Expert Not Yet Engaged

Contact AccuMed if Expert is Required

# Pro Medical Cost Projection

- Estimate of Reasonable Value of Future Medical Care -



Patient Name:	Daenerys Targaryen
	Based on the Future Care Referenced by Dr. Snow on 8/31/22
Prepared For:	AccuMed Healthcare Research LLC 6400 S Fiddlers Green Circle, Suite 1320 Greenwood Village, CO 80111
Date:	March 12, 2025

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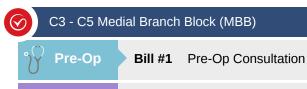
This report is a full estimate of the reasonable value of billed charges for the indicated treatment. In the development of this report, 392,813 historical records of providers performing procedures related to this treatment were identified. For information on data sources, assumptions, and methodologies - including the calculation of the reasonable value - please reference the appendices.

# **Daenerys Targaryen**

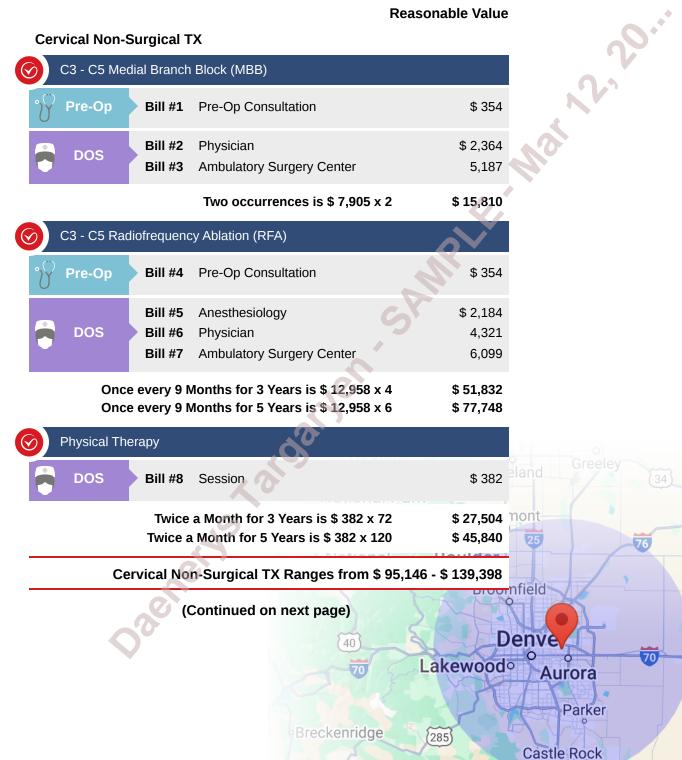
**Reasonable Value** 

\$354

Based on the Future Care Referenced by Dr. Snow on 8/31/22



**Cervical Non-Surgical TX** 



Pike-San Isabel National

Records are pulled starting from a 30 mile radius of Denver, CO.

Fort-N

Based on the Future Care Referenced by Dr. Snow on 8/31/22

## Reasonable Value (Cont.) 🧭 Daenerys Targaryen **Cervical Surgical TX** C3 - C5 Anterior Cervical Discectomy and Fusion (ACDF) Bill #9 Pre-Op Consultation \$334 2.20.0 Pre-Op Bill #10 Radiology 2,130 Bill #11 Anesthesiology \$6,946 Bill #12 Surgical Assistant 10,834 Sx 16,731 Bill #13 Surgeon Bill #14 Inpatient Hospital 193,320 \$146 Bill #15 Radiology Bill #16 Physical Therapy - Initial Eval 187 Post-Op Bill #17 Physical Therapy - 12 Visits 4,584 \$ 235,212 Cervical Surgical TX: \$ 235,212 **Knee Non-Surgical TX** Right Knee Viscosupplementation Injections (series of 3 injections) Bill #18 Pre-Op Consultation Pre-Op \$334 DOS Bill #19 Physician \$ 2,817 Once a Year for 5 Years is \$ 3,151 x 5 \$ 15,755 eland Knee Non-Surgical TX: \$15,755 nont Total Reasonable Value Ranges from \$ 346,113 - \$ 390,365 nfield Denve 40 70, Lakewoodo 70 Aurora Parker Breckenridge 285 Castle Rock

Records are pulled starting from a 30 mile radius of Denver, CO.

