

Calendar Year 2019 Top Ten Procedures for which Facility Fees are Charged and Related Revenues (ordered by hospital)

Hospital Name	Procedure/Service	Total Revenue Received for that Procedure/Service
<i>Bridgeport Hospital</i>	93306-Tte w/doppler complete	\$3,719,606
<i>Bridgeport Hospital</i>	93351-Stress tte complete	\$822,259
<i>Bridgeport Hospital</i>	99282-Emergency dept visit	\$770,856
<i>Bridgeport Hospital</i>	36561-Insert tunneled cv cath	\$571,536
<i>Bridgeport Hospital</i>	45380-Colonoscopy and biopsy	\$539,314
<i>Bridgeport Hospital</i>	19081-Bx breast 1st lesion strtctc	\$480,325
<i>Bridgeport Hospital</i>	45385-Colonoscopy w/lesion removal	\$458,733
<i>Bridgeport Hospital</i>	19083-Bx breast 1st lesion us imag	\$402,748
<i>Bridgeport Hospital</i>	19301-Partial mastectomy	\$334,680
<i>Bridgeport Hospital</i>	45378-Diagnostic colonoscopy	\$309,377
<i>Bristol Hospital</i>	90899 - UNLISTED PSYCHIATRIC SERVICE O	\$403,482
<i>Bristol Hospital</i>	90853 - GROUP PSYCHOTHERAPY (OTHER THA	\$399,819
<i>Bristol Hospital</i>	99213 - OFFICE/OUTPATIENT VISIT EST	\$143,310
<i>Bristol Hospital</i>	90791 - PSYCH DIAGNOSTIC EVALUATION	\$101,939
<i>Bristol Hospital</i>	90832 - PSYTX PT&/FAMILY 30 MINUTES	\$90,222
<i>Bristol Hospital</i>	90834 - PSYTX PT&/FAMILY 45 MINUTES	\$52,272
<i>Bristol Hospital</i>	99212 - OFFICE/OUTPATIENT VISIT EST	\$44,634
<i>Bristol Hospital</i>	90792 - PSYCH DIAG EVAL W/MED SRVCS	\$41,110
<i>Bristol Hospital</i>	99214 - OFFICE/OUTPATIENT VISIT EST	\$14,656
<i>Bristol Hospital</i>	90847 - FAMILY PSYCHOTHERAPY (CONJOINT	\$4,122
<i>Charlotte Hungerford Hospital</i>	G0463 - Clinic Visit	\$3,924,734
<i>Charlotte Hungerford Hospital</i>	78815 - Pet Imaging CT	\$202,413
<i>Charlotte Hungerford Hospital</i>	93306 - EKG	\$179,820
<i>Charlotte Hungerford Hospital</i>	77385 - Radiation Therapy	\$171,137
<i>Charlotte Hungerford Hospital</i>	31575 - Endoscopy of larynx	\$128,683
<i>Charlotte Hungerford Hospital</i>	77334 - Radiation Therapy	\$125,877
<i>Charlotte Hungerford Hospital</i>	77412 - Radiation Therapy	\$116,659
<i>Charlotte Hungerford Hospital</i>	77386 - Radiation Therapy	\$102,975
<i>Charlotte Hungerford Hospital</i>	78452 - Diagnostic Nuclear Medicine	\$85,424
<i>Charlotte Hungerford Hospital</i>	97597 - Wound Care treatment	\$84,770
<i>Connecticut Children's Medical Center</i>	69436 - TYMPANOSTOMY GENERAL ANESTHESIA	\$1,331,810
<i>Connecticut Children's Medical Center</i>	95810 - POLYSOM 6/>YRS SLEEP 4/> ADDL PARAM ATTND	\$1,243,083
<i>Connecticut Children's Medical Center</i>	96413 - CHEMOTX ADMN IV NFS TQ UP 1 HR 1/1ST SBST/DRUG	\$1,190,641
<i>Connecticut Children's Medical Center</i>	27427 - LIGAMENOUS RECONSTRUCTION KNEE EXTRA-ARTICULAR	\$921,734
<i>Connecticut Children's Medical Center</i>	29888 - ARTHRS AIDED ANT CRUCIATE LIGM RPR/AGMNTJ/RCNSTJ	\$841,025
<i>Connecticut Children's Medical Center</i>	42830 - ADENOIDECTOMY PRIMARY <AGE 12	\$779,529
<i>Connecticut Children's Medical Center</i>	95782 - POLYSOM <6 YRS SLEEP STAGE 4/> ADDL PARAM ATTND	\$755,486
<i>Connecticut Children's Medical Center</i>	43239 - EGD TRANSORAL BIOPSY SINGLE/MULTIPLE	\$589,160
<i>Connecticut Children's Medical Center</i>	41899 - UNLISTED PROCEDURE DENTOALVEOLAR STRUCTURES	\$454,399
