower Extremity	N/A	\$2,115.00	REFERED IN NETWORK	\$875.00
73221 MRI Lower Extremity	N/A	\$2,129.00	REFERED IN NETWORK	\$875.00
73630 Foot X-ray Complete	\$82.00	\$140.00	\$103.41	\$90.00
73564 Knee X-ray 4 or more views:	\$93.00	\$181.00	\$134.05	\$90.00
73560 Knee X-ray 2 view	\$85.00	\$136.00	\$100.54	\$90.00
73140 Finger X-ray Complete	\$67.00	\$107.00	\$81.25	\$65.00
73130 Hand X-ray Complete	\$82.00	\$145.00	\$109.80	\$85.00
72040 Cervical X-ray 2 View	\$107.00	\$171.00	\$147.14	\$115.00
72110 Lumbar X-ray 4 View	\$148.00	\$255.00	\$218.88	\$150.00
73110 Wrist X-ray Complete	\$85.00	\$146.00	\$110.90	\$90.00
72070 Thoracic X-ray 2 View	\$95.00	\$173.00	\$148.35	\$95.00
73000 Clavicle X-ray Complete	\$75.00	85% Of Billed Charges	\$107.60	\$90.00
73030 Shoulder X-ray Complete	\$85.00	85% Of Billed Charges	\$131.76	\$90.00
73090 Forearm X-ray Complete	\$85.00	\$136.00	\$103.21	\$80.00
97001 PT Evaluation (1st Visit)	\$74.00	85% Of Billed Charges	\$170.69	\$120.00
97003 OT Evaluation (1st Visit)	N/A	85% Of Billed Charges	\$170.69	\$120.00
97545 Work Conditioning/ Initial 2 Hours	N/A	85% Of Billed Charges	\$260.23	\$195.00
97546 Work Conditioning/ per additional hour	N/A	85% Of Billed Charges	\$103.78	\$85.00
PT/OT Subsequent Visits	N/A	85% Of Billed Charges	SEE ADDITIONAL PRICING	\$75.00
<b>COMMENTS:</b>	ALL NON DOT DRUG SCREENS CAN BE DONE MON - FRI 8:00 AM TO 4:00 PM SATURDAY & SUNDAYS 10:00 AM TO 5:00 PM	STANDARD RATES DO NOT REFLECT 15% DISCOUNT		