

### Table 3N - Physical Medicine and Rehabilitation (Active Wound Management, Tests and Measurements, Orthotic Management and Training and Prosthetic Training, Modalities, Physical Therapy Evaluations, Occupational Therapy Evaluations, Therapeutic Procedures)

#### 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, 2021 through September 30, 2022. 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.

® CPT is a registered trademark of the American Medical Association.

§ Hospital in the table below did not submit the required CPT code pricing information to the Department of Health as of May 31, 2022.

**Table 3N - Physical Medicine and Rehabilitation**

		Active Wound Management				Tests and Measurements	Orthotic Management and Training and Prosthetic Training
CPT Code		97597 <sup>3</sup>	97602	97605 <sup>4</sup>	97606 <sup>4</sup>	97750	97760
Hospital	Description	Remove tissue from wounds (debridement, open wound 20 sq. cm or less)	Remove tissue from wounds (non-selective debridement without anesthesia)	Negative or vacuum pressure wound therapy (total wound(s) surface area ≤ 50 sq. cm)	Negative or vacuum pressure wound therapy (total wound(s) surface area > 50 sq. cm)	Physical performance test or measurement with report	Orthotic management of arm or leg and/or trunk
§ Brattleboro Memorial Hospital	Hospital Charge						
	Physician Charge						
	Total Charge						
Central Vermont Medical Center	Hospital Charge	\$0	\$0	\$0	\$0	\$138	\$136
	Physician Charge	\$229	\$292	\$168	\$235	\$48	\$0
	Total Charge	\$229	\$292	\$168	\$235	\$186	\$136
Copley Hospital	Hospital Charge	\$121	\$64	\$0	n/a	\$110	\$123
	Physician Charge	\$0	\$0	\$81	n/a	\$0	\$0
	Total Charge	\$121	\$64	\$81	n/a	\$110	\$123
University of Vermont Medical Center	Hospital Charge	\$415	\$346	\$257	\$497	\$116	\$130
	Physician Charge	\$377	\$152	\$159	\$189	\$127	\$185
	Total Charge	\$792	\$498	\$415	\$686	\$243	\$315
§ Gifford Medical Center	Hospital Charge						
	Physician Charge						
	Total Charge						
Grace Cottage Family Health & Hospital	Hospital Charge	n/a	n/a	n/a	n/a	n/a	\$107
	Physician Charge	n/a	n/a	n/a	n/a	n/a	n/a
	Total Charge	n/a	n/a	n/a	n/a	n/a	n/a
Mt. Ascutney Hospital	Hospital Charge	\$0	\$0	\$0	n/a	\$166	\$239
	Physician Charge	\$546	\$601	\$302	n/a	\$182	\$0
	Total Charge	\$546	\$601	\$302	n/a	\$348	\$239
North Country Hospital	Hospital Charge	\$188	\$130	\$211	\$156	\$80	\$172
	Physician Charge	\$96	\$0	\$63	\$0	\$0	\$0
	Total Charge	\$284	\$130	\$274	\$156	\$80	\$172
Northeastern Vermont Regional Hospital	Hospital Charge	\$0	\$0	\$0	\$0	\$204	\$81
	Physician Charge	\$170	\$170	\$68	\$60	\$0	\$0
	Total Charge	\$170	\$170	\$68	\$60	\$204	\$81
Northwestern Medical Center	Hospital Charge	\$0	\$0	\$0	\$0	\$113	\$113
	Physician Charge	\$232	\$246	\$121	\$144	\$0	\$0
	Total Charge	\$232	\$246	\$121	\$144	\$113	\$113
Porter Hospital	Hospital Charge	\$253	\$77	\$280	\$560	\$119	\$150
	Physician Charge	\$190	\$0	\$74	\$36	\$0	\$0
	Total Charge	\$443	\$77	\$354	\$596	\$119	\$150
Rutland Regional Medical Center	Hospital Charge	\$497	\$174	\$334	\$483	\$189	\$184
	Physician Charge	\$122	\$0	\$133	\$144	\$0	\$56
	Total Charge	\$619	\$174	\$467	\$627	\$189	\$240
Southwestern Vermont Medical Center	Hospital Charge	\$0	\$0	\$0	\$0	\$168	\$168
	Physician Charge	\$211	\$116	\$83	\$90	\$0	\$0
	Total Charge	\$211	\$116	\$83	\$90	\$168	\$168
Springfield Hospital	Hospital Charge	\$193	\$176	n/a	n/a	\$62	\$63
	Physician Charge	n/a	n/a	\$190	n/a	n/a	n/a
	Total Charge	n/a	n/a	n/a	n/a	n/a	n/a
Hospital System Averages	Hospital Charge	\$152	\$88	\$108	\$212	\$133	\$139
	Physician Charge	\$217	\$158	\$131	\$112	\$36	\$24
	Total Charge	\$365	\$237	\$233	\$324	\$176	\$174