<i>Connecticut Children's Medical Center</i>	42820 - TONSILLECTOMY ADENOIDECTOMY <AGE 12	\$321,042
<i>Danbury Hospital</i>	77067/Mammography Screening Bilateral with or without CAD	\$1,337,423
<i>Danbury Hospital</i>	95810/Polysomnography, 6+ years, 4+ Parameters, Attended	\$1,054,119
<i>Danbury Hospital</i>	76641/Ultrasound, Breast Complete	\$670,189
<i>Danbury Hospital</i>	19083/Percutaneous breast Biopsy with ultrasound guidance, first Lesion	\$610,704
<i>Danbury Hospital</i>	93306/Transthoracic Echocardiogram, Complete	\$563,199
<i>Danbury Hospital</i>	93880/Duplex Scan of the Extracranial Arteries, Complete Bilateral	\$540,379
<i>Danbury Hospital</i>	94060/Spirometry, Pre and Post Bronchodilator	\$512,624
<i>Danbury Hospital</i>	93970/Duplex Scan of Extremity veins, Complete Bilateral Study	\$439,283
<i>Danbury Hospital</i>	95811/Polysomnography; sleep staging with 4 + parameters of sleep, with initiation of continuous positive airway pressure therapy or bilevel ventilation, attended	\$438,036
<i>Danbury Hospital</i>	93971/Duplex Scan of the Extremity Veins, Unilateral Limited Study	\$432,940
<i>Greenwich Hospital</i>	66984-Xcapsl ctrc rmlv w/o ecp	\$1,449,743
<i>Greenwich Hospital</i>	45380-Colonoscopy and biopsy	\$782,554
<i>Greenwich Hospital</i>	93306-Tte w/doppler complete	\$524,235
<i>Greenwich Hospital</i>	43239-Egd biopsy single/multiple	\$447,583
<i>Greenwich Hospital</i>	45378-Diagnostic colonoscopy	\$405,460
<i>Greenwich Hospital</i>	90834-Psytx w pt 45 minutes	\$271,123
<i>Greenwich Hospital</i>	99213-Office/outpatient visit est	\$234,235
<i>Greenwich Hospital</i>	19318-Reduction of large breast	\$215,139
<i>Greenwich Hospital</i>	55700-Biopsy of prostate	\$174,837
<i>Greenwich Hospital</i>	20553-Inject trigger points 3/>	\$166,164
<i>Hartford Hospital</i>	66984-Cataract surg w/iol 1 stage	\$16,390,284
<i>Hartford Hospital</i>	93798-Cardiac rehab/monitor	\$2,046,498
<i>Hartford Hospital</i>	66982-Cataract surgery complex	\$1,471,131

Hartford Hospital	45378-Diagnostic colonoscopy	\$1,446,708
Hartford Hospital	77412-Radiation treatment delivery	\$1,101,113
Hartford Hospital	95810-Polysom 6/> yrs 4/> param	\$1,087,383
Hartford Hospital	77385-Ntsty modul rad tx dlvr smpl	\$1,011,235
Hartford Hospital	96413-Chemo iv infusion 1 hr	\$996,901
Hartford Hospital	95811-Polysom 6/>yrs cpap 4/> parm	\$794,310
Hartford Hospital	77334-Radiation treatment aid(s)	\$621,596
Hospital for Special Care	99213 - FC EXP EST PT W/MED MGMT	\$64,637
Hospital for Special Care	90846 - FC FAM PSYTX W/O PT,50M	\$30,720
Hospital for Special Care	90834 - FC PSYCHOTHERAPY 45M	\$18,150
Hospital for Special Care	90832 - FC PSYCHOTHERAPY 30M	\$15,199
Hospital for Special Care	96130 - FC PSYCH TEST EVAL 1ST HR	\$13,808
Hospital for Special Care	90847 - FC PSYTX FAM W/PT 50M	\$9,967
Hospital for Special Care	90847 - FC NP PSYTX FAM W/PT 50M	\$9,797
Hospital for Special Care	96116 - FC NEUROBEHAVIOR STATUS	\$7,852
Hospital for Special Care	99214 - FC DET EST PT W/MED MGMT	\$7,012
Hospital for Special Care	90791 - FC DIAGNOSTIC EVAL	\$6,392
John Dempsey Hospital	G0463 - Hospital outpt clinic visit	\$2,424,261
John Dempsey Hospital	99213 - Office/outpatient visit est	\$1,107,271
