

Received for that	Calendar Year 2023 Off campus Top Ten Procedures for which Facility Fees are Charged and Related Net Revenues (ordered by hospital)		
Seldgeport Hospital Performed. Corresion. With Scorotal Doublet Enhancembergals, And With Coor Pieu Doublet Enhancembergals (1997) Performed. Corresion Conference (1997) Performed. Doublet (1997) Perf	·		
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\$1,000			\$1,024,165
Bedgepoort Hospital			\$1,001,043
Selection Sele			\$992,698
Bedigepoor Hospital			\$884,322
Bindgeport Hospital			\$824,407
State Despital			\$421,271
State Despital	Bristol Hospital	S9480-Tcc Intensive O/P Day	\$172,561
State Despited		90853-Tcc Group Therapy Lcsw	\$142,240
Strate Hospital			\$96,063
Strate Despital			\$89,243
Security			\$75,732
Select S	Bristol Hospital	99213-Tcc Pharm Mgmt Md	\$72,921
Setable Sept	Bristol Hospital		\$62,305
Seption Sept			\$45,300
State Process Proces			\$34,508
Charlotte Humperford Hospital 77386-New Model Red Tr. Der Gred \$11,056.0 \$11,056.0 \$11,056.0 \$11,056.0 \$11,056.0 \$11,056.0 \$11,056.0 \$11,056.0 \$10,056.0			\$28,227
Charlotte Hungerford Hospital 77.886-Nats Whould Red Ti, Don'Cock 51.076.25 51.076			\$1,382,647
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Charlotte Hungerford Hospital 77412-Resistant Teatment Delivery 9577.07 9577.0			\$865,498
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Charlotte Hungerford Hospital 78452-Ht Muscle Image Speet Mult \$3775.			
Sayson			\$602,978
Connecticut Children's Medical Center 59430 - Tympanostomy General Amethesia \$1,944,65			
Connecticut Children's Medical Center 95810 - Polysom 65-Yrs Sleep 45- Add Param Attnd \$1.838,37 Connecticut Children's Medical Center 95810 - Polysom 65-Yrs Sleep 35-Add Param Attnd \$7.977 Connecticut Children's Medical Center 95782 - Polysom 65 Yrs Sleep Slaep 45- Add Param Attnd \$7.976 Connecticut Children's Medical Center 95782 - Polysom 65 Yrs Sleep Slaep 45- Add Param Attnd \$7.976 Connecticut Children's Medical Center 95782 - Polysom 65 Yrs Sleep Slaep 45- Add Param Attnd \$7.976 Connecticut Children's Medical Center 95782 - Polysom 65 Yrs Sleep Slaep 45- Add Param Attnd \$7.976 Connecticut Children's Medical Center 95782 - Polysom 65 Yrs Sleep Slaep 45- Add Param Attnd \$7.976 Connecticut Children's Medical Center 95782 - Polysom 65 Yrs Sleep Slaep 45- Add Param Attnd \$7.976 Connecticut Children's Medical Center 95782 - Unique Procure Children's Medical Center 95782 - Unique Procudent 95782 -	-		
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Connecticut Children's Medical Center G0339 - Facility Sys Dental Rehab S665,55			
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Connecticut Children's Medical Center 2630- Tonsillectomy Adenoidectomy -Age 12 500-86.			
Connecticut Children's Medical Center 2988 Ambra Aided Ant Cruciate Ligm Rpr/Apmru/Rcnsi			
Connecticut Children's Medical Center 27427 - Ligamentous Reconstruction Knee Extra-Articular \$345.05.05 Connecticut Children's Medical Center 1389 - United Procedure Dentablevelar Structures \$3591.07 Danbury Hospital 77067/Mammography Screening Bilateral With O'r Without Cad \$1,794.77 Danbury Hospital 78641/Ultrasound, Breast Complete \$1,700.55 Danbury Hospital 93309/Transhoracia Echocardiogram, Complete \$782.15 Danbury Hospital 93509/Transhoracia Echocardiogram, Complete \$782.15 Danbury Hospital 94267/Physomography, 6 + Yeast, 4 Parameters, Attended \$782.15 Danbury Hospital 94267/Physomography, 6 + Yeast, 4 Parameters, Attended \$782.15 Danbury Hospital 94267/Physomography, 6 + Yeast, 4 Parameters, Attended \$782.15 Danbury Hospital 94267/Physomography, 6 + Yeast, 4 Parameters, Attended \$782.15 Danbury Hospital 94267/Phelmsomography Complete \$782.15 Danbury Hospital 94267/Phelmsomography Complete \$782.15 Danbury Hospital 94267/Phelmsomography Complete \$782.15 Danbury Hospital 9397/Duplex Scan Of Extremity Veins, Unilateral Or Limited Study \$434.25 Danbury Hospital 9397/Duplex Scan Of Extremity Veins, Unilateral Or Limited Study \$434.25 Day Kimball Hospital 77063 - Screening Digital Breast Tomosynthesis Bi-Lateral \$122.46 Day Kimball Hospital 77063 - Screening Digital Breast Tomosynthesis Bi-Lateral \$122.46 Day Kimball Hospital 77063 - Screening Digital Breast Tomosynthesis Bi-Lateral \$142.00 Day Kimball Hospital 77065 - Non-Obstetric Pelvis Ultrasound \$162.00 Day Kimball Hospital 77064 - Redological Examination Chest 2 Views \$1.45 Day Kimball Hospital 77064 - Redological Examination Chest 2 Views \$3.86 Day Kimball Hospital 77064 - Redological Examination Chest 2 Views \$3.87 Day Kimball Hospital 77064 - Redological Examination Chest 2 Views \$3.87 Day Kimball Hospital 77064 - Redological Examination Chest 2 Views \$3.87 Day Kimball Hospital 77065 - Redological Examinat			
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Day Kimball Hospital 77067 - Screening Mammography 2 Views BH-Lateral 5277.61			\$434,202
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Day Kimball Hospital 77080 - Bone Density Study \$46,74 \$45,74 \$26,856 - Non-Obstetite Pelvis Ultrasound \$13,81 \$13,			\$122,491
