

CPT	Description	
		Std. Fee
0042T	CT PERFUSION W/CONTRAST CBF	\$183.00
0159T	CAD BREAST MRI	\$13.00
0200T	PERQ SACRAL AUGMT UNILAT INJ	\$1,654.00
0201T	PERQ SACRAL AUGMT BILAT INJ	\$2,069.00
0346T	ULTRASOUND ELASTOGRAPHY	\$93.00
0346T	ULTRASOUND ELASTOGRAPHY	\$93.00
10004	FNA BX W/O IMG GDN EA ADDL	\$128.00
10005	FNA BX W/US GDN 1ST LES	\$216.00
10006	FNA BX W/US GDN EA ADDL	\$147.00
10007	FNA BX W/FLUOR GDN 1ST LES	\$278.00
10008	FNA BX W/FLUOR GDN EA ADDL	\$181.00
10009	FNA BX W/CT GDN 1ST LES	\$337.00
10010	FNA BX W/CT GDN EA ADDL	\$246.00
10021	FNA BX W/O IMG GDN 1ST LES	\$205.00
10022	FNA W/IMAGE	\$193.00
10022	FNA W/IMAGE	\$193.00
10030	GUIDE CATHET FLUID DRAINAGE	\$501.00
10030	GUIDE CATHET FLUID DRAINAGE	\$1,002.00
10035	PERQ DEV SOFT TISS 1ST IMAG	\$257.00
10036	PERQ DEV SOFT TISS ADD IMAG	\$130.00
10060	DRAINAGE OF SKIN ABSCESS	\$278.00
10061	DRAINAGE OF SKIN ABSCESS	\$517.00
10120	REMOVE FOREIGN BODY	\$296.00
10121	REMOVE FOREIGN BODY	\$539.00
10140	DRAINAGE OF HEMATOMA/FLUID	\$341.00
10160	PUNCTURE DRAINAGE OF LESION	\$276.00
10160	PUNCTURE DRAINAGE OF LESION	\$276.00
11100	BIOPSY SKIN LESION	\$143.00
11976	REMOVE CONTRACEPTIVE CAPSULE	\$276.00
11982	REMOVE DRUG IMPLANT DEVICE	\$295.00
12020	CLOSURE OF SPLIT WOUND	\$566.00
19000	DRAINAGE OF BREAST LESION	\$130.00
19001	DRAIN BREAST LESION ADD-ON	\$65.00
19001	DRAIN BREAST LESION ADD-ON	\$65.00
19020	INCISION OF BREAST LESION	\$885.00
19030	INJECTION FOR BREAST X-RAY	\$230.00
19081	BX BREAST 1ST LESION STRTCTC	\$504.00
19081	BX BREAST 1ST LESION STRTCTC	\$1,008.00
19082	BX BREAST ADD LESION STRTCTC	\$252.00
19083	BX BREAST 1ST LESION US IMAG	\$472.00
19083	BX BREAST 1ST LESION US IMAG	\$944.00
19084	BX BREAST ADD LESION US IMAG	\$236.00
19084	BX BREAST ADD LESION US IMAG	\$236.00
19085	BX BREAST 1ST LESION MR IMAG	\$554.00
19086	BX BREAST ADD LESION MR IMAG	\$274.00
19100	BX BREAST PERCUT W/O IMAGE	\$208.00
19102	BX BREAST PERCUT W/IMAGE	\$294.00
19103	BX BREAST PERCUT W/DEVICE	\$695.00
19103	BX BREAST PERCUT W/DEVICE	\$1,390.00
19103	BX BREAST PERCUT W/DEVICE	\$695.00

CPT	Description	
		Std. Fee
19103	BX BREAST PERCUT W/DEVICE	\$695.00
19105	CRYOSURG ABLATE FA EACH	\$576.00
19281	PERQ DEVICE BREAST 1ST IMAG	\$301.00
19282	PERQ DEVICE BREAST EA IMAG	\$151.00
19283	PERQ DEV BREAST 1ST STRTCTC	\$303.00