John Dempsey Hospital	11102 - Tangential biopsy of skin; single lesion	\$441,546
John Dempsey Hospital	17000 - Destruct premalg lesion	\$393,916
John Dempsey Hospital	90834 - Psytx w pt 45 minutes	\$310,639
John Dempsey Hospital	17110 - Destruct b9 lesion 1-14	\$287,761
John Dempsey Hospital	17003 - Destruct premalg les 2-14	\$243,561
John Dempsey Hospital	95810 - Polysom 6/> yrs 4/> param	\$240,280
John Dempsey Hospital	99202 - Office/outpatient visit new	\$213,435
John Dempsey Hospital	99203 - Office/outpatient visit new	\$210,497
Johnson Memorial Medical Center	66984 - Cataract Removal Insertion of Lens	\$620,257
Johnson Memorial Medical Center	77067 - Screening Mammography, Bilateral, Including CAD	\$413,725
Johnson Memorial Medical Center	95811 - Polysomnography; CPAP with 4 or More Parameters	\$392,785
Johnson Memorial Medical Center	95810 - Polysomnography; 4 or More Parameters	\$316,586
Johnson Memorial Medical Center	64721 - Neuroplasty; Median Nerve at Carpal Tunnel	\$278,705
Johnson Memorial Medical Center	97597 - Debridement Open Wound First 20 SQ CM	\$228,203
Johnson Memorial Medical Center	45380 - Colonoscopy with Biopsy Single/Multiple	\$218,520
Johnson Memorial Medical Center	11042 - Debridement Subcutaneous Tissue First 20 SQ CM	\$217,549
Johnson Memorial Medical Center	62323 - Injection Interlaminar Lumbar/Sacral with Imaging Guidance	\$213,602
Johnson Memorial Medical Center	G0463 - Hospital Outpatient Clinic Visit	\$180,032
Lawrence and Memorial Hospital	66984-Xcapsl ctrc rmlv w/o ecp	\$1,519,900
Lawrence and Memorial Hospital	99211-Office/outpatient visit est	\$1,107,832
Lawrence and Memorial Hospital	95810-Polysom 6/> yrs 4/> param	\$863,291
Lawrence and Memorial Hospital	11042-Deb subq tissue 20 sq cm/<	\$640,792
Lawrence and Memorial Hospital	62323-Njx interlaminar lmr/sac	\$632,066
Lawrence and Memorial Hospital	93306-Tte w/doppler complete	\$519,515
Lawrence and Memorial Hospital	64493-Inj paravert f jnt l/s 1 lev	\$390,518
Lawrence and Memorial Hospital	95811-Polysom 6/>yrs cpap 4/> parm	\$330,389
Lawrence and Memorial Hospital	62321-Njx interlaminar crv/thrc	\$232,154
Lawrence and Memorial Hospital	97597-Rmvl devital tis 20 cm/<	\$171,287
Manchester Memorial Hospital	90853 GROUP PSYCHOTHERAPY	\$1,426,908
Manchester Memorial Hospital	90834 PSYCHOTHERAPY 45 MINS	\$750,262
Manchester Memorial Hospital	99213 NEW/EST OP VISIT-LEVEL III	\$415,732
Manchester Memorial Hospital	90792 PSYCH DX EVAL (W/MEDICAL SVCS)	\$188,305
Manchester Memorial Hospital	90832 PSYCHOTHERAPY 30 MINS	\$123,692
Manchester Memorial Hospital	77067 SCREENING MAMMO	\$60,725
Manchester Memorial Hospital	99214 NEW/EST OP VISIT - LEVEL IV	\$26,758
Manchester Memorial Hospital	G0177 TRAINING & EDUCATION >45 MIN	\$21,028
Manchester Memorial Hospital	77080 BONE DENSITY DEXA AXIAL SKELTN	\$17,574
Manchester Memorial Hospital	90791 PSYCH DX EVAL-NO MEDICAL SVCS	\$14,266
Middlesex Hospital	G0463 - Office Visit	\$467,356
Middlesex Hospital	90834 - PSYTX PT 45 MINUTES	\$231,786
Middlesex Hospital	95886 - EMG W/NERVE CONDUCTION - COMPLETE	\$223,592
Middlesex Hospital	19301 - Partial mastectomy	\$220,340
Middlesex Hospital	47562 - LAPAROSCOPIC CHOLECYSTECTOMY	\$192,610