Day Kimball Hospital 76836 - Non-Obstetric Pelvis Ultrasound \$14.20			\$46,744
Day Kimball Hospital 76536 - Ultrasound Off Soft Tissues - Head/Neck \$13.48			\$14,205
Day Kimball Hospital 76536 - Ultrasound Of Soft Tissues - Head/Neck \$13.46			\$13,816
Day Kimball Hospital 76770 - Ultrasound Retroperitoneal \$10.55	Day Kimball Hospital		\$13,463
Day Kimball Hospital 73564 - Radiological Examination Chest 2 Views 73564 - Radiological Examination - Knee 88.87 Bay Kimball Hospital 73564 - Radiological Examination - Knee 86.92 Greenwich Hospital Mechanical Technique (E.g., Irrigation And Aspiration Of Intraocular Lens Prosthesis (1 Stage Procedure), Manual Or Mechanical Technique (E.g., Irrigation And Aspiration Of Phacoemulsification) 93306-Echocardiography, Transthoracic, Real-Time With Image Documentation (2D), Includes M-Mode Recording, When Performed, Complete, With Spectral Doppler Echocardiography, And With Color Flow Doppler Echocardiography \$1,801,00 Greenwich Hospital 45380-Colonoscopy, Flexible; With Biopsy, Single Or Multiple Greenwich Hospital 58558-Hysteroscopy, Surgiaci, With Samplia (Biopsy) Of Endometrium And/Or Polypectomy, With Or Without D & C \$700,61 Greenwich Hospital Greenwich Hospital Godé3-Hospital Outpatient Clinic Visit For Assessment And Management Of A Patient Greenwich Hospital Greenwich Hospital 19318-Reduction Mammapliasty Greenwich Hospital 29581-Application Of Multi-Layer Compression System; Leg (Below Knee), Including Ankle And Foot Greenwich Hospital 77067-Screening Mammography, Bilateral (2-View Study Of Each Breast), Including Computer-Aided Detection (Cad) When 45378-Colonoscopy, Flexible; Diagnostic, Including Collection Of Specimen(S) By Brushing Or Washing, When Performed (Separate Procedure) 45378-Colonoscopy, Flexible; Diagnostic, Including Collection Of Specimen(S) By Brushing Or Washing, When Performed (Separate Procedure) 3408,88 Griffin Hospital 77048-Mit Lumbar Spine W/O Dye 3408,38 Griffin Hospital 77148-Mit Lumbar Spine W/O Dye 3408,38 Griffin Hospital 77214M-Mit Neck/Spine W/O Dye 3408,38 Griffin Hospital 77059-Mit Both Breasts 77059-Mit Both Breasts 77059-Mit Both Preasts 77059-Mit Both Preasts 77059-Mit Both Breasts 77059-Mit Both Breasts		76770 - Ultrasound Retroperitoneal	\$10,598
Pay Kimball Hospital 73564 - Radiological Examination - Knee \$6,92			\$9,341
Greenwich Hospital (Saso-Ecohoardiography, Transthoracic, Real-Time With Insertion Of Intraocular Lens Prosthesis (1 Stage Procedure), Manual Or (Saciation) (Mechanical Technique (Eg., Irrigation And Aspiration Or Phacoemulsification) (Saciation)			\$8,876
Greenwich HospitalMechanical Technique (Eg, Irrigation And Aspiration Or Phacoemulsification)\$2,251,59Greenwich Hospital93306-Echocardiography, Transthoracic, Real-Time With Image Documentation (2D), Includes M-Mode Recording, WhenGreenwich Hospital45380-Colonoscopy, Flexible; With Spectral Doppler Echocardiography, And With Color Flow Doppler Echocardiography\$1,801,00Greenwich Hospital45380-Colonoscopy, Flexible; With Biopsy, Single Or Multiple\$1,113,63Greenwich Hospital58558-Hysteroscopy, Surgical; With Sampling (Biopsy) Of Endometrium And/Or Polypectomy, With Or Without D & C\$700,61Greenwich Hospital43239-Esophagoqastroduodenoscopy, Flexible, Transora; With Biopsy, Single Or Multiple\$675,66Greenwich Hospital60463-Hospital Outpatient Clinic Visit For Assessment And Management Of A Patient\$642,10Greenwich Hospital19318-Reduction Mammaplasty\$642,10Greenwich Hospital19318-Reduction Mammaplasty\$505,32Greenwich Hospital29581-Application Of Multi-Layer Compression System; Leg (Below Knee), Including Ankle And Foot\$115,91Greenwich Hospital77067-Screening Mammography, Bilateral (2-View Study Of Each Breast), Including Computer-Aided Detection (Cad) When\$489,86Greenwich Hospital(Separate Procedure)\$461,33Griffin Hospital72148-Mir Lumbar Spine W/O Dye\$461,33Griffin Hospital74177-Ct Abd & Pelv W/Contrast\$354,88Griffin Hospital73221-Mir Joint Upr Extrem W/O Dye\$296,18Griffin Hospital72197-Mir Pelvis W/O & W/Dye\$275,01Griffin Hospital77059-M		73564 - Radiological Examination - Knee	\$6,921
93306-Echocardiography, Transthoracic, Real-Time With Image Documentation (2D), Includes M-Mode Recording, When Performed, Complete, With Spectral Doppler Echocardiography, And With Color Flow Doppler Echocardiography \$1,8101,007 Greenwich Hospital 45380-Colonoscopy, Flexible; With Biopsy, Single Or Multiple \$1,113,62 Greenwich Hospital 58558-Hysteroscopy, Surgical; With Sampling (Biopsy) Of Endometrium And/Or Polypectomy, With Or Without D & C \$700,61 Greenwich Hospital 43239-Esophagogastroduodenoscopy, Flexible, Transoral; With Biopsy, Single Or Multiple \$675,66 Greenwich Hospital G0463-Hospital Outpatient Clinic Visit For Assessment And Management Of A Patient \$642,10 Greenwich Hospital 19318-Reduction Mammaplasty 1			