Accu Med

Pike-San Isabel National Fort-N

# Summary of Itemized Bills

This section lists the bills that Daenerys Targaryen would expect to receive over the course of her treatment. Each bill details specific procedures and their reasonable value in the patient's area.



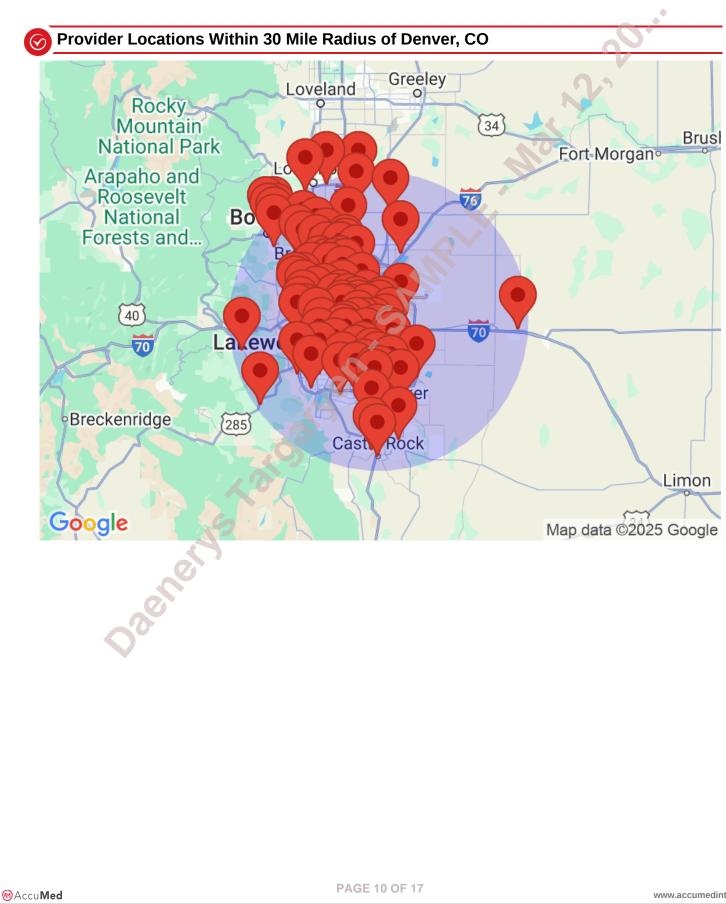
Patient Name: Location:	De	enerys Targaryen nver, CO	
Report Title:	Ba	sed on the Future Care Referenced by Dr. Snow on 8/31/22	
	Anesthesiolo	ду	~O.+*
	Code Units	Description	Reasonable Value
5 Day of	zzz 1	Anesthesia for percutaneous image guided procedures on the spine and spinal cord; therapeutic	\$ 2,184
Service			Total Bill: \$2,184
	Physician		
	Code Units	Description	Reasonable Value
	zzz 1	Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); cervical or thoracic, single facet joint	\$ 2,855
Day of Service	zzz 1	Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); cervical or thoracic, each additional facet joint	1,466
			Total Bill: \$4,321
	_	urgery Center	
	Code Units	Description	Reasonable Value
7	zzz 1	Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT);	\$ 6,099
Day of		cervical or thoracic, single facet joint	
Service			Total Bill: \$6,099
Physical Therapy	15		
	0		
	Session		
	Code Units	Description	Reasonable Value
	zzz 2	Therapeutic procedure, 1 or more areas, each 15 minutes; therapeutic exercises to develop strength and endurance, range of motion and flexibility	\$ 198
Day of Service	zzz 2	Manual therapy techniques (eg, mobilization/ manipulation, manual lymphatic drainage, manual traction), 1 or more regions, each 15 minutes	184
			Total Bill: \$382

