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The information contained in this file is being provided in compliance with the Centers for Medicare and Medicaid Services (CMS) requirement [FY 2019 IPPS/LTCH PPS Final Rule; CMS-1694-F] for hospitals to post a list of their standard charges online in a machine-readable format.

By clicking to download this information you agree you have read and understand the following:

- i. The information contained in the file is current as of the last upload. Charge information is subject to periodic changes and the file will be updated as soon as practically possible to reflect such changes
- ii. The file contains both the charge amount and the charge description of the item or service as reflected in the hospital's chargemaster (CDM)
- iii. A charge represents the dollar amount assigned to specific medical services before application of any negotiated discounts to third-party payers. The actual hospital charges will vary based on the type of care provided, treatments, individual health conditions and other factors. If you need an *exact estimate* of your out-of-pocket cost, please call or submit a request online as described elsewhere on this website. **PLEASE NOTE THESE CHARGES DO NOT INCLUDE FEES FROM YOUR SURGEON, ANESTHESIOLOGIST OR OTHER PROFESSIONAL SERVICES BILLED BY THE PHYSICIAN AND OTHER PROFESSIONAL PROVIDERS.** Typically, you will be billed separately for these professional services
- iv. Following the CMS guidelines, the information in this file represents the hospitals current standard charges as reflected in the CDM. However, it is important to understand that the information represented in the CDM is the starting point in many cases and can undergo additional adjustments through the billing process, therefore, please be aware:
  - a) The charge shown is the original charge for the item or service prior to any adjustments that result from applying modifiers in certain situations
  - b) The CDM is used in multiple hospital departments and may have different charges for the same item or service and such instances will repeat in the file. For a single chargemaster item, the charge is consistent; however, there may be slight variation in charges for services with similar descriptions for various reasons
  - c) Charges for certain items or services are based on per unit, such as – including but not limited to – surgeries, anesthesia, and recovery which can be based on the unit of time and complexity; medications, drugs which can be based on weight-based dosage, age or packaging; etc.
  - d) Certain items and or services have a zero dollar price in the CDM for a variety of reasons – contracted billing services that drop charges externally, no cost supplies, Investigational device or medication exemption items in clinical trials and studies, replacement for a recalled or defective device, explode codes and other system limitations. Such items and services will appear with zero dollar and is not reflective of the actual charge. In addition, items and or services are sometimes assigned a one penny price to reflect, for example, a state provided medication or drug, contrast items, therapy status codes used for CMS reporting, etc. and is not reflective of the actual charge contained outside of the chargemaster
  - e) The file may also contain CDM items for non-charges (such as payments, allowances, transactions, etc.)
- v. The file is voluminous and download may take excessive time depending on your internet speed



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[Click here to download the hospital's current standard charges](#)