Greenwich Hospital Performed, Complete, With Spectral Doppler Echocardiography, And With Color Flow Doppler Echocardiography \$1,801,00 Greenwich Hospital 45380-Colonoscopy, Flexible; With Biopsy, Single Or Multiple \$1,113,63 Greenwich Hospital 58858-Hysteroscopy, Surgical; With Sampling (Biopsy) Of Endometrium And/Or Polypectomy, With Or Without D & C \$700,61 Greenwich Hospital 43239-Esophagogastroduodenoscopy, Flexible, Transoral; With Biopsy, Single Or Multiple \$675,66 Greenwich Hospital G0463-Hospital Outpatient Clinic Visit For Assessment And Management Of A Patient \$642,10 Greenwich Hospital 19318-Reduction Mammaplasty \$505,36 Greenwich Hospital 29581-Application Of Multi-Layer Compression System; Leg (Below Knee), Including Ankle And Foot \$115,91 Greenwich Hospital 77067-Screening Mammography, Bilateral (2-View Study Of Each Breast), Including Computer-Aided Detection (Cad) When \$489,86 Griffin Hospital (Separate Procedure) \$461,36 Griffin Hospital (Separate Procedure) \$461,36 Griffin Hospital 72148- Mri Lumbar Spine W/O Dye \$408,86 Griffin Hospital 73721-Mri John Up Extrem W/O Dye \$320,66 Griffin Hospital 73221-Mri John Up Extrem W/O Dye \$226,67 Griffin Hospital 73221-Mri John Up Extrem W/O Dye \$226,67 Griffin Hospital G0997-Ldct For Lug Ca Screening \$268,86 Griffin Hospital 76536-Us Exam Of Head And Neck \$265,91 Griffin Hospital 77214-Mri Hock/Spine W/O Dye \$243,88 Griffin Hospital 77214-Mri Hock/Spine W/O Dye			\$2,251,596
Greenwich Hospital 45380-Colonoscopy, Flexible; With Biopsy, Single Or Multiple \$1,113,63 Greenwich Hospital 58558-Hysteroscopy, Surgical; With Sampling (Biopsy) Of Endometrium And/Or Polypectomy, With Or Without D & C \$700,61 Greenwich Hospital 43239-Esophagoagastroduodenoscopy, Flexible, Transoral; With Biopsy, Single Or Multiple \$675,66 Greenwich Hospital G0463-Hospital Ordinate Clinic Visit For Assessment And Management Of A Patient \$42,10 Greenwich Hospital 19318-Reduction Mammaplasty \$505,32 Greenwich Hospital 29581-Application Of Multi-Layer Compression System; Leg (Below Knee), Including Ankle And Foot \$115,91 Greenwich Hospital 77067-Screening Mammography, Bilateral (2-View Study Of Each Breast), Including Computer-Aided Detection (Cad) When \$489,86 Greenwich Hospital (Separate Procedure) \$4578-Colonoscopy, Flexible; Diagnostic, Including Collection Of Specimen(S) By Brushing Or Washing, When Performed (Separate Procedure) \$461,38 Griffin Hospital 72148- Mri Lumbar Spine W/O Dye \$408,82 Griffin Hospital 74177-Ct Abd & Pelv W/Contrast \$354,85 Griffin Hospital 73221-Mri Joint Upr Extre W/O Dye \$354,86 Griffin Hospital 73221-Mri Joint Upr Extre W/O Dye \$256,18 Griffin Hospital 72197-Mri Pelvis W/O & W/Dye \$256,18 Griffin Hospital G0297-Ldct For Lug Ca Screening \$268,86 Griffin Hospital 76536-Us Exam Of Head And Neck \$265,91 Griffin Hospital 77059-Mri Both Breasts \$247,84			·
Greenwich Hospital 58558-Hysteroscopy, Surgical; With Sampling (Biopsy) Of Endometrium And/Or Polypectomy, With Or Without D & C \$700,61 Greenwich Hospital 43239-Esophagogastroduodenoscopy, Flexible, Transoral; With Biopsy, Single Or Multiple \$875,06 Greenwich Hospital 91318-Reduction Mammaplasty \$862,10 Greenwich Hospital 19318-Reduction Mammaplasty \$505,32 Greenwich Hospital 29581-Application Of Multi-Layer Compression System; Leg (Below Knee), Including Ankle And Foot \$115,91 Greenwich Hospital 77067-Screening Mammography, Bilateral (2-View Study Of Each Breast), Including Computer-Aided Detection (Cad) When \$489,86 Greenwich Hospital (Separate Procedure) \$45378-Colonoscopy, Flexible; Diagnostic, Including Collection Of Specimen(S) By Brushing Or Washing, When Performed (Separate Procedure) \$461,38 Griffin Hospital 74147-Ct Abd & Pelv W/Contrast \$354,88 Griffin Hospital 74177-Ct Abd & Pelv W/Contrast \$354,88 Griffin Hospital 73221-Mri Joint Upr Extrem W/O Dye \$320,66 Griffin Hospital 73221-Mri Joint Upr Extrem W/O Dye \$275,01 Griffin Hospital G0297-Ldct For Lug Ca Screening \$268,86 Griffin Hospital 76536-Us Exam Of Head And Neck \$265,91 Griffin Hospital 772141-Mri Neck/Spine W/O Dye \$243,88 Griffin Hospital 772141-Mri Neck/Spine W/O Dye \$243,88 Griffin Hospital 772141-Mri Neck/Spine W/O Dye \$243,88 Griffin Hospital 72141-Mri Neck/Spine W/O Dye	Greenwich Hospital	Performed, Complete, With Spectral Doppler Echocardiography, And With Color Flow Doppler Echocardiography	\$1,801,008
Greenwich Hospital 43239-Esophagogastroduodenoscopy, Flexible, Transoral; With Biopsy, Single Or Multiple \$675,66 Greenwich Hospital G0463-Hospital Outpatient Clinic Visit For Assessment And Management Of A Patient \$622,16 Greenwich Hospital 19318-Reduction Mammaplasty \$505,32 Greenwich Hospital 29581-Application Of Multi-Layer Compression System; Leg (Below Knee), Including Ankle And Foot \$115,91 Greenwich Hospital 77067-Screening Mammography, Bilateral (2-View Study Of Each Breast), Including Computer-Aided Detection (Cad) When \$489,86 Greenwich Hospital (Separate Procedure) \$45378-Colonoscopy, Flexible; Diagnostic, Including Collection Of Specimen(S) By Brushing Or Washing, When Performed \$461,39 Griffin Hospital 72148- Mri Lumbar Spine W/O Dye \$408,82 Griffin Hospital 74177-C1 Abd. Pelv W/Ocntrast \$354,88 Griffin Hospital 73721-Mri John Upr Extrem W/O Dye \$320,65 Griffin Hospital 73221-Mri John Upr Extrem W/O Dye \$296,16 Griffin Hospital G0297-Ldct For Lug Ca Screening \$275,10 Griffin Hospital 76536-Us Exam Of Head And Neck \$265,86 Griffin Hospital 772141-Mri Both Breasts \$247,44			\$1,113,635
