

# Typical Medical Costs

## New Hampshire

<b>Allergy Shots – Professional Services only</b>		<b>Cost Range</b>
Allergy (Immunotherapy) Shots – Professional Services only		\$16 - \$22
Allergy – Preparation of Allergy Extract		\$13 - \$18
<b>Complex Services (Average Episodes)</b>		<b>Cost Range</b>
Arthroscopy – Knee		\$1,936- \$7,336
Colonoscopy – Diagnostic, without polyp removal		\$1,200 - \$2,633
Colonoscopy – with removal of polyps		\$1,848 - \$3,647
Emergency Room – Typical visit, not including hospitalization		\$411 - \$1,545
Endoscopy – Upper gastrointestinal tract		\$1,673 - \$3,240
<b>CT Scan (Computed Tomography)</b>		<b>Cost Range</b>
Abdomen, with contrast		\$579 - \$1,362
Head or Brain, without contrast		\$680 - \$1,179
Pelvis, with contrast		\$493 - \$1,017
Thorax (Chest), with contrast		\$694 - \$1,721
<b>Early Intervention Program</b>		<b>Cost Range</b>
Home visit (per 15 minutes)		\$20 - \$25
<b>Echocardiogram</b>		<b>Cost Range</b>
Echocardiogram with Interpretation		\$377 - \$660
<b>Electrocardiogram (ECG)</b>		<b>Cost Range</b>
Routine with Interpretation		\$29 - \$38
<b>Exercise Stress Test</b>		<b>Cost Range</b>
Interpretation and report (in addition to below)		\$29 - \$32
Tracing Only, without Interpret/Report		\$326 - \$524
<b>Lab Tests</b>		<b>Cost Range</b>
Blood Typing		\$21 - \$39
Complete Blood Count – Red cells, White cells, Platelets		\$28 - \$46
Creatinine – Kidney blood test		\$12 - \$36
Liver Function Panel – blood tests		\$15 - \$64
Metabolic Panel – Electrolytes, kidney, liver blood tests		\$25 - \$74
Pap smear		\$181 - \$301
Pregnancy Blood Test (hCG)		\$41 - \$95
Prenatal Blood Test (Alpha-Fetoprotein)		\$36 - \$94
Prothrombin Time – Warfarin (Coumadin) blood test		\$12 - \$36
Strep A Test – Rapid screening with throat swab		\$17 - \$22
Thyroid Test (TSH) – blood test (checks for low thyroid)		\$44 - \$85
Urinalysis – Strips without microscopy		\$4- \$14
<b>MRI (Magnetic Resonance Imaging)</b>		<b>Cost Range</b>
Any leg joint, without contrast		\$1,012 - \$1,767
Brain, with contrast		\$1,839 - \$2,656
Lower Back, without contrast		\$1,110 - \$1,937
Neck, without contrast		\$1,129 - \$1,914
<b>Myocardial Perfusion Scan</b>		<b>Cost Range</b>
Ejection Fraction (in addition to below)		\$148 - \$598
Myocardial Perfusion Scan		\$1,210 - \$2,006
Wall Motion Study (in addition to above)		\$264 - \$1552
<b>Office Visits</b>		<b>Cost Range</b>
Behavioral Health, Initial Office Visit		\$78 - \$117
Cardiologist, Office Visit		\$307 - \$421
Gastroenterologist, Office Visit		\$190 - \$343
PCP Office Visit		\$67 - \$212
<b>PET Scan (Positron Emission Tomography)</b>		<b>Cost Range</b>
PET Scan – Positron Emission Tomography		\$3,537 - \$4,392
<b>Physical Therapy (PT)</b>		<b>Cost Range</b>
Physical Therapy Initial Evaluation Visit		\$67 - \$70
Physical Therapy Treatment Visit		\$26 - \$65
<b>Rehabilitation</b>		<b>Cost Range</b>
Cardiac Rehabilitation Program		\$88- \$130
<b>Ultrasound (US)</b>		<b>Cost Range</b>
Pelvic (Non-Obstetric)		\$162 - \$393
Transvaginal		\$157 - \$316
<b>X-Ray</b>		<b>Cost Range</b>
Single Body Part (such as arm, knee, ankle)		\$37 - \$216
Mammography: 2 view film study bilateral		\$169 - \$292
Mammography: Producing direct digital image, bilateral		\$246 - \$331