

CPT Code	Exam Description	Self-Pay Cost (Full payment at time of service)
70551	MRI Brain w/o Contrast	\$800.00
70553	MRI Brain w, w/o Contrast	\$1,000.00
71046	XR Chest 2 views	\$63.00
71250	CT Chest w/o Contrast	\$380.00
72141	MRI Spine Cervical w/o Contrast	\$800.00
72148	MRI Spine Lumbar w/o Contrast	\$800.00
73721	MRI Lower Extremity Any Joint w/o Contrast	\$800.00
74177	CT Abdomen, Pelvis w Contrast	\$520.00
76536	US Soft Tissue Head and Neck	\$197.40
76642	US breast limited, unilateral	\$121.80
77063	MG Screening digital breast tomosynthesis, bilateral	\$95.00
77065	Diagnostic Mammography, Digital Image, including CAD, Unilateral	\$218.40
77066	Diagnostic Mammography, Digital Image, including CAD, Bilateral	\$273.44
77067	Screening Mammography, Digital Image, including CAD, Bilateral	\$182.40
77080	DEXA Bone Densitometry	\$140.00