3. At Porter, this is the highest amount for this CPT in the chargemaster.

4. At Porter, hospital charge is the highest amount for this CPT in the chargemaster.

All Vermont Community Hospitals

		Modalities								
CPT Code		97010	97012	97014 <sup>1</sup>	97016	97018	97022	97032	97033	97035
Hospital	Description	Application of hot or cold packs to 1 or more areas	Application of mechanical traction to 1 or more areas	Application of electrical stimulation to 1 or more areas, when physical therapist is not there	Application of blood vessel compression or decompression device to 1 or more areas	Application of hot wax bath to 1 or more areas	Application of whirlpool therapy to 1 or more areas	Application of electrical stimulation to 1 or more areas	Application of medication through skin using electrical current	Application of ultrasound to 1 or more areas
§ Brattleboro Memorial Hospital	Hospital Charge									
	Physician Charge									
	Total Charge									
Central Vermont Medical Center	Hospital Charge	\$21	\$108	n/a	n/a	\$23	\$85	\$101	\$93	\$103
	Physician Charge	\$0	\$0	n/a	n/a	\$0	\$0	\$0	\$0	\$0
	Total Charge	\$21	\$108	n/a	n/a	\$23	\$85	\$101	\$93	\$103
Copley Hospital	Hospital Charge	n/a	\$41	\$38	n/a	n/a	\$75	\$86	\$45	\$92
	Physician Charge	n/a	\$0	\$0	n/a	n/a	\$0	\$0	\$0	\$0
	Total Charge	n/a	\$41	\$38	n/a	n/a	\$75	\$86	\$45	\$92
University of Vermont Medical Center	Hospital Charge	n/a	\$119	n/a	\$87	\$95	\$138	\$118	\$142	\$111
	Physician Charge	\$23	\$55	\$50	\$45	\$22	\$67	\$55	\$76	\$54
	Total Charge	n/a	\$174	n/a	\$132	\$117	\$205	\$173	\$218	\$165
§ Gifford Medical Center	Hospital Charge									
	Physician Charge									
	Total Charge									
Grace Cottage Family Health & Hospital	Hospital Charge	n/a	\$212	\$50	n/a	n/a	\$96	\$107	\$126	\$107
	Physician Charge	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	Total Charge	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Mt. Ascutney Hospital	Hospital Charge	\$36	\$101	\$101	\$121	\$70	\$148	\$118	\$204	\$80
	Physician Charge	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	Total Charge	\$36	\$101	\$101	\$121	\$70	\$148	\$118	\$204	\$80
North Country Hospital	Hospital Charge	n/a	\$169	n/a	n/a	\$132	\$118	\$251	\$47	\$189
	Physician Charge	n/a	\$0	n/a	n/a	\$0	\$0	\$0	\$0	\$0
	Total Charge	n/a	\$169	n/a	n/a	\$132	\$118	\$251	\$47	\$189
Northeastern Vermont Regional Hospital	Hospital Charge	\$76	\$143	\$37	\$42	\$99	\$126	\$76	\$36	\$108
	Physician Charge	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	Total Charge	\$76	\$143	\$37	\$42	\$99	\$126	\$76	\$36	\$108
Northwestern Medical Center	Hospital Charge	\$21	\$113	\$113	n/a	\$113	n/a	\$113	\$113	\$113
	Physician Charge	\$0	\$0	\$0	n/a	\$0	n/a	\$0	\$0	\$0
	Total Charge	\$21	\$113	\$113	n/a	\$113	n/a	\$113	\$113	\$113
Porter Hospital	Hospital Charge	n/a	\$119	n/a	n/a	n/a	n/a	\$50	\$119	\$119
	Physician Charge	n/a	\$0	n/a	n/a	n/a	n/a	\$0	\$0	\$0
	Total Charge	n/a	\$119	n/a	n/a	n/a	n/a	\$50	\$119	\$119
Rutland Regional Medical Center	Hospital Charge	\$61	\$97	\$90	\$89	\$43	\$98	\$101	\$103	\$75
	Physician Charge	\$0	\$64	\$0	\$0	\$0	\$0	\$93	\$0	\$0
	Total Charge	\$61	\$161	\$90	\$89	\$43	\$98	\$194	\$103	\$75
Southwestern Vermont Medical Center	Hospital Charge	n/a	\$127	n/a	\$174	\$135	\$286	\$167	\$159	\$121
	Physician Charge	n/a	\$0	n/a	\$0	\$0	\$0	\$0	\$0	\$0
	Total Charge	n/a	\$127	n/a	\$174	\$135	\$286	\$167	\$159	\$121
Springfield Hospital	Hospital Charge	n/a	\$143	\$153	\$161	\$67	\$80	\$85	\$85	\$85
	Physician Charge	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	Total Charge	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Hospital System Averages	Hospital Charge	\$43	\$124	\$83	\$112	\$86	\$125	\$114	\$106	\$109
	Physician Charge	\$4	\$12	\$8	\$9	\$3	\$8	\$15	\$8	\$5
	Total Charge	\$43	\$126	\$76	\$112	\$92	\$143	\$133	\$114	\$117