Middlesex Hospital	49505 - PRP I/HERN INIT REDUC GR5 YR	\$162,406
Middlesex Hospital	95911 - NERVE CONDUCTION STUDIES; 9-10 STUDIES	\$147,212
Middlesex Hospital	95819 - EEG	\$116,301
Middlesex Hospital	95909 - NERVE CONDUCTION STUDIES; 5-6 STUDIES	\$114,785
Middlesex Hospital	95910 - NERVE CONDUCTION STUDIES; 7-8 STUDIES	\$113,895
Midstate Medical Center	G0463 - Hospital Outpatient Visit	\$2,549,769
Midstate Medical Center	11042 - Deb subsq tissue 20 sq cm/<	\$1,062,798

Midstate Medical Center	95810 - Polysom 6/> yrs 4/> param	\$842,602
Midstate Medical Center	95811 - Polysom 6/>yrs cpap 4/> parm	\$806,310
Midstate Medical Center	G0277 - Hbot, full body chamber, 30m	\$703,729
Midstate Medical Center	11043 - Deb musc/fascia 20 sq cm/<	\$490,881
Midstate Medical Center	11045 - Deb subq tissue add-on	\$379,418
Midstate Medical Center	97957 - Rmvl devital tis 20 cm/<	\$237,148
Midstate Medical Center	11046 - Deb musc/fascia add-on	\$121,122
Midstate Medical Center	15271 - Skin sub graft trnk/arm/leg	\$115,375
Norwalk Hospital	77067/Mammography Screening Bilateral with or without CAD	\$3,653,084
Norwalk Hospital	76641/Ultrasound, Breast Complete	\$1,882,688
Norwalk Hospital	95810/Polysomnography, 6+ years, 4+ Parameters, Attended	\$974,850
Norwalk Hospital	77049/Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis) when performed; bilateral	\$863,797
Norwalk Hospital	78815/PET/CT Tumor Imaging, Skull to Thigh	\$706,841
Norwalk Hospital	77065/Diagnostic Mammography, including CAD when performed, Unilateral	\$608,459
Norwalk Hospital	19081/Stereotactic breast Biopsy with device, first Lesion	\$596,520
Norwalk Hospital	74177/CT Scan Abdomen and Pelvis with Contrast	\$591,015
Norwalk Hospital	77080/Hip, Spine, or Central DEXA Bone Density	\$545,300
Norwalk Hospital	70553/MRI Brain, without followed by with Contrast	\$450,925
Waterbury Hospital	78452 Nuclear Stress Test	\$2,489,782
Waterbury Hospital	93306 Echocardiogram-transthoracic w/wo M-Modes recording	\$2,002,916
Waterbury Hospital	93017 Exercise Stress Testing	\$460,995
Waterbury Hospital	J2785 Regadenoson 0.4mg, injection	\$348,961
Waterbury Hospital	A9500 Radioisotopes-Sestamibi	\$152,909
Waterbury Hospital	71250 CT Thorax w/o contrast	\$120,493
Waterbury Hospital	71260 CT Chest/Thorax w/contrast	\$109,810
Waterbury Hospital	74177 CT Abdomen, Pelvis w.contrast	\$106,288
Waterbury Hospital	93308 Echocardiogram-Transthoracic Limited or Follow Up	\$105,748
Waterbury Hospital	Q9967 Omnipaque 300/350 1ml, Iohexol	\$79,660
Rockville General Hospital	77067 SCREENING MAMMO	\$1,542,890
Rockville General Hospital	76641 ULTRA SOUND BREAST	\$700,995
Rockville General Hospital	99214 NEW/EST OP VISIT - LEVEL IV	\$542,487
Rockville General Hospital	77080 BONE DENSITY DEXA AXIAL SKELTN	\$432,146
Rockville General Hospital	74177 CT ABD/PELVIS W/CONT	\$213,596
Rockville General Hospital	76642 ULTRA SOUND BREAST, LIMITED	\$211,273
Rockville General Hospital	77065 DIAG MAMMO, UNILATERAL	\$184,941
Rockville General Hospital	19081 BREAST BX 1ST LESION STEREO	\$164,663
Rockville General Hospital	19083 BREAST BX 1ST LESION US GUIDE	\$124,270
Rockville General Hospital	74183 MRI ABDOMEN WO&W/CONT	\$102,334