19284	PERQ DEV BREAST ADD STRTCTC	\$153.00
19285	PERQ DEV BREAST 1ST US IMAG	\$257.00
19285	PERQ DEV BREAST 1ST US IMAG	\$514.00
19286	PERQ DEV BREAST ADD US IMAG	\$130.00
19287	PERQ DEV BREAST 1ST MR GUIDE	\$385.00
19288	PERQ DEV BREAST ADD MR GUIDE	\$192.00
19290	PLACE NEEDLE WIRE BREAST	\$192.00
19291	PLACE NEEDLE WIRE BREAST	\$101.00
19295	PLACE BREAST CLIP PERCUT	\$101.00
19295	PLACE BREAST CLIP PERCUT	\$101.00
20000	INCISION OF ABSCESS	\$432.00
20200	MUSCLE BIOPSY	\$282.00
20205	DEEP MUSCLE BIOPSY	\$460.00
20206	NEEDLE BIOPSY MUSCLE	\$174.00
20206	NEEDLE BIOPSY MUSCLE	\$174.00
20220	BONE BIOPSY TROCAR/NEEDLE	\$214.00
20225	BONE BIOPSY TROCAR/NEEDLE	\$320.00
20500	INJECTION OF SINUS TRACT	\$245.00
20500	INJECTION OF SINUS TRACT	\$245.00
20501	INJECT SINUS TRACT FOR X-RAY	\$113.00
20520	REMOVAL OF FOREIGN BODY	\$422.00
20550	INJ TENDON SHEATH/LIGAMENT	\$123.00
20551	INJ TENDON ORIGIN/INSERTION	\$125.00
20600	DRAIN/INJ JOINT/BURSA W/O US	\$105.00
20604	DRAIN/INJ JOINT/BURSA W/US	\$136.00
20605	DRAIN/INJ JOINT/BURSA W/O US	\$110.00
20605	DRAIN/INJ JOINT/BURSA W/O US	\$220.00
20606	DRAIN/INJ JOINT/BURSA W/US	\$155.00
20610	DRAIN/INJ JOINT/BURSA W/O US	\$135.00
20610	DRAIN/INJ JOINT/BURSA W/O US	\$270.00
20610	DRAIN/INJ JOINT/BURSA W/O US	\$135.00
20611	DRAIN/INJ JOINT/BURSA W/US	\$181.00
20611	DRAIN/INJ JOINT/BURSA W/US	\$362.00
20612	ASPIRATE/INJ GANGLION CYST	\$122.00
20982	ABLATE BONE TUMOR(S) PERQ	\$1,133.00
20983	ABLATE BONE TUMOR(S) PERQ	\$1,204.00
21116	INJECTION JAW JOINT X-RAY	\$130.00
21501	DRAIN NECK/CHEST LESION	\$934.00
21550	BIOPSY OF NECK/CHEST	\$459.00
21925	BIOPSY SOFT TISSUE OF BACK	\$1,031.00
22510	PERQ CERVICOTHORACIC INJECT	\$1,340.00
22511	PERQ LUMBOSACRAL INJECTION	\$1,258.00
22512	VERTEBROPLASTY ADDL INJECT	\$626.00
22513	PERQ VERTEBRAL AUGMENTATION	\$1,595.00
22514	PERQ VERTEBRAL AUGMENTATION	\$1,486.00

CPT	Description	
		Std. Fee
22514	PERQ VERTEBRAL AUGMENTATION	\$2,972.00
22515	PERQ VERTEBRAL AUGMENTATION	\$676.00
22520	PERCUT VERTEBROPLASTY THOR	\$1,445.00
22521	PERCUT VERTEBROPLASTY LUMB	\$1,355.00
22522	PERCUT VERTEBROPLASTY ADDL	\$471.00
22523	PERCUT KYPHOPLASTY THOR	\$1,710.00
22524	PERCUT KYPHOPLASTY LUMBAR	\$1,639.00
22525	PERCUT KYPHOPLASTY ADD-ON	\$784.00
22526	IDET SINGLE LEVEL	\$978.00
22527	IDET 1 OR MORE LEVELS	\$453.00