	rior Cervical Disced	ctomy and Fusion (ACDF)	~O++*
(**)	Pre-Op Cons	ultation	
°)	Code Units	Description	Reasonable Value
9	zzz 1	Established Patient Evaluation - Level 3	\$ 334
Pre-Op			Total Bill: \$334
	Radiology		
•	Code Units	Description	<u>Reasonable Value</u>
10	zzz 1	Radiologic examination, spine, cervical; 4 or 5 views	\$ 228
Pre-Op	zzz 1	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	1,902
		St	Total Bill: \$ 2,130
	Anesthesiolo	gy	
	Code Units	Description	Reasonable Value
11	zzz 1	Anesthesia for extensive spine and spinal cord procedures	\$ 6,946
Day of		(eg, spinal instrumentation or vascular procedures)	
Surgery		.0	Total Bill: \$6,946
\$	enery's		

	Surgical As	ssistant	-0+*
	<u>Code</u> <u>Uni</u>	its Description	Reasonable Value
	zzz 1	Arthrodesis, anterior interbody, including disc space preparation, discectomy, osteophytectomy and decompression of spinal cord and/or nerve roots; cervical below C2	\$ 4,777
	zzz 1	Arthrodesis, anterior interbody, including disc space preparation, discectomy, osteophytectomy and decompression of spinal cord and/or nerve roots; cervical below C2, each additional interspace	1,349
12	zzz 1	Anterior instrumentation; 2 to 3 vertebral segments	2,426
Day of Surgery	zzz 2	Insertion of interbody biomechanical device(s) (eg, synthetic cage, mesh) with integral anterior instrumentation for device anchoring (eg, screws, flanges), when performed, to intervertebral disc space in conjunction with interbody arthrodesis, each interspace (List separately in addition to code for primary procedure)	1,779
	zzz 1	Autograft for spine surgery only (includes harvesting the graft); morselized (through separate skin or fascial incision) (List separately in addition to code for primary procedure)	503
			Total Bill: \$10,834
	zenerv		

	Surge		Description	
	<u>Code</u> zzz	<u>Units</u> 1	Description Arthrodesis, anterior interbody, including disc space preparation, discectomy, osteophytectomy and decompression of spinal cord and/or nerve roots; cervical below C2	<u>Reasonable Val</u> \$ 7,14
	ZZZ	1	Arthrodesis, anterior interbody, including disc space preparation, discectomy, osteophytectomy and decompression of spinal cord and/or nerve roots; cervical below C2, each additional interspace	1,57
13	zzz	1	Anterior instrumentation; 2 to 3 vertebral segments	4,32
Day of Surgery	ZZZ	2	Insertion of interbody biomechanical device(s) (eg, synthetic cage, mesh) with integral anterior instrumentation for device anchoring (eg, screws, flanges), when performed, to intervertebral disc space in conjunction with interbody arthrodesis, each interspace (List separately in addition to code for primary procedure)	2,49
	ZZZ	1	Autograft for spine surgery only (includes harvesting the graft); morselized (through separate skin or fascial incision) (List separately in addition to code for primary procedure)	1,18
			<u></u>	Total Bill: \$16,73
	Inpatie	ent Hos	pital	
	<u>Code</u>	<u>Units</u>	Description	<u>Reasonable Valu</u>
14	zzz	1	Cervical spinal fusion	\$ 193,32
Day of Surgery	Procedure	e Codes: 0R	—	Total Bill: \$193,32
	Radiol	ogy		
×	<u>Code</u>	<u>Units</u>	Description	Reasonable Valu
<b>E</b> 15	zzz	1	Radiologic examination, spine, cervical; 2 or 3 views	\$ 14
Post-Op				Total Bill: \$14

