

Patient Price List

CPT	Procedure Description	Prompt Pay Price ⁽¹⁾	Direct Pay Price ⁽²⁾	Average (Estimated) Total Price ⁽³⁾
71046	HC RADIOLOGIC EXAM, CHEST; 2 VIEWS	\$89	\$107	\$178
77080	HC DEXA BONE DENSITY STUDY 1 OR MORE SITES AXIAL SKELETON	\$147	\$176	\$293
73630	HC X-RAY EXAM FOOT; COMPLETE, MIN 3 VIEWS	\$93	\$112	\$186
72100	HC X-RAY EXAM SPINE, LUMBOSACRAL; 2 - 3 VIEWS	\$138	\$166	\$277
73030	HC X-RAY EXAM, SHOULDER; COMPLETE, MIN 2 VIEWS	\$109	\$130	\$217
71045	HC RADIOLOGIC EXAM, CHEST; SINGLE VIEW	\$255	\$306	\$511
73130	HC X-RAY EXAM OF HAND, MIN 3 VIEWS	\$118	\$142	\$237
73610	HC X-RAY EXAM ANKLE; COMPLETE, MIN 3 VIEWS	\$101	\$121	\$202
73502	HC RADIOLOGIC EXAM, HIP, UNILATERAL, WITH PELVIS WHEN PERFORMED; 2-3 VIEW	\$92	\$110	\$184
73562	HC X-RAY EXAM KNEE; 3 VIEWS	\$115	\$138	\$230
73110	HC X-RAY EXAM WRIST, COMPLETE; MIN 3 VIEWS	\$103	\$124	\$207
72040	HC RADIOLOGIC EXAMINATION, SPINE, CERVICAL; 2 OR 3 VIEWS	\$87	\$104	\$173
73564	HC X-RAY EXAM KNEE; COMPLETE, 4 OR MORE VIEWS	\$164	\$197	\$329
72050	HC RADIOLOGIC EXAMINATION, SPINE, CERVICAL; 4-5 VIEWS	\$145	\$174	\$290
71101	HC X-RAY EXAM, RIBS, UNILATERAL; INCL POSTANTERIOR CHEST, MIN 3 VIEWS	\$98	\$118	\$197
73521	HC RADIOLOGIC EXAM, HIPS, BILATERAL, WITH PELVIS WHEN PERFORMED; 2 VIEWS	\$147	\$177	\$295
73080	HC X-RAY EXAM ELBOW; COMPLETE, MIN 3 VIEWS	\$104	\$125	\$208
73560	HC X-RAY EXAM KNEE; 1 OR 2 VIEWS	\$97	\$117	\$195
72072	HC X-RAY EXAM, SPINE; THORACIC, 3 VIEWS	\$134	\$161	\$269
73140	HC X-RAY EXAM, FINGER(S); MIN 2 VIEWS	\$85	\$102	\$170
72110	HC X-RAY EXAM SPINE, LUMBOSACRAL; MIN 4 VIEWS	\$142	\$170	\$283
72114	HC X-RAY EXAM L-S SPINE BENDING	\$350	\$420	\$700
74018	HC RADIOLOGIC EXAM, ABDOMEN; 1 VIEW	\$111	\$133	\$222
73590	HC X-RAY EXAM TIBIA & FIBULA; TWO VIEWS	\$119	\$143	\$238
72070	HC X-RAY EXAM SPINE; THORACIC, 2 VIEWS	\$164	\$196	\$327
72170	HC X-RAY EXAM PELVIS; 1OR 2 VIEWS	\$156	\$187	\$312
74019	HC RADIOLOGIC EXAM, ABDOMEN; 2 VIEWS	\$119	\$143	\$239
73090	HC X-RAY EXAM FOREARM; 2 VIEWS	\$146	\$175	\$291
73552	HC RADIOLOGIC EXAM, FEMUR; MINIMUM 2 VIEWS	\$100	\$120	\$200
73565	HC X-RAY EXAM, KNEE; BOTH KNEES, STANDING, ANTEROPOSTERIOR	\$82	\$99	\$165
73660	HC X-RAY EXAM, TOE(S), MIN 2 VIEWS	\$68	\$81	\$135
73060	HC X-RAY EXAM HUMERUS, MIN 2 VIEWS	\$125	\$150	\$250
72202	HC X-RAY EXAM, SACROILIAC JOINTS; 3 OR MORE VIEWS	\$144	\$173	\$288
72220	HC X-RAY EXAM, SACRUM AND COCCYX, MIN 2 VIEWS	\$80	\$96	\$161
76098	HC RADIOLOGICAL EXAMINATION SURGICAL SPECIMEN	\$592	\$711	\$1,185
74022	HC X-RAY EXAM ABDOMEN; COMPLETE ACUTE ABDOMEN SERIES	\$288	\$345	\$575
74246	HC X-RAY XM UPR GI TRC 2CNTRST	\$261	\$313	\$521