23330	REMOVE SHOULDER FOREIGN BODY	\$435.00
23350	INJECTION FOR SHOULDER X-RAY	\$151.00
23350	INJECTION FOR SHOULDER X-RAY	\$302.00
23550	TREAT CLAVICLE DISLOCATION	\$1,636.00
24220	INJECTION FOR ELBOW X-RAY	\$204.00
25246	INJECTION FOR WRIST X-RAY	\$223.00
27086	REMOVE HIP FOREIGN BODY	\$479.00
27093	INJECTION FOR HIP X-RAY	\$207.00
27093	INJECTION FOR HIP X-RAY	\$414.00
27093	INJECTION FOR HIP X-RAY	\$207.00
27095	INJECTION FOR HIP X-RAY	\$244.00
27096	INJECT SACROILIAC JOINT	\$248.00
27096	INJECT SACROILIAC JOINT	\$496.00
27323	BIOPSY THIGH SOFT TISSUES	\$514.00
27369	NJX CNTRST KNE ARTHG/CT/MRI	\$120.00
27370	INJECTION FOR KNEE X-RAY	\$150.00
27603	DRAIN LOWER LEG LESION	\$1,132.00
27648	INJECTION FOR ANKLE X-RAY	\$156.00
28190	REMOVAL OF FOOT FOREIGN BODY	\$623.00
3100F	IMAGE TEST REF CAROT DIAM	\$0.00
32201	DRAIN PERCUT LUNG LESION	\$775.00
32400	NEEDLE BIOPSY CHEST LINING	\$259.00
32405	PERCUT BX LUNG/MEDIASTINUM	\$307.00
32405	PERCUT BX LUNG/MEDIASTINUM	\$307.00
32408	CORE NDL BX LNG/MED PERQ	\$459.72
32420	PUNCTURE/CLEAR LUNG	\$345.00
32421	THORACENTESIS FOR ASPIRATION	\$219.00
32421	THORACENTESIS FOR ASPIRATION	\$219.00
32550	INSERT PLEURAL CATH	\$661.00
32550	INSERT PLEURAL CATH	\$1,322.00
32550	INSERT PLEURAL CATH	\$661.00
32551	INSERTION OF CHEST TUBE	\$507.00
32552	REMOVE LUNG CATHETER	\$469.00
32552	REMOVE LUNG CATHETER	\$938.00
32553	INS MARK THOR FOR RT PERQ	\$577.00
32555	ASPIRATE PLEURA W/ IMAGING	\$334.00
32555	ASPIRATE PLEURA W/ IMAGING	\$668.00
32555	ASPIRATE PLEURA W/ IMAGING	\$334.00
32555	ASPIRATE PLEURA W/ IMAGING	\$334.00
32556	INSERT CATH PLEURA W/O IMAGE	\$368.00

CPT	Description	
		Std. Fee
32557	INSERT CATH PLEURA W/ IMAGE	\$458.00
32557	INSERT CATH PLEURA W/ IMAGE	\$916.00
32557	INSERT CATH PLEURA W/ IMAGE	\$916.00
32557	INSERT CATH PLEURA W/ IMAGE	\$458.00
32557	INSERT CATH PLEURA W/ IMAGE	\$458.00
32560	TREAT PLEURODESIS W/AGENT	\$233.00
32561	LYSE CHEST FIBRIN INIT DAY	\$204.00
32994	ABLATE PULM TUMOR PERQ CRYBL	\$1,559.00
32998	ABLATE PULM TUMOR PERQ RF	\$847.00
33015	INCISION OF HEART SAC	\$1,511.00
3340F	MAMMO ASSESS INC XRAY DOCD	\$0.00
3341F	MAMMO ASSESS NEGATIVE DOCD	\$0.00
3342F	MAMMO ASSESS BENGND DOCD	\$0.00
3343F	MAMMO PROBABLY BENGND DOCD	\$0.00
3344F	MAMMO ASSESS SUSP DOCD	\$0.00
