

Patient Price List

CPT	Procedure Description	Prompt Pay Price ⁽¹⁾
70030	HC X-RAY EYE FOR FOREIGN BODY	\$83
70110	HC X-RAY EXAM, MANDIBLE; COMPLETE, MIN 4 VIEWS	\$192
70140	HC X-RAY EXAM, FACIAL BONES; <3 VIEWS	\$96
70150	HC X-RAY EXAM, FACIAL BONES; COMPLETE, MIN 3 VIEWS	\$192
70160	HC X-RAY EXAM, NASAL BONES, COMPLETE, MIN 3 VIEWS	\$96
70200	HC X-RAY EXAM; ORBITS, COMPLETE, MIN 4 VIEWS	\$192
70210	HC X-RAY EXAM, SINUSES, PARANASAL, <3 VIEWS	\$192
70220	HC X-RAY EXAM, SINUSES, PARANASAL, COMPLETE, MIN 3 VIEWS	\$192
70250	HC RADIOLOGICAL EXAM SKULL <4 VIEWS	\$192
70260	HC X-RAY EXAM, SKULL; COMPLETE,MIN 4 VIEWS	\$192
70330	HC X-RAY EXAM, TEMPOROMANDIBULAR JOINT; BILATERAL	\$192
70360	HC X-RAY EXAM, NECK; SOFT TISSUE	\$192
71045	HC RADIOLOGIC EXAM, CHEST; SINGLE VIEW	\$192
71046	HC RADIOLOGIC EXAM, CHEST; 2 VIEWS	\$192
71047	HC RADIOLOGIC EXAM, CHEST; 3 VIEWS	\$192
71100	HC X-RAY EXAM, RIBS, UNILATERAL; 2 VIEWS	\$192
71101	HC X-RAY EXAM, RIBS, UNILATERAL; INCL POSTANTERIOR CHEST, MIN 3 VIEWS	\$192
71110	HC X-RAY EXAM, RIBS, BILATERAL; 3 VIEWS	\$172
71111	HC X-RAY EXAM, RIBS, BILATERA; INCL POSTEROANTERIOR CHEST, MIN 4 VIEWS	\$192
71120	HC X-RAY EXAM, STERNUM; MIN 2 VIEWS	\$192
71130	HC RADIOLOGIC EXAM; STERNOCLAVICULAR JOINT OR JOINTS, MINIMUM OF 3	\$96
72020	HC X-RAY EXAM, SPINE, SINGLE VIEW, SPECIFY LEVEL	\$192
72040	HC RADIOLOGIC EXAMINATION, SPINE, CERVICAL; 2 OR 3 VIEWS	\$192
72050	HC RADIOLOGIC EXAMINATION, SPINE, CERVICAL; 4-5 VIEWS	\$192
72052	HC RADIOLOGIC EXAMINATION, SPINE, CERVICAL; 6 OR MORE VIEWS	\$192
72070	HC X-RAY EXAM SPINE; THORACIC, 2 VIEWS	\$192
72072	HC X-RAY EXAM, SPINE; THORACIC, 3 VIEWS	\$192
72074	HC X-RAY EXAM, SPINE; THORACIC, MIN 4 VIEWS	\$192
72080	HC X-RAY EXAM SPINE; THORACOLUMBAR, 2 VIEWS	\$192
72081	HC X-RAY EXAM ENTIRE SPI 1 VW	\$96
72082	HC X-RAY EXAM ENTIRE SPI 2/3 VW	\$192
72083	HC X-RAY EXAM ENTIRE SPI 4/5 VW	\$172
72084	HC X-RAY EXAM ENTIRE SPI 6/> VW	\$172
72100	HC X-RAY EXAM SPINE, LUMBOSACRAL; 2 - 3 VIEWS	\$192
72110	HC X-RAY EXAM SPINE, LUMBOSACRAL; MIN 4 VIEWS	\$192
72114	HC X-RAY EXAM L-S SPINE BENDING	\$345
72170	HC X-RAY EXAM PELVIS; 1OR 2 VIEWS	\$192
72190	HC X-RAY EXAM, PELVIS; COMPLETE, MIN 3 VIEWS	\$192
72202	HC X-RAY EXAM, SACROILIAC JOINTS; 3 OR MORE VIEWS	\$192
72220	HC X-RAY EXAM, SACRUM AND COCCYX, MIN 2 VIEWS	\$192
73000	HC X-RAY EXAM, CLAVICLE; COMPLETE	\$192
73010	HC X-RAY EXAM; SCAPULA, COMPLETE	\$172
73020	HC X-RAY EXAM, SHOULDER; 1 VIEW	\$192