Patient Price List

CPT	Procedure Description	Prompt Pay Price ⁽¹⁾	Direct Pay Price ⁽²⁾	Average (Estimated) Total Price ⁽³⁾
72082	HC X-RAY EXAM ENTIRE SPI 2/3 VW	\$149	\$178	\$297
74220	HC X-RAY EXAM; ESOPHAGUS	\$273	\$328	\$546
73000	HC X-RAY EXAM, CLAVICLE; COMPLETE	\$96	\$115	\$192
73100	HC X-RAY EXAM WRIST; 2 VIEWS	\$145	\$174	\$290
77075	HC X-RAYS BONE SURVEY COMPLETE	\$146	\$175	\$291
72052	HC RADIOLOGIC EXAMINATION, SPINE, CERVICAL; 6 OR MORE VIEWS	\$146	\$176	\$293
73650	HC X-RAY EXAM CALCANEUS; MIN 2 VIEWS	\$103	\$123	\$205
73120	HC X-RAY EXAM, HAND; 2 VIEWS	\$183	\$219	\$366
73600	HC X-RAY EXAM ANKLE; 2 VIEWS	\$100	\$121	\$201
73620	HC X-RAY EXAM FOOT; 2 VIEWS	\$114	\$137	\$228
73070	HC X-RAY EXAM, ELBOW; 2 VIEWS	\$142	\$170	\$284
70360	HC X-RAY EXAM, NECK; SOFT TISSUE	\$183	\$219	\$365
71100	HC X-RAY EXAM, RIBS, UNILATERAL; 2 VIEWS	\$73	\$88	\$147

The above prices are for radiological procedures performed at HonorHealth Outpatient Medical Imaging Centers. Prices listed do not include professional fees for services of hospital based Radiologists.

⁽¹⁾ **Prompt Pay Price** is the average price a self-pay patient will pay when paid-in-full in advance of having this procedure.

⁽²⁾ **Direct Pay Price** is the average price a self-pay patient will pay when having this procedure. Arrangements can be made to pay over time.

⁽³⁾ **Average (Estimated) Total Price** is the estimated average total charges a person will experience when having this procedure

⁽²⁾ Not all services provided at all locations.

Glendale Health & Infusion Center

X-Ray • Ultrasound • Infusions

6220 W. Bell Rd., Suite 110, Glendale, AZ 85308

T: 602.547.7200

Sonoran Health

X-Ray • Dexa • Ultrasound • CT • MRI

33423 N. 32nd Ave., Phoenix, AZ 85035

T: 623.474.1610

Anthem Outpatient Medical Imaging

X-Rays Only

3648 W. Anthem Way, Bldg. A-100, Anthem, AZ 85086

T: 623.434.6474

Tatum Outpatient Medical Imaging

X-Ray • Ultrasound • CT • MRI

18404 N. Tatum Blvd., Suite 103, Phoenix, AZ 85032

T: 602.485.7490

Deer Valley Outpatient Medical Imaging

X-Ray • Dexa • Ultrasound • CT • MRI

19636 N. 27th Ave., Suite LL1, Phoenix, AZ 85027

T: 623.445.6400

Breast Health & Research Center

Mammograms • Ultrasound • MRI

19646 N. 27th Ave., Suite 205, Phoenix, AZ 85027

T: 623.780.HOPE (4673)

John C. Lincoln Outpatient Medical Imaging

X-Ray • Dexa • Ultrasound • CT • MRI

9250 N. Third St., Suite 1002, Phoenix, AZ 85020

T: 602.331.7890