atient Name: ocation:		aenerys Targaryen enver, CO	
eport Title:	В	ased on the Future Care Referenced by Dr. Snow on 8/31/22	
			-
	Physical The	rapy - Initial Eval	0.
	Code Units	-	Reasonable Value
	zzz 1	Physical therapy evaluation: moderate complexity	\$ 18
Post-Op			Total Bill: \$18
	Physical The	rapy - 12 Visits	
	Code Units	Description	Reasonable Value
	zzz 2	Therapeutic procedure, 1 or more areas, each 15 minutes; therapeutic exercises to develop strength and endurance, range of motion and flexibility	\$ 198
		range of motion and nexionity	
Post-Op	zzz 2	Manual therapy techniques (eg, mobilization/ manipulation, manual lymphatic drainage, manual traction), 1 or more regions, each 15 minutes	184 32 per visit: \$4.584
		Manual therapy techniques (eg, mobilization/ manipulation, manual lymphatic drainage, manual traction), 1 or more	-
	cosupplementati	Manual therapy techniques (eg, mobilization/ manipulation, manual lymphatic drainage, manual traction), 1 or more regions, each 15 minutes 12 occurrences at \$ 38 on Injections (series of 3 injections)	-
	cosupplementati Pre-Op Cons	Manual therapy techniques (eg, mobilization/ manipulation, manual lymphatic drainage, manual traction), 1 or more regions, each 15 minutes 12 occurrences at \$ 38 on Injections (series of 3 injections)	82 per visit: \$4,584
	cosupplementati	Manual therapy techniques (eg, mobilization/ manipulation, manual lymphatic drainage, manual traction), 1 or more regions, each 15 minutes 12 occurrences at \$ 38 on Injections (series of 3 injections)	-
Right Knee Vis	cosupplementati Pre-Op Cons <u>Code Units</u>	Manual therapy techniques (eg, mobilization/ manipulation, manual lymphatic drainage, manual traction), 1 or more regions, each 15 minutes 12 occurrences at \$ 38 on Injections (series of 3 injections) sultation Description	82 per visit: \$4,584
Right Knee Vis	cosupplementati Pre-Op Cons <u>Code Units</u> zzz 1	Manual therapy techniques (eg, mobilization/ manipulation, manual lymphatic drainage, manual traction), 1 or more regions, each 15 minutes 12 occurrences at \$ 38 on Injections (series of 3 injections) sultation Description	82 per visit: \$4,584 Reasonable Value \$ 334
Right Knee Vis	cosupplementati Pre-Op Cons <u>Code Units</u> zzz 1 Physician	Manual therapy techniques (eg, mobilization/ manipulation, manual lymphatic drainage, manual traction), 1 or more regions, each 15 minutes 12 occurrences at \$ 38 on Injections (series of 3 injections) sultation Description Established Patient Evaluation - Level 3	82 per visit: \$4,584 Reasonable Value \$ 334
Right Knee Vis	cosupplementati Pre-Op Cons <u>Code Units</u> zzz 1 Physician	Manual therapy techniques (eg, mobilization/ manipulation, manual lymphatic drainage, manual traction), 1 or more regions, each 15 minutes 12 occurrences at \$ 38 on Injections (series of 3 injections) sultation Description Established Patient Evaluation - Level 3	82 per visit: \$4,584 Reasonable Value \$ 334 Total Bill: \$ 334
Right Knee Vis	Cosupplementati Pre-Op Cons Code Units zzz 1 Physician Code Units	Manual therapy techniques (eg, mobilization/ manipulation, manual lymphatic drainage, manual traction), 1 or more regions, each 15 minutes 12 occurrences at \$ 38 on Injections (series of 3 injections) sultation Description Established Patient Evaluation - Level 3 <u>Description</u> Arthrocentesis, aspiration and/or injection, major joint or bursa (eg, shoulder, hip, knee, subacromial bursa); without	82 per visit: \$4,584 Reasonable Value \$ 334 Total Bill: \$ 334 Reasonable Value



#### Appendix A – References & Data Sources

#### **Current Procedural Terminology (CPT)**

"CPT" is a registered trademark of the American Medical Association. CPT codes and descriptions are copyrighted by the American Medical Association and used herein for explanatory purposes only.