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73030	HC X-RAY EXAM, SHOULDER; COMPLETE, MIN 2 VIEWS	\$192
73040	HC X-RAY EXAM, SHOULDER, ARTHROGRAPHY, RAD SUPERV/INTERPRET	\$512
73050	HC X-RAY EXAM, ACROMIOCLAVICULAR JOINTS, BILATERAL	\$96
73060	HC X-RAY EXAM HUMERUS, MIN 2 VIEWS	\$192
73070	HC X-RAY EXAM, ELBOW; 2 VIEWS	\$192
73080	HC X-RAY EXAM ELBOW; COMPLETE, MIN 3 VIEWS	\$192
73090	HC X-RAY EXAM FOREARM; 2 VIEWS	\$192
73092	HC X-RAY EXAM OF ARM, INFANT	\$172
73100	HC X-RAY EXAM WRIST; 2 VIEWS	\$192
73110	HC X-RAY EXAM WRIST, COMPLETE; MIN 3 VIEWS	\$192
73120	HC X-RAY EXAM, HAND; 2 VIEWS	\$192
73130	HC X-RAY EXAM OF HAND, MIN 3 VIEWS	\$192
73140	HC X-RAY EXAM, FINGER(S); MIN 2 VIEWS	\$192
73501	HC RADIOLOGIC EXAM, HIP, UNILATERAL, WITH PELVIS WHEN PERFORMED; 1	\$96
73502	HC RADIOLOGIC EXAM, HIP, UNILATERAL, WITH PELVIS WHEN PERFORMED; 2-3	\$192
73503	HC RADIOLOGIC EXAM, HIP, UNILATERAL, WITH PELVIS WHEN PERFORMED; MIN 4	\$172
73521	HC RADIOLOGIC EXAM, HIPS, BILATERAL, WITH PELVIS WHEN PERFORMED; 2	\$192
73522	HC RADIOLOGIC EXAM, HIPS, BILATERAL, WITH PELVIS WHEN PERFORMED; 3-4	\$172
73523	HC X-RAY EXAM HIPS BI 5/> VIEWS	\$172
73551	HC RADIOLOGIC EXAM, FEMUR; 1 VIEW	\$96
73552	HC RADIOLOGIC EXAM, FEMUR; MINIMUM 2 VIEWS	\$192
73560	HC X-RAY EXAM KNEE; 1 OR 2 VIEWS	\$192
73562	HC X-RAY EXAM KNEE; 3 VIEWS	\$192
73564	HC X-RAY EXAM KNEE; COMPLETE, 4 OR MORE VIEWS	\$192
73565	HC X-RAY EXAM, KNEE; BOTH KNEES, STANDING, ANTEROPOSTERIOR	\$192
73590	HC X-RAY EXAM TIBIA & FIBULA; TWO VIEWS	\$192
73592	HC X-RAY EXAM; LOWER EXTREMITY, INFANT, MIN 2 VIEWS	\$96
73600	HC X-RAY EXAM ANKLE; 2 VIEWS	\$192
73610	HC X-RAY EXAM ANKLE; COMPLETE, MIN 3 VIEWS	\$192
73620	HC X-RAY EXAM FOOT; 2 VIEWS	\$192
73630	HC X-RAY EXAM FOOT; COMPLETE, MIN 3 VIEWS	\$192
73650	HC X-RAY EXAM CALCANEUS; MIN 2 VIEWS	\$192
73660	HC X-RAY EXAM, TOE(S), MIN 2 VIEWS	\$192
74018	HC RADIOLOGIC EXAM, ABDOMEN; 1 VIEW	\$192
74019	HC RADIOLOGIC EXAM, ABDOMEN; 2 VIEWS	\$192
74021	HC RADIOLOGIC EXAM, ABDOMEN, 3 OR MORE VIEWS	\$150
74022	HC X-RAY EXAM ABDOMEN; COMPLETE ACUTE ABDOMEN SERIES	\$192
76536	HC ULTRASOUND SOFT TISSUES OF HEAD AND NECK REAL TIME W IMAGE	\$286
76700	HC ULTRASOUND ABDOMINAL REAL TIME WITH IMAGE DOCUMENTATION	\$286
76705	HC ULTRASOUND, ABDOMEN; LIMITED	\$286
76706	HC US ABDL AORTA SCREEN AAA	\$286
76770	HC ULTRASOUND RETROPERTONEAL REAL TIME WITH IMAGE DOCUMENTATION	\$286
76775	HC ULTRASOUND RETROPERTONEAL REAL TIME WITH IMAGE DOCUMENTATION	\$286