Greenwich Hospital G0463-Hospital Outpatient Clinic Visit For Assessment And Management Of A Patient \$642,10 Greenwich Hospital 19318-Reduction Mammaplasty \$505,32 Greenwich Hospital 29581-Application Of Multi-Layer Compression System; Leg (Below Knee), Including Ankle And Foot \$115,91 Greenwich Hospital 77067-Screening Mammography, Bilateral (2-View Study Of Each Breast), Including Computer-Aided Detection (Cad) When \$489,86 Greenwich Hospital (Separate Procedure) \$461,38 Griffin Hospital 72148- Mri Lumbar Spine W/O Dye \$461,38 Griffin Hospital 74177-Ct Abd & Pelv W/Contrast \$354,88 Griffin Hospital 7321-Mri Joint Upr Extre W/O Dye \$354,88 Griffin Hospital 73221-Mri Joint Upr Extre W/O Dye \$296,18 Griffin Hospital 72197-Mri Pelvis W/O & W/Dye \$275,01 Griffin Hospital G0297-Ldct For Lug Ca Screening \$288,88 Griffin Hospital 76536-Lys Exam Of Head And Neck \$268,88 Griffin Hospital 77059-Mri Both Breasts \$247,48			\$700,613
Greenwich Hospital 19318-Reduction Mammaplasty \$505,32 Greenwich Hospital 29581-Application Of Multi-Layer Compression System; Leg (Below Knee), Including Ankle And Foot \$115,91 Greenwich Hospital 77067-Screening Mammography, Bilateral (2-View Study Of Each Breast), Including Computer-Aided Detection (Cad) When \$489,86 Greenwich Hospital 45378-Colonoscopy, Flexible; Diagnostic, Including Collection Of Specimen(S) By Brushing Or Washing, When Performed (Separate Procedure) \$461,33 Griffin Hospital 72148- Mri Lumbar Spine W/O Dye \$408,82 Griffin Hospital 74177-Ct Abd & Pelv W/Contrast \$354,88 Griffin Hospital 73721-Mri Jntt Of Lwr Extre W/O Dye \$320,65 Griffin Hospital 73221-Mri Joint Upr Extrem W/O Dye \$296,18 Griffin Hospital 73221-Mri Joint Upr Extrem W/O Dye \$275,01 Griffin Hospital G0297-Ldct For Lug Ca Screening \$268,86 Griffin Hospital 76536-Us Exam Of Head And Neck \$265,91 Griffin Hospital 77059-Mri Both Breasts \$2247,44 Griffin Hospital 72141-Mri Neck/Spine W/O Dye \$243,88			\$675,663
Greenwich Hospital 29581-Application Of Multi-Layer Compression System; Leg (Below Knee), Including Ankle And Foot \$115,91 Greenwich Hospital 77067-Screening Mammography, Bilateral (2-View Study Of Each Breast), Including Computer-Aided Detection (Cad) When \$489,86 Greenwich Hospital 45378-Colonoscopy, Flexible; Diagnostic, Including Collection Of Specimen(S) By Brushing Or Washing, When Performed (Separate Procedure) \$461,39 Griffin Hospital 72148- Mri Lumbar Spine W/O Dye \$408,82 Griffin Hospital 74177-Ct Abd & Pelv W/Contrast \$354,88 Griffin Hospital 73721-Mri Joint Upr Extre W/O Dye \$320,65 Griffin Hospital 73221-Mri Joint Upr Extrem W/O Dye \$296,18 Griffin Hospital 72197-Mri Pelvis W/O & W/Dye \$275,00 Griffin Hospital G0297-Ldct For Lug Ca Screening \$268,86 Griffin Hospital 76536-Us Exam Of Head And Neck \$265,91 Griffin Hospital 77059-Mri Both Breasts \$247,44 Griffin Hospital 72141-Mri Neck/Spine W/O Dye \$243,88			\$642,107
Greenwich Hospital 77067-Screening Mammography, Bilateral (2-View Study Of Each Breast), Including Computer-Aided Detection (Cad) When \$489,86 Greenwich Hospital 45378-Colonoscopy, Flexible; Diagnostic, Including Collection Of Specimen(S) By Brushing Or Washing, When Performed (Separate Procedure) \$461,38 Griffin Hospital 72148- Mri Lumbar Spine W/O Dye \$408,82 Griffin Hospital 74177-Ct Abd & Pelv W/Contrast \$354,88 Griffin Hospital 7321-Mri Joint Upr Extre W/O Dye \$320,66 Griffin Hospital 73221-Mri Joint Upr Extrem W/O Dye \$296,18 Griffin Hospital 72197-Mri Pelvis W/O & W/Dye \$275,01 Griffin Hospital G0297-Ldct For Lug Ca Screening \$288,86 Griffin Hospital 76536-Us Exam Of Head And Neck \$268,86 Griffin Hospital 77059-Mri Both Breasts \$247,44 Griffin Hospital 72141-Mri Neck/Spine W/O Dye \$243,88			\$505,326
45378-Colonoscopy, Flexible; Diagnostic, Including Collection Of Specimen(S) By Brushing Or Washing, When Performed (Separate Procedure) \$461,39			\$115,919
Greenwich Hospital (Separate Procedure) \$461,36 Griffin Hospital 72148- Mri Lumbar Spine W/O Dye \$408,82 Griffin Hospital 74177-CI Abd & Pelv W/Contrast \$354,88 Griffin Hospital 73721-Mri Joint Upr Extre W/O Dye \$320,65 Griffin Hospital 73221-Mri Joint Upr Extrem W/O Dye \$296,18 Griffin Hospital 72197-Mri Pelvis W/O & W/Dye \$275,01 Griffin Hospital G0297-Ldct For Lug Ca Screening \$268,86 Griffin Hospital 76536-Us Exam Of Head And Neck \$265,91 Griffin Hospital 77059-Mri Both Breasts \$247,44 Griffin Hospital 72141-Mri Neck/Spine W/O Dye \$243,88			\$489,865
Griffin Hospital 72148- Mri Lumbar Spine W/O Dye \$408,82 Griffin Hospital 74177- Ct Abd & Pelv W/Contrast \$354,88 Griffin Hospital 73721-Mri Jul Of Lur Extre W/O Dye \$320,68 Griffin Hospital 73221-Mri Joint Upr Extrem W/O Dye \$296,18 Griffin Hospital 72197-Mri Pelvis W/O & W/Dye \$276,01 Griffin Hospital G00297-Ldct For Lug Ca Screening \$268,88 Griffin Hospital 76536-Ly Exam Of Head And Neck \$265,91 Griffin Hospital 77059-Mri Both Breasts \$247,44 Griffin Hospital 72141-Mri Neck/Spine W/O Dye \$243,88			6404 007