#### Professional, Device and Center Data

The data contained in this report related to professional providers, durable medical equipment, ambulatory surgery centers, and diagnostic testing facilities is based on providers' fee schedules; representing the full billed charges for specific services.

The report also leverages the American Medical Association's CPT® codebook, Optum360's National Fee Analyzer, the American Society of Anesthesiologists ("ASA") Crosswalk book, EncoderPro, and www.findacode.com.

### **Hospital & Emergency Department Data**

The data contained in this report related to hospitals is sourced from the Nationwide Inpatient Sample of the Healthcare Cost and Utilization Project (the "HCUP NIS") and the Nationwide Emergency Department Sample (the "HCUP NEDS"), which are sponsored by the Agency for Healthcare Research and Quality (an Agency in the US Department of Health and Human Services), bills already reviewed, or the American Hospital Directory.

HCUP databases contain information from a sample of approximately 20% of all inpatient discharges from HCUP-participating hospitals. The information contained in the database includes, among other data elements, primary and secondary diagnosis codes, procedural ("PCS") codes, Diagnosis Related Group ("DRG") codes, and total hospital charges for each patient.

Additional information on HCUP's data and methodologies can be found here: https://www.hcup-us.ahrq.gov/nisoverview.jsp, https://www.hcup-us.ahrq.gov/nedsoverview.jsp

Information on HCUP's data partners that contributed to the database can be found here: http://www.hcup-us.ahrq.gov/db/hcupdatapartners.jsp

Information on the American Hospital Directory can be found here: www.ahd.com

#### Inflation Data

When necessary, the billed charges in the databases are inflated to represent present day costs or, for historical analyses, the year the service occured. These inflation rates are sourced from the Bureau of Labor Statistics' ("BLS") monthly CPI Reports for Medical Care.

Professional providers' billed charges are inflated according to BLS' Medical Care: Professional Services rates. Facilities' billed charges are inflated according Medical Care: Hospital and Related Services rates.

The following table summarizes these rates:												
	<u>2013</u>	<u>2014</u>	<u>2015</u>	<u>2016</u>	<u>2017</u>	<u>2018</u>	<u>2019</u>	<u>2020</u>	<u>2021</u>	<u>2022</u>	<u>2023</u>	<u>2024</u>
Facility	3.90%	4.50%	4.00%	4.30%	5.10%	3.70%	3.00%	3.00%	3.30%	4.40%	5.50%	3.50%
Professional	2.10%	1.70%	1.90%	3.10%	-1.80%	0.60%	1.40%	1.70%	4.30%	1.70%	-0.60%	2.60%
Information on I	BLS' mont	thly report	s can be f	found here	e: https://w	ww.bls.gc	v/cpi/tabl	es/supple	mental-fil	es/home.ł	ntm	
Professional 2.10% 1.70% 1.90% 3.10% -1.80% 0.60% 1.40% 1.70% 4.30% 1.70% -0.60% 2.60%												

Patient Name: Location: Report Title: Daenerys Targaryen Denver, CO Based on the Future Care Referenced by Dr. Snow on 8/31/22

#### Appendix B - Methodologies

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#### Overview

This report is built with the mission of providing transparency into the billed charges of treatment for a patient receiving care in a specific geographic region and at a specific point in time. This mission guides all decisions in assembling each report.

There are no independent assumptions or opinions on a patient's current state of health, diagnosis, or prognosis. This relies on notes provided by the patients' doctors and the codes on their medical bills for these assessments. There is no review of patients' financial or other resources available to obtain medical care. Reports only analyze billed charge amounts, representing the total charges of the procedures before any third-party contracted rates would apply.

