

Rates for Ambulatory Procedures Listing (APL) Effective 01/01/13

The rates shown below do not reflect the 3.5% rate reduction effective July 1, 2012.
Reimbursement for ASTCs made at 75% of the applicable group rate minus the 3.5% reduction.

GROUP 1. SURGICAL	RATE
a. Surgical – Intensive	\$1,794.00
b. Surgical – Moderate	\$1,049.00
c. Surgical – Low	\$752.00
d. Surgical - Very Low	\$287.00
GROUP 2. DIAGNOSTIC AND THERAPEUTIC	
a. Complex Diagnostic and Therapeutic	\$941.00
b. High-tech Diagnostic	\$304.00
c. Other Diagnostic	\$176.00
d. Therapeutic Procedures	\$136.00
GROUP 3. EMERGENCY ROOM PROCEDURES	
a. Emergency Level I	\$181.00
b. Emergency Level II	\$67.00
c. Non-emergency/Screening	\$26.00
GROUP 4. OBSERVATION SERVICES	
a. 1 hour through 6 hours, 30 minutes	\$74.00
b. 6 hours, 31 minutes through 12 hours 30 minutes	\$222.00
c. 12 hours, 31 minutes or more	\$443.00
GROUP 5. PSYCHIATRIC SERVICES	
a. Type A	\$68.00
Children's hospitals as defined in 89 Illinois Administrative Code 149.50(c)(3)(A)	\$102.00
b. Type B	\$101.00
Children's hospitals as defined in 89 Illinois Administrative Code 149.50(c)(3)(A)	\$102.00