Griffin Hospital 74177-Ct Abd & Pelv W/Contrast \$354,88 Griffin Hospital 73721-Mri Jnt Of Lwr Extre W/O Dye \$320,68 Griffin Hospital 73221-Mri Joint Upr Extrem W/O Dye \$296,18 Griffin Hospital 72197-Mri Pelvis W/O & W/Dye \$275,01 Griffin Hospital G0297-Ldct For Lug Ca Screening \$268,88 Griffin Hospital 76536-Us Exam Of Head And Neck \$265,39 Griffin Hospital 77059-Mri Both Breasts \$247,44 Griffin Hospital 72141-Mri Neck/Spine W/O Dye \$243,88			
Griffin Hospital 73721-Mri Jnt Of Lwr Extre W/O Dye \$320,65 Griffin Hospital 73221-Mri Joint Upr Extrem W/O Dye \$296,18 Griffin Hospital 72197-Mri Pelvis W/O & W/Dye \$275,01 Griffin Hospital G0297-Ldct For Lug Ca Screening \$268,86 Griffin Hospital 76536-Us Exam Of Head And Neck \$265,91 Griffin Hospital 77059-Mri Both Breasts \$247,44 Griffin Hospital 72141-Mri Neck/Spine W/O Dye \$243,88			
Griffin Hospital 73221-Mri Joint Upr Extrem W/O Dye \$296,18 Griffin Hospital 72197-Mri Pelvis W/O & W/Dye \$275,01 Griffin Hospital G0297-Ldct For Lug Ca Screening \$268,88 Griffin Hospital 76536-Lys Exam Of Head And Neck \$265,91 Griffin Hospital 77059-Mri Both Breasts \$247,44 Griffin Hospital 72141-Mri Neck/Spine W/O Dye \$243,88			
Griffin Hospital 72197-Mri Pelvis W/O & W/Dye \$275,01 Griffin Hospital G0297-Ldct For Lug Ca Screening \$268,86 Griffin Hospital 76536-Us Exam Of Head And Neck \$265,91 Griffin Hospital 77059-Mri Both Breasts \$247,44 Griffin Hospital 72141-Mri Neck/Spine W/O Dye \$243,88			
Griffin Hospital G0297-Ldct For Lug Ca Screening \$268,86 Griffin Hospital 76536-Us Exam Of Head And Neck \$265,91 Griffin Hospital 77059-Mri Both Breasts \$247,44 Griffin Hospital 72141-Mri Neck/Spine W/O Dye \$243,88			
Griffin Hospital 76536-Us Exam Of Head And Neck \$265,91 Griffin Hospital 77059-Mri Both Breasts \$247,44 Griffin Hospital 72141-Mri Neck/Spine W/O Dye \$243,88			
Griffin Hospital 77059-Mri Both Breasts \$247,44 Griffin Hospital 72141-Mri Neck/Spine W/O Dye \$243,88			
Griffin Hospital 72141-Mri Neck/Spine W/O Dye \$243,88			
Griffin Hospital 70553-Mri Brain Stem W/O & W/Dye \$205,44		/2141-Mri Neck/Spine W/O Dye	\$243,881



Hartford Hospital	66984 - Xcapsl Ctrc Rmvl W/O Ecp	\$12,611,340
Hartford Hospital	93798 - Cardiac Rehab/Monitor	\$2,239,439
Hartford Hospital	95810 - Polysom 6/> Yrs 4/> Param	\$1,848,162
Hartford Hospital Hartford Hospital	45378 - Diagnostic Colonoscopy	\$1,468,495 \$1,430,693
Hartford Hospital	G0463 - Hospital Outpt Clinic Visit 49650 - Lap Ing Hernia Repair Init	\$1,429,682 \$1,353,125
Hartford Hospital	49000 - Lap ing nemia repair mit	\$1,137,967
Hartford Hospital	77412 - Radiation Treatment Delivery	\$1,031,056
Hartford Hospital	95811 - Polysom 6/>Yrs Cpap 4/> Parm	\$1,026,532
Hartford Hospital	66991 - Xcapsl Ctrc Rmvl Insj 1+	\$875,291
Hospital for Special Care Hospital for Special Care	99214 - Moderate Level Established Pt W/Med Management	\$165,450 \$22,465
John Dempsey Hospital	99213 - Low Level Established Pt W/Med Management G0463 - Hospital Outpt Clinic Visit	\$2,512,470
John Dempsey Hospital	11102 - Tangential Biopsy Skin Single Lesion	\$525,033
John Dempsey Hospital	17000 - Destruction Premalignant Lesion 1St	\$243,965
John Dempsey Hospital	17003 - Destruction Premalignant Lesion 2-14 Ea	\$211,580
John Dempsey Hospital	11103 - Tangential Biopsy Skin Ea Sep-Additional Lesion	\$172,621
John Dempsey Hospital	11104 - Punch Biopsy Skin Single Lesion	\$167,722
John Dempsey Hospital John Dempsey Hospital	17110 - Destruction Benign Lesions Up To 14 71046 - Radiologic Exam Chest 2 Views	\$139,695 \$129,318
John Dempsey Hospital	90834 - Psychotherapy W-Patient 45 Minutes	\$92,010
John Dempsey Hospital	64650 - Chemodenervation Eccrine Glands Both Axillae	\$79,168
Lawrence + Memorial Hospital	77067-Screening Mammography, Bilateral (2-View Study Of Each Breast), Including Computer-Aided Detection (Cad) When	\$2,624,462
	78815-Positron Emission Tomography (Pet) With Concurrently Acquired Computed Tomography (Ct) For Attenuation Correction	#0.007.00 <i>4</i>
Lawrence + Memorial Hospital	And Anatomical Localization Imaging; Skull Base To Mid-Thigh 93306-Echocardiography, Transthoracic, Real-Time With Image Documentation (2D), Includes M-Mode Recording, When	\$2,037,834
Lawrence + Memorial Hospital	Performed, Complete, With Spectral Doppler Echocardiography, And With Color Flow Doppler Echocardiography 66984-Extracapsular Cataract Removal With Insertion Of Intraocular Lens Prosthesis (1 Stage Procedure), Manual Or	\$1,645,770
Lawrence + Memorial Hospital	Mechanical Technique (Eg, Irrigation And Aspiration Or Phacoemulsification)	\$1,405,555
Lawrence + Memorial Hospital Lawrence + Memorial Hospital	11042-Debridement, Subcutaneous Tissue (Includes Epidermis And Dermis, If Performed); First 20 Sq Cm Or Less G0463-Hospital Outpatient Clinic Visit For Assessment And Management Of A Patient	\$866,817 \$835,553