3345F	MAMMO ASSESS HGHYMALIG DOC	\$0.00
3350F	MAMMO BX PROVEN MALIG DOCD	\$0.00
34401	REMOVAL OF VEIN CLOT	\$4,384.00
34421	REMOVAL OF VEIN CLOT	\$2,218.00
34471	REMOVAL OF VEIN CLOT	\$3,299.00
34701	EVASC RPR A-AO NDGFT	\$4,181.00
34702	EVASC RPR A-AO NDGFT RPT	\$6,240.00
34703	EVASC RPR A-UNILAC NDGFT	\$4,757.00
34704	EVASC RPR A-UNILAC NDGFT RPT	\$7,899.00
34705	EVAC RPR A-BIILIAC NDGFT	\$5,203.00
34706	EVASC RPR A-BIILIAC RPT	\$7,842.00
34707	EVASC RPR ILIO-ILIAC NDGFT	\$3,903.00
34708	EVASC RPR ILIO-ILIAC RPT	\$6,287.00
34709	PLMT XTN PROSTH EVASC RPR	\$1,112.00
34710	DLYD PLMT XTN PROSTH 1ST VSL	\$2,715.00
34711	DLYD PLMT XTN PROSTH EA ADDL	\$1,027.00
34712	TCAT DLVR ENHNCD FIXJ DEV	\$2,277.00
34713	PERQ ACCESS & CLSR FEM ART	\$438.00
34825	ENDOVASC EXTEND PROSTH INIT	\$2,113.00
34826	ENDOVASC EXTEN PROSTH ADDL	\$628.00
35286	REPAIR BLOOD VESSEL LESION	\$2,846.00
35471	REPAIR ARTERIAL BLOCKAGE	\$1,581.00
35471	REPAIR ARTERIAL BLOCKAGE	\$3,162.00
35472	REPAIR ARTERIAL BLOCKAGE	\$1,077.00
35475	REPAIR ARTERIAL BLOCKAGE	\$1,004.00
35476	REPAIR VENOUS BLOCKAGE	\$808.00
35476	REPAIR VENOUS BLOCKAGE	\$1,616.00
35476	REPAIR VENOUS BLOCKAGE	\$1,616.00
35476	REPAIR VENOUS BLOCKAGE	\$808.00
3570F	RPRT BONE SCINT XREF W XRAY	\$0.00
35875	REMOVAL OF CLOT IN GRAFT	\$1,811.00
36000	PLACE NEEDLE IN VEIN	\$126.00
36002	PSEUDOANEURYSM INJECTION TRT	\$318.00
36005	INJECTION EXT VENOGRAPHY	\$145.00
36005	INJECTION EXT VENOGRAPHY	\$290.00

CPT	Description	
		Std. Fee
36005	INJECTION EXT VENOGRAPHY	\$145.00
36010	PLACE CATHETER IN VEIN	\$368.00
36010	PLACE CATHETER IN VEIN	\$736.00
36011	PLACE CATHETER IN VEIN	\$472.00
36011	PLACE CATHETER IN VEIN	\$944.00
36011	PLACE CATHETER IN VEIN	\$472.00
36012	PLACE CATHETER IN VEIN	\$524.00
36012	PLACE CATHETER IN VEIN	\$1,048.00
36012	PLACE CATHETER IN VEIN	\$1,048.00
36012	PLACE CATHETER IN VEIN	\$524.00
36013	PLACE CATHETER IN ARTERY	\$376.00
36013	PLACE CATHETER IN ARTERY	\$752.00
36014	PLACE CATHETER IN ARTERY	\$450.00
36014	PLACE CATHETER IN ARTERY	\$900.00
36015	PLACE CATHETER IN ARTERY	\$515.00
36015	PLACE CATHETER IN ARTERY	\$1,030.00
36100	ESTABLISH ACCESS TO ARTERY	\$467.00
36120	ESTABLISH ACCESS TO ARTERY	\$303.00
36120	ESTABLISH ACCESS TO ARTERY	\$606.00
36140	INTRO NDL ICATH UPR/LXTR ART	\$311.00
36140	INTRO NDL ICATH UPR/LXTR ART	\$622.00