#### Analysis

The reasonable value is set at the 80th percentile; a broadly accepted metric for determining usual, customary, and reasonable ("UCR") in the healthcare industry. Percentiles of billed charges for professional providers, durable medical equipment, ambulatory surgery centers, and diagnostic testing facilities are determined by searching historical databases for each occurrence of a HCPCS code billed by the same or similar provider the patient received treatment from (e.g. physical therapy from a physical therapist). The data is then filtered to include only providers within a preset radius around a designated location. If there are no occurrences of that code in the selected radius, the radius is enlarged for that code and noted in the report. In circumstances where a national sample is pulled, a geographic adjustment factor is applied to make the values geographically relevant. Percentiles are calculated using the resulting relevant data. Determining the value of hospital charges is done in a similar manner except the hospital database is filtered based on DRG codes and PCS codes instead of HCPCS codes.

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# Appendix C – Supporting Code Detail

Appendix	c C – Su	pporting Code Detail			0	
Bill #	Code	Description	Data Source	Radius (miles)	Total Patients	Value / Unit
1	ZZZ	Established Patient Evaluation - Level 3	Physician and Other Supplier, PUF 2022	30	6,143	\$ 354
2	ZZZ	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), cervical or thoracic; single level	Physician and Other Supplier, PUF 2022	30	979	\$ 1,580
2	ZZZ	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), cervical or thoracic; second level	Physician and Other Supplier, PUF 2022	30	765	\$ 784
3	ZZZ	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), cervical or thoracic; single level	Physician and Other Supplier, PUF 2022	30	447	\$ 5,187
4	ZZZ	Established Patient Evaluation - Level 3	Physician and Other Supplier, PUF 2022	30	6,143	\$ 354
5	ZZZ	Anesthesia for percutaneous image guided procedures on the spine and spinal cord; therapeutic	Physician and Other Supplier, PUF 2021	National w/ GAF	63,823	\$ 2,184
6	zzz	Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); cervical or thoracic, single facet joint	Physician and Other Supplier, PUF 2022	30	397	\$ 2,855
6	ZZZ	Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); cervical or thoracic, each additional facet joint	Physician and Other Supplier, PUF 2022	30	283	\$ 1,466
7	ZZZ	Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); cervical or thoracic, single facet joint	Physician and Other Supplier, PUF 2022	68	363	\$ 6,099

Bill #	Code	Description	Data Source	Radius (miles)	Total Patients	Value / Unit
8	ZZZ	Therapeutic procedure, 1 or more areas, each 15 minutes; therapeutic exercises to develop strength and endurance, range of motion and flexibility	Physician and Other Supplier, PUF 2022	30	39,684	\$ 99
8	ZZZ	Manual therapy techniques (eg, mobilization/ manipulation, manual lymphatic drainage, manual traction), 1 or more regions, each 15 minutes	Physician and Other Supplier, PUF 2022	30	38,291	\$ 92
9	ZZZ	Established Patient Evaluation - Level 3	Physician and Other Supplier, PUF 2022	30	35,583	\$ 334
10	ZZZ	Radiologic examination, spine, cervical; 4 or 5 views	Physician and Other Supplier, PUF 2022	30	1,648	\$ 228
10	ZZZ	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Physician and Other Supplier, PUF 2022	30	3,629	\$ 1,902
11	ZZZ	Anesthesia for extensive spine and spinal cord procedures (eg, spinal instrumentation or vascular procedures)	Physician and Other Supplier, PUF 2022	30	919	\$ 6,946
12	ZZZ	Arthrodesis, anterior interbody, including disc space preparation, discectomy, osteophytectomy and decompression of spinal cord and/or nerve roots; cervical below C2	Physician and Other Supplier, PUF 2022	45	113	\$ 4,777
12	zzz	Arthrodesis, anterior interbody, including disc space preparation, discectomy, osteophytectomy and decompression of spinal cord and/or nerve roots; cervical below C2, each additional interspace	Physician and Other Supplier, PUF 2022	National w/ GAF	3,035	\$ 1,349
12	ZZZ	Anterior instrumentation; 2 to 3 vertebral segments	Physician and Other Supplier, PUF 2022	68	136	\$ 2,426