Lawrence + Memorial Hospital	29581-Application Of Multi-Layer Compression System; Leg (Below Knee), Including Ankle And Foot	\$835,553 \$216,527
Lawrence + Memorial Hospital	77063-Screening Digital Breast Tomosynthesis, Bilateral (List Separately In Addition To Code For Primary Procedure)	\$674,582
	70553-Magnetic Resonance (Eg. Proton) Imaging, Brain (Including Brain Stem); Without Contrast Material, Followed By Contrast	
Lawrence + Memorial Hospital	Material(S) And Further Sequences	\$662,027
Lawrence + Memorial Hospital	74177-Computed Tomography, Abdomen And Pelvis; With Contrast Material(S)	\$652,103
Manchester Memorial Hospital	90834 - Psytx W Pt 45 Minutes	\$1,030,392 \$1,035,440
Manchester Memorial Hospital Manchester Memorial Hospital	90853 - Group Psychotherapy 90832 - Psytx W Pt 30 Minutes	\$1,025,440 \$275,426
Manchester Memorial Hospital	99213 - New/Est Op Visit-Level lii	\$248,399
Manchester Memorial Hospital	90792 - Psych Dx Eval (W/Medical Svcs)	\$74,491
Manchester Memorial Hospital	99214 - New/Est Op Visit - Level Iv	\$21,348
Manchester Memorial Hospital	99212 - New/Est Op Visit Level Ii	\$14,827
Manchester Memorial Hospital	90847 - Family Psytx W/Pt 50 Min	\$14,329
Manchester Memorial Hospital Manchester Memorial Hospital	90791 - Psych Dx Eval-No Medical Svcs 99215 - New/Est Op Visit - Level V	\$3,079 \$2,081
Middlesex Hospital	77067 - Scr Mammo Bi Incl Cad	\$4,116,864
Middlesex Hospital	77385 - Star Weathing British Ceal 77385 - Star Weathing British Ceal	\$2,355,480
Middlesex Hospital	76641 - Ultrasound Breast Complete	\$2,328,399
Middlesex Hospital	78815 - Pet Image W/Ct Skull-Thigh	\$1,854,752
Middlesex Hospital	77334 - Radiation Treatment Aid(S)	\$1,401,935
Middlesex Hospital	77386 - Ntsty Modul Rad Tx Divr Cplx	\$1,333,927
Middlesex Hospital Middlesex Hospital	77338 - Design Mlc Device For Imrt 77412 - Radiation Treatment Delivery	\$1,090,855 \$1,029,644
Middlesex Hospital	77-712 - Rabinati Treament Belivery 74177 - Ct Abd & Pelv W/Contrast	\$1,010,791
Middlesex Hospital	70553 - Mri Brain Stem W/O & W/Dye	\$991,292
Midstate Medical Center	11042-Deb Subq Tissue 20 Sq Cm/<	\$1,914,664
Midstate Medical Center	G0277-Hbot, Full Body Chamber, 30M	\$1,082,488
Midstate Medical Center	95810-Polysom 6/> Yrs 4/> Param	\$969,359
Midstate Medical Center	95811- Polysom 6/>Yrs Cpap 4/> Parm	\$663,034
Midstate Medical Center Midstate Medical Center	11045-Deb Subq Tissue Add-On 11043-Deb Musc/Fascia 20 Sq Cm/<	\$579,488 \$532,308
Midstate Medical Center	15271-Skin Sub Graft Trnk/Arm/Leg	\$194,452
Midstate Medical Center	97597-Rmil Devital Tis 20 Cm/<	\$187,544
Midstate Medical Center	11046-Deb Musc/Fascia Add-On	\$186,420
Midstate Medical Center	G0463-Hospital Outpt Clinic Visit	\$176,398
Norwalk Hospital	77067/Mammography Screening Bilateral With Or Without Cad	\$1,728,803 \$1,303,931
Norwalk Hospital Norwalk Hospital	76641/Ultrasound, Breast Complete 95810/Polysomnography, 6+ Years, 4+ Parameters, Attended	\$1,050,126
Norwalk Hospital	19081/Stereotactic Breast Biopsy With Device, First Lesion	\$442,963
Norwalk Hospital	77063/Screening Digital Breast Tomosynthesis, Bilateral	\$438,523
Norwalk Hospital	19083/Percutaneous Breast Biopsy With Ultrasound Guidance, First Lesion	\$382,858
Norwalk Hospital	78815/Pet/Ct Tumor Imaging, Skull To Thigh	\$382,294
Norwalk Hospital Norwalk Hospital	74177/Ct Scan Abdomen And Pelvis With Contrast 77080/Hip, Spine, Or Central Dexa Bone Density	\$364,115 \$339,663
Norwalk Hospital	76642/Ultrasound Breast Limited	\$325,613
Waterbury Hospital	93306 Echocardiogram-Transthoracic W/Wo M-Modes Recording	\$2,337,451
Waterbury Hospital	78452 Nuclear Medicine Stress Test	\$1,624,388
Waterbury Hospital	93017 Exercise Stress Test	\$648,567
Waterbury Hospital	A9500 Radioisotopes-Sestamibi	\$508,380 \$466,466
Waterbury Hospital Waterbury Hospital	78431-Myocard Img Pet Rst&Strs Ct J2785 Regadenoson 1.4Mg, Injection	\$466,166 \$277,030
Waterbury Hospital	A9555-Rubidium Rb-82, Disgnostic, Per Study Dose	\$205,475
Waterbury Hospital	74177-Computed Tomography Of The Abdomen And Pelvis' With Contrast	\$151,677
Waterbury Hospital	71250 Ct Thorax W/O Contrast	\$135,319
Waterbury Hospital	C9829 - Transthoracic echocardiography with contrast	\$129,440
Rockville General Hospital	77067 - Screening Mammo	\$1,594,450
Rockville General Hospital	19081 - Breast Bx 1St Lesion Stereo	\$420,034 \$335,377
Boologillo Conoral Hoomital		\$335,277
Rockville General Hospital	76641 - Ultra Sound Breast	\$301 OEE
Rockville General Hospital	77080 - Bone Density Dexa Axial Skeltn	
	76641 - Ultra Sound Breast 77080 - Bone Density Dexa Axial Skeltn 77063 - Breast Tomosynth Bi, Screen 19083 - Breast Bx 1St Lesion Us Guide	\$281,321
Rockville General Hospital Rockville General Hospital Rockville General Hospital Rockville General Hospital	77080 - Bone Density Dexa Axial Skeltn 77063 - Breast Tomosynth Bi, Screen 19083 - Breast Bx 1St Lesion Us Guide 99203 - Urg Care New O/P Low Complex	\$301,955 \$281,321 \$273,793 \$234,786