1. North Country does not offer this service.

All Vermont Community Hospitals

		Physical Therapy Evaluations				Occupational Therapy Evaluations			
	CPT Code	97161	97162	97163	97164	97165	97166	97167	97168
Hospital	Description	Physical therapy evaluation, low complexity	Physical therapy evaluation, moderate complexity	Physical therapy evaluation, high complexity	Physical therapy re-evaluation	Occupational therapy evaluation, low complexity	Occupational therapy evaluation, moderate complexity	Occupational therapy evaluation, high complexity	Occupational therapy re-evaluation
§ Brattleboro Memorial Hospital	Hospital Charge								
	Physician Charge								
	Total Charge								
Central Vermont Medical Center	Hospital Charge	\$306	\$306	\$306	\$256	\$289	\$289	\$289	\$262
	Physician Charge	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	Total Charge	\$306	\$306	\$306	\$256	\$289	\$289	\$289	\$262
Copley Hospital	Hospital Charge	\$306	\$332	\$387	\$168	\$306	\$332	\$387	\$168
	Physician Charge	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	Total Charge	\$306	\$332	\$387	\$168	\$306	\$332	\$387	\$168
University of Vermont Medical Center	Hospital Charge	\$401	\$401	\$401	\$257	\$331	\$401	\$450	\$255
	Physician Charge	\$374	\$374	\$374	\$256	\$363	\$363	\$363	\$244
	Total Charge	\$775	\$775	\$775	\$513	\$694	\$764	\$813	\$499
§ Gifford Medical Center	Hospital Charge								
	Physician Charge								
	Total Charge								
Grace Cottage Family Health & Hospital	Hospital Charge	\$215	\$300	\$400	n/a	\$215	\$300	\$400	n/a
	Physician Charge	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	Total Charge	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Mt. Ascutney Hospital	Hospital Charge	\$375	\$455	\$547	\$263	\$375	\$455	\$547	\$333
	Physician Charge	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	Total Charge	\$375	\$455	\$547	\$263	\$375	\$455	\$547	\$333
North Country Hospital	Hospital Charge	\$517	\$517	\$517	\$467	\$575	\$575	\$575	\$485
	Physician Charge	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	Total Charge	\$517	\$517	\$517	\$467	\$575	\$575	\$575	\$485
Northeastern Vermont Regional Hospital	Hospital Charge	\$149	\$149	\$149	\$227	\$149	\$149	\$149	\$227
	Physician Charge	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	Total Charge	\$149	\$149	\$149	\$227	\$149	\$149	\$149	\$227
Northwestern Medical Center	Hospital Charge	\$282	\$282	\$282	\$192	\$274	\$274	\$274	\$158
	Physician Charge	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	Total Charge	\$282	\$282	\$282	\$192	\$274	\$274	\$274	\$158
Porter Hospital	Hospital Charge	\$337	\$337	\$337	\$119	\$337	\$337	\$337	\$119
	Physician Charge	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	Total Charge	\$337	\$337	\$337	\$119	\$337	\$337	\$337	\$119
Rutland Regional Medical Center	Hospital Charge	\$255	\$283	\$312	\$191	\$357	\$397	\$438	\$191
	Physician Charge	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	Total Charge	\$255	\$283	\$312	\$191	\$357	\$397	\$438	\$191
Southwestern Vermont Medical Center	Hospital Charge	\$336	\$336	\$336	\$262	\$335	\$335	\$335	\$261
	Physician Charge	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	Total Charge	\$336	\$336	\$336	\$262	\$335	\$335	\$335	\$261
Springfield Hospital	Hospital Charge	\$188	\$279	\$370	\$188	n/a	n/a	n/a	n/a
	Physician Charge	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	Total Charge	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Hospital System Averages	Hospital Charge	\$306	\$331	\$362	\$235	\$322	\$349	\$380	\$246
	Physician Charge	\$37	\$37	\$37	\$26	\$36	\$36	\$36	\$24
	Total Charge	\$364	\$377	\$395	\$266	\$369	\$391	\$414	\$270