Bill #	Code	Description	Data Source	Radius (miles)	Total Patients	Value / Unit
12	ZZZ	Insertion of interbody biomechanical device(s) (eg, synthetic cage, mesh) with integral anterior instrumentation for device anchoring (eg, screws, flanges), when performed, to intervertebral disc space in conjunction with interbody arthrodesis, each interspace (List separately in addition to code for primary procedure)	Physician and Other Supplier, PUF 2022	30	773	\$ 889
12	ZZZ	Autograft for spine surgery only (includes harvesting the graft); morselized (through separate skin or fascial incision) (List separately in addition to code for primary procedure)	Physician and Other Supplier, PUF 2022	National w/ GAF	1,699	\$ 503
13	ZZZ	Arthrodesis, anterior interbody, including disc space preparation, discectomy, osteophytectomy and decompression of spinal cord and/or nerve roots; cervical below C2	Physician and Other Supplier, PUF 2022	30	229	\$ 7,148
13	ZZZ	Arthrodesis, anterior interbody, including disc space preparation, discectomy, osteophytectomy and decompression of spinal cord and/or nerve roots; cervical below C2, each additional interspace	Physician and Other Supplier, PUF 2022	30	114	\$ 1,579
13	ZZZ	Anterior instrumentation; 2 to 3 vertebral segments	Physician and Other Supplier, PUF 2022	30	138	\$ 4,323
13	zzz	Insertion of interbody biomechanical device(s) (eg, synthetic cage, mesh) with integral anterior instrumentation for device anchoring (eg, screws, flanges), when performed, to intervertebral disc space in conjunction with interbody arthrodesis, each interspace (List separately in addition to code for primary procedure)	Physician and Other Supplier, PUF 2022	30	1,340	\$ 1,247
13	ZZZ	Autograft for spine surgery only (includes harvesting the graft); morselized (through separate skin or fascial incision) (List separately in addition to code for primary procedure)	Physician and Other Supplier, PUF 2022	National w/ GAF	4,423	\$ 1,188

Bill #	Code	Description	Data Source	Radius (miles)	Total Patients	Value / Unit
14	ZZZ	Cervical spinal fusion	National (Nationwide) Inpatient Sample (NIS) 2016	National w/ GAF	15,838	\$ 193,320
	Procedure C	Codes: 0RG20				
15	ZZZ	Radiologic examination, spine, cervical; 2 or 3 views	Physician and Other Supplier, PUF 2022	30	1,435	\$ 146
16	ZZZ	Physical therapy evaluation: moderate complexity	Physician and Other Supplier, PUF 2022	30	10,280	\$ 187
17	ZZZ	Therapeutic procedure, 1 or more areas, each 15 minutes; therapeutic exercises to develop strength and endurance, range of motion and flexibility	Physician and Other Supplier, PUF 2022	30	39,684	\$ 99
17	ZZZ	Manual therapy techniques (eg, mobilization/ manipulation, manual lymphatic drainage, manual traction), 1 or more regions, each 15 minutes	Physician and Other Supplier, PUF 2022	30	38,291	\$ 92
18	ZZZ	Established Patient Evaluation - Level 3	Physician and Other Supplier, PUF 2022	30	35,583	\$ 334
19	ZZZ	Arthrocentesis, aspiration and/or injection, major joint or bursa (eg, shoulder, hip, knee, subacromial bursa); without ultrasound guidance	Physician and Other Supplier, PUF 2022	30	9,814	\$ 314
19	zzz	Hyaluronan or derivative, orthovisc, for intra- articular injection, per dose	Physician and Other Supplier, PUF 2022	National w/ GAF	30,791	\$ 625