Saint Francis Hospital	G0277 - Hyperbaric Oxygen Therapy; Full Body Chamber, 30 Minutes	\$455,637
Saint Francis Hospital	11042 - Debridement Subcutaneous Tissue First 20 SQ CM	\$393,841
Saint Francis Hospital	99183 - Hyperbaric Oxygen Therapy	\$192,296
Saint Francis Hospital	G0463 - Hospital Outpatient Clinic Visit	\$186,423
Saint Francis Hospital	97597 - Debridement Open Wound First 20 SQ CM	\$183,275
Saint Francis Hospital	97598 - Debridement Open Wound Each Additional 20 SQ CM	\$96,865
Saint Francis Hospital	41899 - Unlisted Procedure Dentoalveolar Structures	\$85,480
Saint Francis Hospital	29581 - Apply Multi-Layer Compression Leg Below Knee	\$74,099
Saint Francis Hospital	73721 - MRI - Any Joint of Lower Extremity; Without Contrast	\$66,821
Saint Francis Hospital	72148 - MRI - Spine Lumbar; Without Contrast	\$46,344
Saint Mary's Hospital	G0463 - Hospital Outpatient Clinic Visit	\$2,316,950
Saint Mary's Hospital	43239 - EGD Biopsy Single/Multiple	\$2,022,592
Saint Mary's Hospital	45378 - Diagnostic Colonoscopy	\$1,715,885
Saint Mary's Hospital	45380 - Colonoscopy with Biopsy Single/Multiple	\$1,619,833
Saint Mary's Hospital	45385 - Colonoscopy with Lesion Removal	\$1,586,442
Saint Mary's Hospital	93306 - Transthoracic Echocardiography with Doppler	\$1,491,027
Saint Mary's Hospital	66984 - Cataract Removal Insertion of Lens	\$977,027
Saint Mary's Hospital	99212 - Office Outpatient Visit 10 Minutes	\$967,560
Saint Mary's Hospital	78452 - Myocardial Perfusion Imaging, Multiple Studies	\$796,864
Saint Mary's Hospital	99213 - Office Outpatient Visit 15 Minutes	\$752,300
Saint Vincent's Medical Center	93306 Tte w/doppler complete	\$4,565,122
Saint Vincent's Medical Center	78452 Ht muscle image planar sing	\$2,376,066
Saint Vincent's Medical Center	11042 Deb subq tissue 20 sq cm/<	\$1,041,638
Saint Vincent's Medical Center	93351 Stress tte complete	\$894,935
Saint Vincent's Medical Center	93015 Cardiovascular stress test	\$575,791
Saint Vincent's Medical Center	93017 Cardiovascular stress test	\$521,674
Saint Vincent's Medical Center	15275 Skin sub graft face/nk/hf/g	\$290,803
Saint Vincent's Medical Center	90853 Group psychotherapy	\$250,894

<i>Saint Vincent's Medical Center</i>	97597 Rmvl devital tis 20 cm/<	\$204,902
<i>Saint Vincent's Medical Center</i>	29580 Application of paste boot	\$204,263
<i>Stamford Hospital</i>	45380 - Colonoscopy and biopsy	\$7,126,479
<i>Stamford Hospital</i>	77067 - Scr mammo bi incl cad	\$4,368,522
<i>Stamford Hospital</i>	45385 - Colonoscopy w/lesion removal	\$3,251,238
<i>Stamford Hospital</i>	93306 - Tte w/doppler complete	\$3,155,426
<i>Stamford Hospital</i>	74177 - Ct abd & pelv w/contrast	\$2,317,547
<i>Stamford Hospital</i>	76641 - Ultrasound breast complete	\$1,427,595
<i>Stamford Hospital</i>	G0463 - Hospital outpt clinic visit	\$1,138,948
<i>Stamford Hospital</i>	43239 - Egd biopsy single/multiple	\$1,105,793
<i>Stamford Hospital</i>	77080 - Dxa bone density axial	\$1,018,835
<i>Stamford Hospital</i>	71046 - X-ray exam chest 2 views	\$930,336
<i>The Hospital of Central Connecticut</i>	77386 Ntsty modul rad tx dlvr cplx	\$2,102,032
<i>The Hospital of Central Connecticut</i>	77385 Ntsty modul rad tx dlvr smpl	\$1,946,819
<i>The Hospital of Central Connecticut</i>	74177 Ct abd & pelv w/contrast	\$1,846,374