All Vermont Community Hospitals

		Therapeutic Procedures						
	CPT Code	97110	97112	97113	97116	97124	97150	97530 <sup>1</sup>
Hospital	Description	Therapeutic exercise to develop strength, endurance, range of motion, and flexibility; 15 min.	Therapeutic procedure to re-educate brain-to-nerve-to-muscle function; 15 min.	Therapeutic procedure, aquatic therapy with therapeutic exercises; 15 min.	Therapeutic procedure, walking training; 15 min.	Therapeutic procedure, massage; 15 min.	Therapeutic procedures in a group setting	Therapeutic activities to improve function, with one-on-one contact between patient and provider; 15 min.
§ Brattleboro Memorial Hospital	Hospital Charge							
	Physician Charge							
	Total Charge							
Central Vermont Medical Center	Hospital Charge	\$128	\$115	\$105	\$114	n/a	\$64	\$141
	Physician Charge	\$0	\$0	\$0	\$0	n/a	\$0	\$0
	Total Charge	\$128	\$115	\$105	\$114	n/a	\$64	\$141
Copley Hospital	Hospital Charge	\$94	\$109	\$114	\$93	n/a	n/a	\$114
	Physician Charge	\$0	\$0	\$0	\$0	n/a	n/a	\$0
	Total Charge	\$94	\$109	\$114	\$93	n/a	n/a	\$114
University of Vermont Medical Center	Hospital Charge	\$144	\$136	\$126	\$132	\$126	\$254	\$146
	Physician Charge	\$111	\$129	\$141	\$111	\$109	\$67	\$145
	Total Charge	\$255	\$265	\$267	\$242	\$235	\$321	\$291
§ Gifford Medical Center	Hospital Charge							
	Physician Charge							
	Total Charge							
Grace Cottage Family Health & Hospital	Hospital Charge	\$107	\$107	n/a	\$107	\$107	\$107	\$107
	Physician Charge	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	Total Charge	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Mt. Ascutney Hospital	Hospital Charge	\$200	\$209	\$273	\$177	\$164	\$131	\$217
	Physician Charge	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	Total Charge	\$200	\$209	\$273	\$177	\$164	\$131	\$217
North Country Hospital	Hospital Charge	\$54	\$103	n/a	\$104	\$65	\$183	\$165
	Physician Charge	\$0	\$0	n/a	\$0	\$42	\$0	\$0
	Total Charge	\$54	\$103	n/a	\$104	\$107	\$183	\$165
Northeastern Vermont Regional Hospital	Hospital Charge	\$57	\$57	\$75	\$174	\$46	\$149	\$57
	Physician Charge	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	Total Charge	\$57	\$57	\$75	\$174	\$46	\$149	\$57
Northwestern Medical Center	Hospital Charge	\$113	\$113	\$152	\$113	n/a	\$61	\$113
	Physician Charge	\$0	\$0	\$0	\$0	n/a	\$0	\$0
	Total Charge	\$113	\$113	\$152	\$113	n/a	\$61	\$113
Porter Hospital	Hospital Charge	\$119	\$119	\$119	\$119	\$119	n/a	\$175
	Physician Charge	\$0	\$0	\$0	\$0	\$0	n/a	\$0
	Total Charge	\$119	\$119	\$119	\$119	\$119	n/a	\$175
Rutland Regional Medical Center	Hospital Charge	\$123	\$128	n/a	\$107	\$140	\$110	\$140
	Physician Charge	\$0	\$0	n/a	\$0	\$0	\$0	\$0
	Total Charge	\$123	\$128	n/a	\$107	\$140	\$110	\$140
Southwestern Vermont Medical Center	Hospital Charge	\$168	\$168	n/a	\$168	\$168	n/a	\$168
	Physician Charge	\$0	\$0	n/a	\$0	\$0	n/a	\$0
	Total Charge	\$168	\$168	n/a	\$168	\$168	n/a	\$168
Springfield Hospital	Hospital Charge	\$98	\$91	\$80	\$41	n/a	\$91	\$98
	Physician Charge	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	Total Charge	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Hospital System Averages	Hospital Charge	\$117	\$121	\$131	\$121	\$117	\$128	\$137
	Physician Charge	\$11	\$13	\$20	\$11	\$22	\$10	\$15
	Total Charge	\$131	\$139	\$158	\$141	\$140	\$146	\$158

1. At Porter, this is the highest amount for this CPT in the chargemaster.