



Haven Behavioral Services of Dayton LLC
 d/b/a Haven Behavioral Hospital of Dayton
 One Elizabeth Place E3 Suite A
 Dayton OH 45417
 937.234.0100

Shoppable Services

All services and/or gross charge and/or negotiated rate(s) reflected in this document are as of 1/1/2024.

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Available Services

All current services provided by this hospital are listed below.

INTERNAL REFERENCE NUMBER	SERVICE DESCRIPTION	TYPE OF SERVICE	GROSS CHARGE	MOST COMMON BILLING CODE	MAXIMUM NEGOTIATED CHARGE	MINIMUM NEGOTIATED CHARGE	DISCOUNTED CASH PRICE
100000	SEMI PRIVATE R&B	INPATIENT	\$1809 per diem	124	\$1000 per diem	\$750 per diem	APR-DRG
7500012	PSYCHIATRIC DIAG EXM W/MEDICAL SERVICES	INPATIENT ANCILLARY	\$260	961/90792	No negotiated rate	No negotiated rate	all inclusive-included with R&B per diem
7500020	DISCHARGE VISIT LESS THAN 30 MINUTES	INPATIENT ANCILLARY	\$140	961/99238	No negotiated rate	No negotiated rate	all inclusive-included with R&B per diem
7500030	DISCHARGE VISIT 31+ MINUTES	INPATIENT ANCILLARY	\$267	961/99239	No negotiated rate	No negotiated rate	all inclusive-included with R&B per diem
7500060	SUBSUQ HOSPITAL CARE 25-34 MINUTES	INPATIENT ANCILLARY	\$260	961/99232	No negotiated rate	No negotiated rate	all inclusive-included with R&B per diem

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Available Services (continued)

Other services may be provided by independent healthcare providers. Such services may include but are not limited to pathology services and/or radiology services and/or physician visits and therapies. These outside services will be billed directly by the provider. Haven Behavioral Hospital of Dayton does not negotiate or control those charges or reimbursement rates.

Payer Specific Negotiated Rates

Listed below are the individual payors that may have negotiated rates with Haven Behavioral Hospital of Dayton. If a service is listed without a payer rate, there is no negotiated or contracted rate for that service for that payor.

INPATIENT PSYCHIATRIC SERVICES PAYOR REIMBURSEMENT SCHEDULE	INPATIENT SERVICE:	ANCILLARY SERVICES RECEIVED AS PART OF AN INPATIENT STAY		
		Service provided one time upon admission	Service provided one time upon discharge	Service charged daily per inpatient stay
INSURANCE PAYOR	INPATIENT R&B	PSYCHIATRIC DIAG EXM W/MEDICAL SERVICES	DISCHARGE VISIT LESS THAN 30 MINUTES/DISCHARGE VISIT 31+ MINUTES	SUBSUQ HOSPITAL CARE 25-34 MINUTES
MEDICARE	DRG			
MEDICARE UBH (OPTUM)	DRG			
MEDICARE ANTHEM SR ADV	DRG			
MEDICARE HUMANA	DRG	all-inclusive with R&B per diem	all-inclusive with R&B per diem	all-inclusive with R&B per diem
MEDICARE AETNA	\$995 per diem			
MEDICARE CIGNA-EVERNORTH	DRG			
MEDICARE BUCKEYE	DRG			
MEDICARE MEDICAL MUTUAL	DRG			
MEDICARE CARESOURCE	DRG			

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Payer Specific Negotiated Rates (continued)

