



Provider/Facility Name: Central Illinois Endoscopy Center	Provider/Facility Type: Ambulatory Surgery Center
Street Address: 1001 Main St, Suite 500 B	Zip Code: 61606
City: Peoria	State: Illinois
Contact Person: Andrew Paulson	Phone: (309) 495-1184
National Provider Identifier: 1790924306	Taxpayer Identification Number: 208243285

Service/ Item	Address where service/ item will be provided	Diagnosis Code	Service Code	Quantity	Expected Cost
Esophagogastroduodenoscopy (EGD)	Central Illinois Endoscopy Center 1001 Main St, Suite 500 B Peoria, IL 61606	Any or all	43235,43239,43251,43233,43245,43248,43249,43255,43244	1	\$900.00
Physician	Illinois Gastroenterology Group 1001 Main St, Suite 500 A Peoria, IL 61606	Any or all	43235,43239,43251,43233,43245,43248,43249,43255,43244	1	\$630.00
Anesthesia	Illinois Gastroenterology Group 1001 Main St, Suite 500 A Peoria, IL 61606	Any or all	00731,00732,00811,00812,00813	1	\$250.00
*Pathology	IGG Pathology 14052 W Petronella Dr #201 Libertyville, IL 60048	Any or all	88305,88342	1	\$784.00

Total Expected Charges from Central Illinois Endoscopy Center: \$1,780.00

*This total does not contain fees for laboratory, pathology, radiology, or any other outside services provided. If required, you will receive additional bills from the provider for these services.