Rockville General Hospital Rockville General Hospital Rockville General Hospital Rockville General Hospital Rockville General Hospital	77080 - Bone Density Dexa Axial Skeltn 77083 - Breast Tomosynth Bi, Screen 19083 - Breast Bx 1St Lesion Us Guide 19203 - Urg Care New O/P Low Complex 19213 - Urgent Care Estab O/P Level 3	\$281,321 \$273,793 \$234,786 \$234,026
Rockville General Hospital Rockville General Hospital Rockville General Hospital Rockville General Hospital	77080 - Bone Density Dexa Axial Skeltn 77063 - Breast Tomosynth Bi, Screen 19083 - Breast Bx 1St Lesion Us Guide 99203 - Urg Care New O/P Low Complex	\$281,321 \$273,793 \$234,786



St. Francis Hospital & Medical Center	G0463 Hospital Outpatient Clinic Visit For Assessment And Management Of A Pt	\$43,414
St. Francis Hospital & Medical Center	70553 Mri Brain Stem W/O W/Contrast Material	\$42,959
St. Francis Hospital & Medical Center	72148 Mri Spinal Canal Lumbar W/O Contrast Material	\$29,04
St. Francis Hospital & Medical Center	73721 Mri Any Jt Lower Extrem W/O Contrast Matrl	\$22,300
St. Francis Hospital & Medical Center	70551 Mri Brain Brain Stem W/O Contrast Material	\$16,70
St. Francis Hospital & Medical Center	72141 Mri Spinal Canal Cervical W/O Contrast Matri	\$12,250
St. Francis Hospital & Medical Center St. Francis Hospital & Medical Center	72158 Mri Spinal Canal Lumbar W/O & W/Contr Matrl 73221 Mri Any Jt Upper Extremity W/O Contrast Matrl	\$11,016 \$9,843
St. Francis Hospital & Medical Center	73221 mil Any ot Opper Externity W/O Condast Matri 99213 Office/Outpatient Established Low Mdm 20-29 Min	\$1,91
St. Francis Hospital & Medical Center	82962 Gluc Bid Gluc Mntr Dev Cleared Fda Spec Home Use	\$1
Saint Mary's Hospital	93306 Echo Titrc R-T 2D W/Wom-Mode Compl Spec&Colr D	\$1,385,79
Saint Mary's Hospital	78452 Myocardial Spect Multiple Studies	\$969,54
Saint Mary's Hospital	G0463 Hospital Outpatient Clinic Visit For Assessment And Management Of A Pt	\$367,01
Saint Mary's Hospital	96365 Intravenous Infusion, For Therapy, Prophylaxis, Or Diagnosis	\$337,25
Saint Mary's Hospital	96375 Therapeutic, Prophylactic, Or Diagnostic Injection Or Infusion	\$123,39
Saint Mary's Hospital	96372 Therapeutic Prophylactic/Dx Injection Subq/Im	\$88,65
Saint Mary's Hospital	71046 Chest X-Ray With At Least Two Views, Including Frontal And Lateral, Of The Chest And Nearby Structure	\$63,22
Saint Mary's Hospital Saint Mary's Hospital	96367 Intravenous (IV) Infusion Used For Therapy, Prophylaxis, Or Diagnosis 80053 Comprehensive Metabolic Panel	\$55,55 \$55,45
Saint Mary's Hospital	36415 Collecting Venous Blood Through Venipuncture, Or A "Blood Draw"	\$12,47 \$12,47
Saint Vincent's Medical Center	93306 - Tie W/Doppler Complete	\$6,213,75
Saint Vincent's Medical Center	93000 - Tie Wizbypter Complete 93017 - Cardiovascular Stress Test	\$2,081,11
Saint Vincent's Medical Center	78452 - Ht Muscle Image Spect Mult	\$1,866,15
Saint Vincent's Medical Center	11042 - Deb Subg Tissue 20 Sq Cm/<	\$1,439,19
Saint Vincent's Medical Center	90853 - Group Psychotherapy	\$1,016,22
Saint Vincent's Medical Center	G0463 - Hospital Outpt Clinic Visit	\$633,21
Saint Vincent's Medical Center	15275 - Skin Sub Graft Face/Nk/Hf/G	\$612,18
Saint Vincent's Medical Center	93350 - Stress Tte Only	\$572,59
Saint Vincent's Medical Center	11045 - Deb Subq Tissue Add-On	\$547,13
Saint Vincent's Medical Center	95810 - Polysom 6/> Yrs 4/> Param	\$427,03
Stamford Hospital	77067 - Scr Mammo Bi Incl Cad	\$5,598,97 \$4,722,47
Stamford Hospital Stamford Hospital	93306 - Tte W/Doppler Complete 74177 - Ct Abd & Pelv W/Contrast	\$4,733,47 \$4,174,87
Stamford Hospital	77385 - Ntsty Modul Rad Tx Dlvr Smpl	\$3,621,27
Stamford Hospital	17303 - Nasy Modul Nati X ENV Only 1 45380 - Colonoscopy And Biopsy	\$2,877,49
Stamford Hospital	78815 - Pet Image W/Ct Skull-Thigh	\$2,864,24
Stamford Hospital	77386 - Nisty Modul Rad Tx Divr Cpix	\$2,576,67
Stamford Hospital	45385 - Colonoscopy W/Lesion Removal	\$1,946,27
Stamford Hospital	77049 - Mri Breast C-+ W/Cad Bi	\$1,692,04
Stamford Hospital	70553 - Mri Brain Stem W/O & W/Dye	\$1,679,24
The Hospital of Central Connecticut	78815 - Pet Image W/Ct Skull-Thigh	\$2,428,69
The Hospital of Central Connecticut	77386 - Ntsty Modul Rad Tx Dlvr Cpix	\$1,808,79
The Hospital of Central Connecticut	G0463 - Hospital Outpt Clinic Visit	\$1,765,93
The Hospital of Central Connecticut The Hospital of Central Connecticut	77385 - Ntsty Modul Rad Tx Dlvr Smpl 77412 - Radiation Treatment Delivery	\$1,662,93 \$1,459,82
The Hospital of Central Connecticut	77334 - Radiation Treatment Aid(S)	\$1,112,70
The Hospital of Central Connecticut The Hospital of Central Connecticut	19083 - Bx Breast 1St Lesion Us Imag	\$1,021,75
The Hospital of Central Connecticut	76641 - Ultrasound Breast Complete	\$975,26
The Hospital of Central Connecticut	11042 - Deb Subg Tissue 20 Sg Cm/<	\$955,85
The Hospital of Central Connecticut	19081 - Bx Breast 1St Lesion Strtctc	\$899,60
The William W. Backus Hospital	G0463-Hospital Outpt Clinic Visit	\$2,036,95
The William W. Backus Hospital	11042-Deb Subq Tissue 20 Sq Cm/<	\$1,200,49
The William W. Backus Hospital	G0277-Hbot, Full Body Chamber, 30M	\$938,13