INPATIENT PSYCHIATRIC SERVICES PAYOR REIMBURSEMENT SCHEDULE	INPATIENT SERVICE:	ANCILLARY SERVICES RECEIVED AS PART OF AN INPATIENT STAY		
		Service provided one time upon admission	Service provided one time upon discharge	Service charged daily per inpatient stay
INSURANCE PAYOR	INPATIENT R&B	PSYCHIATRIC DIAG EXM W/MEDICAL SERVICES	DISCHARGE VISIT LESS THAN 30 MINUTES/DISCHARGE VISIT 31+ MINUTES	SUBSUQ HOSPITAL CARE 25-34 MINUTES
MEDICARE PARAMOUNT	DRG	all-inclusive with R&B per diem	all-inclusive with R&B per diem	all-inclusive with R&B per diem
MEDICARE MOLINA	DRG			
MEDICAID OHIO	APR - DRG			
MEDICAID BUCKEYE	APR - DRG			
MEDICAID MOLINA	APR - DRG			
MEDICAID AETNA	APR - DRG			
MEDICAID CARESOURCE	APR - DRG			
MEDICAID PARAMOUNT	APR - DRG	all-inclusive with R&B per diem	all-inclusive with R&B per diem	all-inclusive with R&B per diem
MEDICAID TRI-COUNTY BRMHS	\$900 per diem	all-inclusive with R&B per diem	all-inclusive with R&B per diem	all-inclusive with R&B per diem
MEDICAID UNITED COMMUNITY PLAN (OPTUM)	APR - DRG	all-inclusive with R&B per diem	all-inclusive with R&B per diem	all-inclusive with R&B per diem
MEDICAID HUMANA	APR - DRG			
MEDICAID MONTGOMERY CTY INDIGENT	\$750 per diem			
MEDICAID OH RISE	APR-DRG			

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Payer Specific Negotiated Rates (continued)

INPATIENT PSYCHIATRIC SERVICES PAYOR REIMBURSEMENT SCHEDULE	INPATIENT SERVICE:	ANCILLARY SERVICES RECEIVED AS PART OF AN INPATIENT STAY		
		Service provided one time upon admission	Service provided one time upon discharge	Service charged daily per inpatient stay
INSURANCE PAYOR	INPATIENT R&B	PSYCHIATRIC DIAG EXM W/MEDICAL SERVICES	DISCHARGE VISIT LESS THAN 30 MINUTES/DISCHARGE VISIT 31+ MINUTES	SUBSUQ HOSPITAL CARE 25-34 MINUTES
MEDICAID AMERIHEALTH CARITAS	APR-DRG			
MEDICAID ANTHEM	APR-DRG			
TRICARE/MHN/HEALTH NET	\$808.31 per diem			
TRIWEST HEALTHCARE ALLIANCE	\$800 per diem			
OPTUM VA CCN	DRG			
BCBS ANTHEM	\$765 per diem			
BCBS FEDERAL/Anthem	\$765 per diem			
UBH (OPTUM)	\$918 per diem			
CIGNA-EVERNORTH BEHAVIORAL HEALTH	\$892 per diem			
MAGELLAN	\$850 per diem			
HUMANA	\$875 per diem	all-inclusive with R&B per diem	all-inclusive with R&B per diem	all-inclusive with R&B per diem
AARP (OPTUM)	\$918 per diem			
AETNA	\$995 per diem			

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Payer Specific Negotiated Rates (continued)

INPATIENT PSYCHIATRIC SERVICES PAYOR REIMBURSEMENT SCHEDULE	INPATIENT SERVICE:	ANCILLARY SERVICES RECEIVED AS PART OF AN INPATIENT STAY		
		Service provided one time upon admission	Service provided one time upon discharge	Service charged daily per inpatient stay
INSURANCE PAYOR	INPATIENT R&B	PSYCHIATRIC DIAG EXM W/MEDICAL SERVICES	DISCHARGE VISIT LESS THAN 30 MINUTES/DISCHARGE VISIT 31+ MINUTES	SUBSUQ HOSPITAL CARE 25-34 MINUTES
MHNET	\$915 per diem	all-inclusive with R&B per diem	all-inclusive with R&B per diem	all-inclusive with R&B per diem
MEDICAL MUTUAL	\$938 per diem			
VALUE OPTIONS (BEACON)	\$902 per diem	all-inclusive with R&B per diem	all-inclusive with R&B per diem	all-inclusive with R&B per diem
QUALITY CARE PARTNERS	\$925 per diem			
UMR	\$918 per diem			
BUCKEYE MARKETPLACE	DRG			
PARAMOUNT	See Medicare fee schedule	all-inclusive with R&B per diem	all-inclusive with R&B per diem	all-inclusive with R&B per diem