

# Allina Health Research Pricing Guidelines

**Last Review Date** by Allina Finance Council: November 24, 2021

**Effective Date:** January 2022

**Next Review Date:** January 2025

Research Pricing Guidelines establish the Research Fee Schedule for research services that are paid for by research study and/or otherwise non-billable to patient or patient's insurance. Pricing is established in accordance with the Research Operations/Office of Sponsored Programs (OSP) review and approval process of research at Allina Health.

All services paid for by research study will include co-pays, deductibles or co-insurance that are due from the patient/participant.

## Definitions

**Add-On Service** – service not separately reimbursed by Medicare, but charged separately for research studies. Applicable to outpatient visits only.

**Medicare Rate** – estimated rate of reimbursement to Allina Health from Outpatient Prospective Payment System (“OPPS”), Inpatient Prospective Payment System (“IPPS”), Medicare Physician Fee Schedule (“MPFS”) and Drug Average Sales Pricing (“ASP”).

**Uninsured Discount** – rate set annually by the Allina Finance Council

## Outpatient Service Research Pricing

<b>Outpatient Service</b>	<b>Funded by Industry, Non-Government, and/or non-internal</b>	<b>Funded by Government or Internally</b>
w/CPT/HCPC and Medicare OPPS Reimbursement Rate	125% of Medicare OPPS rate	100% of Medicare OPPS rate
w/Miscellaneous CPT code (e.g., XX999 or XXX99) or Add-On Service (common examples listed below)	Hospital gross charge minus the Uninsured discount	Hospital gross charge minus the Uninsured discount
OR/ Surgical Service(s)	Hospital gross charge for the OR/Surgical Level minus the Uninsured discount	Hospital gross charge for the OR/Surgical Level minus the Uninsured discount

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## Common Add-on Services

Service Description	CPT Code (if applicable)
Rad US Guidance for needle placement imaging supervision and interpretation	76942
Rad US Guidance Intraoperative	76998
Rad XR fluoroscopy for Central Venous Access	77001
CT Guided Needle Placement	77012
IVUS - Intravenous Ultrasound (Initial Vessel)	92978
IVUS - Intravenous Ultrasound (Each Additional Vessel)	92979
Noga Mapping during CV catheterization	n/a
PACU Recovery Room, or Level II through V - First 30 minutes	n/a
PACU Recovery Room, or Level II through V - Additional Minutes	n/a
Radiological Contrast	Q9957; Q9967
Recovery (per min rate)	n/a
Room Med/Surg	n/a
Study Product Injection (w/CV cath and Noga)	n/a
Telemetry (OP or IP)	n/a
Ancillary - Reduced RN Pat Ratio Level I	n/a
Ancillary - Telemetry Anc Level III	n/a
Ancillary - Advanced Med/Surg Level IV	n/a
Ancillary - Advanced Post-Surg Level V	n/a

This table does not include every potential service for add-on.

## Inpatient Research Pricing

Inpatient Stay	Funded by Industry, Non-Government, and/or non-internal	Funded by Government or Internally
Coded as IP w/MS-DRG	125% of Medicare rate for the applicable MS-DRG	100% of Medicare rate for the applicable MS-DRG

If a business need is presented, a research site may request line item pricing of all individual rates of items and services using the Outpatient Service Research Pricing methodology (includes daily room charge) for an inpatient stay. Approval required by Research Operations Director and Hospital Finance VP.

If the research stay includes some inpatient and outpatient, due to overnight stay criteria (2-midnight rule), the Research Outpatient Service Pricing will be applied to outpatient stays.

When the research site is not paying for the entire inpatient stay, then Research Outpatient Service Pricing will apply to each of the services determined by Allina Health to be non-billable during the inpatient stay.

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## Physician (Professional) Research Pricing

<b>Professional Service</b>	<b>Funded by Industry, Non-Government, and/or non-internal</b>	<b>Funded by Government or Internally</b>
w/CPT/HCPC and Medicare Physician Fee Schedule (“MPFS”) Reimbursement Rate	125% of MPFS Facility Rate	100% of MPFS Facility Rate
w/Miscellaneous CPT code (e.g., XX999 or XXX99) or Add-On Service*	Clinic gross charge minus the Uninsured discount*	Clinic gross charge minus the Uninsured discount*
OR/ Surgical Service(s)	Hospital gross charge for the OR/Surgical Level minus the Uninsured discount	Hospital gross charge for the OR/Surgical Level minus the Uninsured discount

### **Inflation**

Outpatient and Physician Research prices are set at the Guidelines Effective Date and will increase each subsequent year by an inflation factor equal to the average Medical CPI for the previous year until Next Review Date.

### **Allina Health Lab & Pharmacy**

Allina Health Lab establishes its own research fee schedule based on the rate charged to other external parties and does charge a research study set-up fee.

Allina Health Pharmacy establishes a separate Allina Health Pharmacy Research Fee Schedule for pharmacy research services; including a research set-up fee for studies involving a product that is both injectable and investigational.

### **Other items**

Allina Health Departments may charge setup fees to cover costs related to start-up or on-going support of a research project. The costs should be reasonable in relation to the work.

### **Process for Research Pricing Estimates by Study**

Every new interventional study or study with billable services is required to be submitted to Research Operations, Office of Sponsored Programs (“OSP”) for billing compliance and pricing review ([SYS-ADMIN-RA Policy 201.00](#)). OSP office provides all estimated research rates per these Guidelines and study protocol prior to study approval at Allina Health.