

Patient Price List

CPT/HCPCS CODE	Procedure Description	Prompt Pay Price <sup>(1)</sup>	Direct Pay Price <sup>(2)</sup>	Average (Estimated) Total Price <sup>(3)</sup>
74185	MRA Abd w/ Cont	\$ 669	\$ 869	\$ 1,337
74185	MRA Abd w/or w/o Cont	\$ 669	\$ 869	\$ 1,337
71555	MRA Chest w/ Cont	\$ 669	\$ 869	\$ 1,337
71555	MRA Chest w/o & w/ Cont	\$ 669	\$ 869	\$ 1,337
70548	MRA Neck w/ Cont	\$ 669	\$ 869	\$ 1,337
70549	MRA Neck w/o & w/ Cont	\$ 817	\$ 1,061	\$ 1,633
70547	MRA Neck w/o Cont	\$ 525	\$ 683	\$ 1,050
70546	MRA/MRV Head w/o & w/ Cont	\$ 817	\$ 1,061	\$ 1,633
70544	MRA/MRV Head w/o Cont	\$ 525	\$ 683	\$ 1,050
74182	MRI Abd w/ Cont	\$ 669	\$ 869	\$ 1,337
74183	MRI Abd w/o & w/ Cont	\$ 817	\$ 1,061	\$ 1,633
74181	MRI Abd w/o Cont	\$ 525	\$ 683	\$ 1,050
70552	MRI Brain w/ Cont	\$ 669	\$ 869	\$ 1,337
70553	MRI Brain w/o & w/ Cont	\$ 812	\$ 1,056	\$ 1,624
70551	MRI Brain w/o Cont	\$ 525	\$ 683	\$ 1,050
77059	MRI Breast Bila w/o & w/ Cont	\$ 1,257	\$ 1,634	\$ 2,514
71552	MRI Chest w/o & w/ Cont	\$ 817	\$ 1,061	\$ 1,633
71550	MRI Chest w/o Cont	\$ 525	\$ 683	\$ 1,050
73722	MRI Ext Jnt Lwr w/ Cont	\$ 669	\$ 869	\$ 1,337
73723	MRI Ext Jnt Lwr w/o & w/ Cont	\$ 817	\$ 1,061	\$ 1,633
73222	MRI Ext Jnt Up w/ Cont	\$ 669	\$ 869	\$ 1,337
73223	MRI Ext Jnt Up w/o & w/ Cont	\$ 817	\$ 1,061	\$ 1,633
73221	MRI Ext Jnt Up w/o Cont	\$ 525	\$ 683	\$ 1,050
73721	MRI Ext Lwr Jnt w/o Cont	\$ 525	\$ 683	\$ 1,050
73719	MRI Ext Lwr w/ Cont	\$ 669	\$ 869	\$ 1,337
73720	MRI Ext Lwr w/o & w/ Cont	\$ 817	\$ 1,061	\$ 1,633
73718	MRI Ext Lwr w/o Cont	\$ 525	\$ 683	\$ 1,050
73220	MRI Ext Up w/o & w/ Cont	\$ 817	\$ 1,061	\$ 1,633
73218	MRI Ext Up w/o Cont	\$ 525	\$ 683	\$ 1,050
72149	MRI Lumbar Spine w/ Cont	\$ 669	\$ 869	\$ 1,337
72148	MRI Lumbar Spine w/o Cont	\$ 525	\$ 683	\$ 1,050
72158	MRI Lumbar Spine w/o & w/ Cont	\$ 817	\$ 1,061	\$ 1,633

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.

<sup>(1)</sup> **Prompt Pay Price** is the average price a self-pay patient will pay when paid-in-full in advance of having this procedure. This price is also available for emergency services, with no inpatient admission, if paid-in-full within 14 days of hospital visit.  
<sup>(2)</sup> **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.  
<sup>(3)</sup> **Average (Estimated) Total Price** is the estimated average total charges a person will experience when having this procedure.  
<sup>(4)</sup> 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**

**Anthem Outpatient Medical Imaging**

X-Rays Only

**3648 W. Anthem Way Building A-100 Anthem, AZ 85086**

**T: 623.434.6474**

**Deer Valley Outpatient Medical Imaging**

X-Ray • Dexa • Ultrasound • CT • MRI

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

**T: 623.445.6400**

**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**

**Sonoran Health**

X-Ray • Dexa • Ultrasound • CT • MRI

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

**T: 623.474.1610**

**Tatum Outpatient Medical Imaging**

X-Ray • Ultrasound • CT • MRI

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

**T: 602.485.7490**

**Breast Health & Research Center**

Mammograms • Ultrasound • MRI

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

**T: 623.780.HOPE (4673)**