The William W. Backus Hospital	15275 - Skin Sub Graft Face/Nk/Hf/G	\$865,84
The William W. Backus Hospital	74177 - Ct Abd & Pelv W/Contrast	\$706,83
The William W. Backus Hospital	76641-Ultrasound Breast Complete	\$536,73
The William W. Backus Hospital The William W. Backus Hospital	71250- Ct Thorax Dx C-	\$482,03 \$413,54
The William W. Backus Hospital	77080-Dxa Bone Density Axial 72148-Mri Lumbar Spine W/O Dve	\$413,54 \$341,18
The William W. Backus Hospital	71046-X-Ray Exam Chest 2 Views	\$329,46
Windham Memorial Hospital	77090-Dxa Bone Density Axial	\$185,81
Windham Memorial Hospital	17000-DAB Done Density/Paripheral	\$65,94
Windham Memorial Hospital	76641-Ultrasound Breast Complete	\$65,88
Windham Memorial Hospital	76705-Echo Exam Of Abdomen	\$28,74
Windham Memorial Hospital	76536-Us Exam Of Head And Neck	\$24,37
Windham Memorial Hospital	76700-Us Exam Abdom Complete	\$18,23
Windham Memorial Hospital	76830-Transvaginal Us Non-Ob	\$17,31
Windham Memorial Hospital Windham Memorial Hospital	76770-Us Exam Abdo Back Wall Comp	\$16,69
Windham Memorial Hospital Windham Memorial Hospital	76856-Us Exam Pelvic Complete 77063-Breast Tomosynthesis Bi	\$16,27 \$13,98
Yale New Haven Hospital	G0463-Hospital Outpatient Clinic Visit For Assessment And Management Of A Patient	\$15,314,80
Yale New Haven Hospital	77067-Screening Mammography, Bilateral (2-View Study Of Each Breast), Including Computer-Aided Detection (Cad) When	\$6,330,54
	93306-Echocardiography, Transthoracic, Real-Time With Image Documentation (2D), Includes M-Mode Recording, When	ψ0,000,04
Yale New Haven Hospital	Performed, Complete, With Spectral Doppler Echocardiography, And With Color Flow Doppler Echocardiography	\$4,815,05
•	95004-Percutaneous Tests (Scratch, Puncture, Prick) With Allergenic Extracts, Immediate Type Reaction, Including Test	, ,, .,
Yale New Haven Hospital	Interpretation And Report, Specify Number Of Tests	\$4,195,60
Yale New Haven Hospital	45380-Colonoscopy, Flexible; With Biopsy, Single Or Multiple	\$2,913,00
	66984-Extracapsular Cataract Removal With Insertion Of Intraocular Lens Prosthesis (1 Stage Procedure), Manual Or	
	Mechanical Technique (Eq. Irrigation And Aspiration Or Phacoemulsification)	\$2,589,82
Yale New Haven Hospital		
	76641-Ultrasound, Breast, Unilateral, Real Time With Image Documentation, Including Axilla When Performed; Complete	\$2,072,12
Yale New Haven Hospital Yale New Haven Hospital	76641-Ultrasound, Breast, Unilateral, Real Time With Image Documentation, Including Axilla When Performed; Complete C8929-Transthoracic Echocardiography With Contrast, Or Without Contrast Followed By With Contrast, Real-Time With Image	\$2,072,12
Yale New Haven Hospital	76641-Ultrasound, Breast, Unilateral, Real Time With Image Documentation, Including Axilla When Performed; Complete C8929-Transthoracic Echocardiography With Contrast, Or Without Contrast Followed By With Contrast, Real-Time With Image Documentation (2D), Includes M-Mode Recording, When Performed, Complete, With Spectral Doppler Echocardiography, And	
	76641-Ultrasound, Breast, Unilateral, Real Time With Image Documentation, Including Axilla When Performed; Complete C8929-Transthoracic Echocardiography With Contrast, Or Without Contrast Followed By With Contrast, Real-Time With Image Documentation (2D), Includes M-Mode Recording, When Performed, Complete, With Spectral Doppler Echocardiography, And With Color Flow Doppler	\$2,072,12 \$1,913,56
Yale New Haven Hospital	76641-Ultrasound, Breast, Unilateral, Real Time With Image Documentation, Including Axilla When Performed; Complete C8929-Transthoracic Echocardiography With Contrast, Or Without Contrast Followed By With Contrast, Real-Time With Image Documentation (2D), Includes M-Mode Recording, When Performed, Complete, With Spectral Doppler Echocardiography, And With Color Flow Doppler 95810-Polysomnography; Age 6 Years Or Older, Sleep Staging With 4 Or More Additional Parameters Of Sleep, Attended By A	\$1,913,56
Yale New Haven Hospital	76641-Ultrasound, Breast, Unilateral, Real Time With Image Documentation, Including Axilla When Performed; Complete C8929-Transthoracic Echocardiography With Contrast, Or Without Contrast Followed By With Contrast, Real-Time With Image Documentation (2D), Includes M-Mode Recording, When Performed, Complete, With Spectral Doppler Echocardiography, And With Color Flow Doppler	

Source: CT Office of Health Strategy Hospital-based Off Campus Outpatient Centers Facility Fee filings for CY 2023.

The table includes hospitals that charge a facility fee as defined under C.G.S Sec 19a-508c. Hospitals that do not charge a facility fee or those that charge a facility fee but do not fall under the definition of "facility fee" under C.G.S. 19a-508c are as follows: Gaylord Hospital, Hebrew Home and Hospital, Masonicare Health Center, Natchaug Hospital, and Silver Hill Hospital.

Mount Sinai Rehabilitation Hospital has no off campus facility fee revenue in 2023. Johnson Memorial Hospital has no off campus facility fees as part of a restructuring of business early last year 2023.