

OUR MOST COMMON CHARGES

At Mercer Health, we believe you have a right to know how much you or your insurance company may be charged for many of our essential services. We charge the same for all patients, but a patient's responsibility may vary, depending on payment plans negotiated with individual health insurers. Uninsured or underinsured patients should consult with our admitting and billing staff to determine whether they qualify for discounts. The list below contains our charges for room and board, emergency department, operating room, newborn delivery, physical therapy and other procedures. These charges are correct as of July 1, 2025.

Daily Room Charges

Daily Room Charge	\$669.60
Intensive Care	\$1,582.88
Maternity Daily	\$1,245.73
Nursery	\$1,061.68
Nursery Special Care	\$1,595.25

Nursing Care – Per Day Charges

Level 1	\$357.87
Level 2	\$501.01
Level 3	\$651.38
Level 4	\$1,073.62

Operating Room Charges

Level 1 (0-30 minutes)	\$3,011.68
(Each additional 15 minutes)	\$125.73
Level 2 (0-30 minutes)	\$4,101.56
(Each additional 15 minutes)	\$206.87
Level 3 (0-30 minutes)	\$4,539.44
(Each additional 15 minutes)	\$290.20
Level 4 (0-30 minutes)	\$6,188.53
(Each additional 15 minutes)	\$306.29
Level 5 (0-30 minutes)	\$6,435.60
(Each additional 15 minutes)	\$331.89
Level Robotic (0-30 minutes)	\$9,465.37
(Each additional 15 minutes)	\$394.29
Endoscopies	\$3,760.39
(I.e. Colonoscopies & EGDs)	

Emergency Department Charges

Facility Visit Charges

Level 1	\$202.70
Level 2	\$277.07
Level 3	\$409.41
Level 4	\$1,138.23
Level 5	\$1,434.46
Critical Care	\$2,112.46

Physician Charges

Level 1	\$98.58
Level 2	\$160.06
Level 3	\$237.44
Level 4	\$363.58
Level 5	\$677.37
Critical Care	\$903.65

Doctors' Care Charges

Facility Visit Charges

Level 1	\$69.10
Level 2	\$97.16
Level 3	\$112.51
Level 4	\$152.24
Level 5	\$283.41

Physician Charges

Level 1	\$16.43
Level 2	\$36.57
Level 3	\$54.06
Level 4	\$77.38
Level 5	\$119.25

Laboratory Charges

Basic Metabolic Profile	\$230.00
BNPeptide	\$326.18
CBC with auto diff	\$106.40
Comprehensive Metabolic Profile	\$350.00
Creatinine	\$35.50
Culture Blood (Base Charge)	\$184.75
Culture Genital (Base Charge)	\$132.33
Culture Strep A Screen (Base Charge)	\$63.16
Culture Urine (Base Charge)	\$134.72
Glucose	\$35.50
Hemoglobin A1C	\$98.11
Lactate, Plasma	\$128.06
Lipase	\$129.95
Lipid Profile	\$184.11
Liver Panel	\$248.49
Magnesium	\$123.29
PSA	\$139.53
PT	\$57.98
PTT	\$75.81
Sed Rate	\$58.34
SGPT/ALT	\$35.50
T4, Free	\$157.59
Troponin I	\$121.03
TSH	\$147.79
UCG, Urine pregnancy	\$61.91
Uric Acid	\$53.52
Urine Drug Screen	\$284.12
Urine Screen with Reflex Micro	\$36.69
Vitamin D 25-OH, Total	\$277.76

OUR MOST COMMON CHARGES CONTINUED

X-Ray and Radiological Charges

Bone Density	\$535.55
CT Abdomen with Contrast	\$1,985.98
CT Abdomen without Contrast	\$1,822.94
CT Abdomen with/without Contrast	\$2,164.73
CT Head without Contrast	\$1,486.61
CT Pelvis with Contrast	\$1,985.98
CT Pelvis without Contrast	\$1,805.44
CT Thorax with Contrast	\$1,623.68
Mammo Screening	\$254.91
Mammo Diagnostic	\$309.44
MRI Ankle without Contrast	\$2,380.90
MRI Brain without Contrast	\$2,380.90
MRI Cervical Spine without Contrast	\$2,380.90
MRI Knee without Contrast	\$2,380.90
MRI Lumbar Spine with/without Contrast	\$2,618.79
MRI Lumbar Spine without Contrast	\$2,380.90
MRI Shoulder without Contrast	\$2,380.90
Ultrasound Carotid Artery Complete	\$1,053.92
X-ray Abdomen 1 view/KUB	\$223.05
X-ray Abdomen Complete Series	\$324.88
X-ray Ankle – 3 views	\$340.69
X-ray Cervical Spine – 2/3 view	\$363.36
X-ray Chest PA & Lateral	\$335.63
X-ray Chest PA X-ray	\$257.21
X-ray Foot – 3 views	\$348.65
X-ray Hand – 3 view	\$340.69
X-ray Hip AP & Lateral	\$316.79
X-ray Lumbar Spine - 2/3 view	\$417.91
X-ray Lumbar Spine with Obliques	\$536.77
X-ray Pelvis	\$387.25
X-ray Shoulder Complete – 1 view	\$277.58
X-ray Shoulder Complete – 2+ views	\$368.26

Cardiology Charges

Echo Complete	\$1,536.93
EKG	\$191.46
Stress Treadmill	\$915.69

Pulmonary Therapy Charges

Arterial Puncture	\$40.36
Oximetry Single	\$70.69
Initial Inhaler Treatment	\$25.56
Subsequent Inhaler Treatment	\$20.20
Initial Nebulizer Treatment	\$76.63
Subsequent Nebulizer Treatment	\$52.87
Ventilator (Per Hour)	\$96.22

Pulmonary Function Testing

(All PFT will also have interpretive fees from a pulmonologist)

Spirometry	\$234.03
Pre/Post Spirometry	\$576.20
CO Diffusion	\$173.44
Plethysmography	\$191.28
Complete PFT	\$940.92

Physical Therapy Charges

Electrical Stimulation	\$86.66
Therapeutic Exercise	\$108.48
Ultrasound	\$94.54
Gait Training	\$92.11
Evaluation – PT Low Intensity	\$83.01
Evaluation – PT Moderate Intensity	\$224.82
Evaluation – PT High Intensity	\$284.19
Manual Therapy	\$110.91
Neuromuscular Re-Education	\$95.33
Therapeutic Activities	\$98.18
Self-Care Home Management	\$95.14