<i>The Hospital of Central Connecticut</i>	76641 Ultrasound breast complete	\$1,331,060
<i>The Hospital of Central Connecticut</i>	96413 Chemo iv infusion 1 hr	\$1,258,212
<i>The Hospital of Central Connecticut</i>	G0463 Hospital outpt clinic visit	\$1,249,840
<i>The Hospital of Central Connecticut</i>	77412 Radiation treatment delivery	\$1,069,989
<i>The Hospital of Central Connecticut</i>	78815 Pet image w/ct skull-thigh	\$993,388
<i>The Hospital of Central Connecticut</i>	19083 Bx breast 1st lesion us imag	\$779,882
<i>The Hospital of Central Connecticut</i>	77334 Radiation treatment aid(s)	\$743,500
<i>The William W. Backus Hospital</i>	G0463 Hospital outpt clinic visit	\$3,270,366
<i>The William W. Backus Hospital</i>	74177 Ct abd & pelv w/contrast	\$1,907,590
<i>The William W. Backus Hospital</i>	74176 Ct abd & pelvis w/o contrast	\$714,698
<i>The William W. Backus Hospital</i>	71046 X-ray exam chest 2 views	\$688,693
<i>The William W. Backus Hospital</i>	99283 Emergency dept visit	\$570,969
<i>The William W. Backus Hospital</i>	76641 Ultrasound breast complete	\$525,275
<i>The William W. Backus Hospital</i>	71250 Ct thorax w/o dye	\$512,494
<i>The William W. Backus Hospital</i>	G0277 Hbot, full body chamber, 30m	\$468,971
<i>The William W. Backus Hospital</i>	77080 Dxa bone density axial	\$452,290
<i>The William W. Backus Hospital</i>	70450 Ct head/brain w/o dye	\$427,932
<i>Windham Memorial Hospital</i>	77080 Dxa bone density axial	\$178,780
<i>Windham Memorial Hospital</i>	77085 Dxa bone density study	\$48,593
<i>Windham Memorial Hospital</i>	77063 Breast tomosynthesis bi	\$8,120
<i>Windham Memorial Hospital</i>	77081 Dxa bone density/peripheral	\$7,571
<i>Windham Memorial Hospital</i>	72148 Mri lumbar spine w/o dye	\$562
<i>Windham Memorial Hospital</i>	76856 Bs exam pelvic complete	\$309
<i>Windham Memorial Hospital</i>	76642 Ultrasound breast limited	\$294
<i>Windham Memorial Hospital</i>	G0297 Ldct for lung ca screen	\$279
<i>Windham Memorial Hospital</i>	76536 Bs exam of head and neck	\$270
<i>Windham Memorial Hospital</i>	71046 X-ray exam chest 2 views	\$208
<i>Yale-New Haven Hospital</i>	99211-Office/outpatient visit est	\$17,037,983
<i>Yale-New Haven Hospital</i>	90853-Group psychotherapy	\$3,871,568
<i>Yale-New Haven Hospital</i>	93306-Tte w/doppler complete	\$3,353,814
<i>Yale-New Haven Hospital</i>	52000-Cystoscopy	\$1,959,852
<i>Yale-New Haven Hospital</i>	95810-Polysom 6/> yrs 4/> param	\$1,654,272
<i>Yale-New Haven Hospital</i>	45380-Colonoscopy and biopsy	\$1,529,251
<i>Yale-New Haven Hospital</i>	66984-Xcapsl ctrc rmlv w/o ecp	\$1,384,610
<i>Yale-New Haven Hospital</i>	55250-Removal of sperm duct(s)	\$931,176
<i>Yale-New Haven Hospital</i>	45378-Diagnostic colonoscopy	\$862,532
<i>Yale-New Haven Hospital</i>	43239-Egd biopsy single/multiple	\$716,969

Source: CT Office of Health Strategy Hospital-based Off Campus Outpatient Centers Facility Fee filings for CY 2019.

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, Silver Hill Hospital, Griffin Hospital, Day Kimball Hospital and Sharon Hospital.

Mount Sinai Rehabilitation Hospital facility fee revenue is included in the Saint Francis Hospital facility fee filing.