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76801	HC OB US < 14 WKS SINGLE FETUS	\$286
76802	HC OB US < 14 WKS ADDL FETUS	\$13
76830	HC ULTRASOUND, TRANSVAGINAL	\$286
76856	HC US EXAM PELVIC COMPLETE	\$286
76857	HC ECHO EXAM OF PELVIS; LIMITED/FOLLOW UP	\$286
76870	HC ULTRASOUND, SCROTUM AND CONTENTS	\$286
76882	HC US LMTD JT/NONVASC XTR STRUX	\$286
77071	HC X-RAY STRESS VIEW	\$96
77072	HC BONE AGE STUDIES	\$192
77073	HC BONE LENGTH STUDIES (ORTHOROENTGENOGRAM SCANOGRAM)	\$172
77075	HC X-RAYS BONE SURVEY COMPLETE	\$192
77076	HC RADIOLOGIC EXAMINATION OSSEOUS SURVEY INFANT	\$172
93880	HC EXTRACRANIAL STUDY, BILATERAL	\$321
93882	HC DUPLEX SCAN OF EXTRACRANIAL ARTERIES; UNILATERAL/LIMITED STUDY	\$150
93922	HC UPR/L XTREMITY ART 2 LEVELS	\$215
93923	HC UPR/LXTR ART STDY 3+ LVLS	\$325
93924	HC LWR XTR VASC STDY BILAT	\$404
93925	HC DUPLEX SCAN LOWER EXTREM ARTERIES, COMPLETE BILATERAL	\$430
93926	HC DUPLEX SCAN LOWER EXTREM ARTERIES; UNILATERAL/LIMITED	\$273
93930	HC DUPLEX SCAN UPPER EXTREM ARTERIES; COMPLETE BILATERAL	\$352
93931	HC DUPLEX SCAN UPPER EXTREM ARTERIES; UNILATERAL/LIMITED	\$187
93970	HC DUPLEX SCAN OF EXTREMITY VEINS INC RESP TO COMPRESSION AND OTHER	\$370
93971	HC DUPLEX SCAN EXTREMITY VEINS, UNILATERAL/LIMITED	\$241
93975	HC VASCULAR STUDY	\$437
93976	HC DUPLEX SCAN OF ARTERIAL INFLOW AND VENOUS OUTFLOW OF ABDOMINAL,	\$308
93980	HC PENILE VASCULAR STUDY	\$172
93990	HC DUPLEX SCAN OF HEMODIALYSIS ACCESS	\$150

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.

*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

Happy Valley Outpatient Medical Imaging

X-Ray • Ultrasound

10230 W. Happy Valley Pkwy., Ste. 100, Peoria, AZ 85383

T: 602.943.4269