36140	INTRO NDL ICATH UPR/LXTR ART	\$311.00
36147	ACCESS AV DIAL GRFT FOR EVAL	\$560.00
36147	ACCESS AV DIAL GRFT FOR EVAL	\$560.00
36148	ACCESS AV DIAL GRFT FOR PROC	\$147.00
36148	ACCESS AV DIAL GRFT FOR PROC	\$147.00
36160	ESTABLISH ACCESS TO AORTA	\$371.00
36200	PLACE CATHETER IN AORTA	\$463.00
36200	PLACE CATHETER IN AORTA	\$926.00
36215	PLACE CATHETER IN ARTERY	\$706.00
36215	PLACE CATHETER IN ARTERY	\$1,412.00
36215	PLACE CATHETER IN ARTERY	\$706.00
36216	PLACE CATHETER IN ARTERY	\$829.00
36216	PLACE CATHETER IN ARTERY	\$1,658.00
36216	PLACE CATHETER IN ARTERY	\$829.00
36217	PLACE CATHETER IN ARTERY	\$985.00
36217	PLACE CATHETER IN ARTERY	\$1,970.00
36217	PLACE CATHETER IN ARTERY	\$985.00
36218	PLACE CATHETER IN ARTERY	\$160.00
36218	PLACE CATHETER IN ARTERY	\$160.00
36221	PLACE CATH THORACIC AORTA	\$649.00
36223	PLACE CATH CAROTID/INOM ART	\$970.00
36223	PLACE CATH CAROTID/INOM ART	\$1,940.00
36223	PLACE CATH CAROTID/INOM ART	\$970.00
36224	PLACE CATH CAROTD ART	\$1,079.00
36224	PLACE CATH CAROTD ART	\$2,158.00
36225	PLACE CATH SUBCLAVIAN ART	\$956.00
36225	PLACE CATH SUBCLAVIAN ART	\$1,912.00
36226	PLACE CATH VERTEBRAL ART	\$1,082.00
36226	PLACE CATH VERTEBRAL ART	\$2,164.00

CPT	Description	
		Std. Fee
36227	PLACE CATH XTRNL CAROTID	\$342.00
36245	INS CATH ABD/L-EXT ART 1ST	\$760.00
36245	INS CATH ABD/L-EXT ART 1ST	\$1,520.00
36245	INS CATH ABD/L-EXT ART 1ST	\$760.00
36246	INS CATH ABD/L-EXT ART 2ND	\$811.00
36246	INS CATH ABD/L-EXT ART 2ND	\$1,622.00
36247	INS CATH ABD/L-EXT ART 3RD	\$959.00
36247	INS CATH ABD/L-EXT ART 3RD	\$1,918.00
36247	INS CATH ABD/L-EXT ART 3RD	\$959.00
36248	INS CATH ABD/L-EXT ART ADDL	\$149.00
36248	INS CATH ABD/L-EXT ART ADDL	\$149.00
36251	INS CATH REN ART 1ST UNILAT	\$847.00
36252	INS CATH REN ART 1ST BILAT	\$1,128.00
36253	INS CATH REN ART 2ND+ UNILAT	\$1,134.00
36254	INS CATH REN ART 2ND+ BILAT	\$1,248.00
36410	NON-ROUTINE BL DRAW 3/> YRS	\$28.00
36465	NJX NONCMPND SCLRSNT 1 VEIN	\$406.00
36466	NJX NONCMPND SCLRSNT MLT VN	\$515.00
36473	ENDOVENOUS MCHNCHEM 1ST VEIN	\$518.00
36474	ENDOVENOUS MCHNCHEM ADD-ON	\$260.00
36476	ENDOVENOUS RF VEIN ADD-ON	\$411.00
36478	ENDOVENOUS LASER 1ST VEIN	\$841.00
36481	INSERTION OF CATHETER VEIN	\$1,043.00
36482	ENDOVEN THER CHEM ADHES 1ST	\$601.00
36483	ENDOVEN THER CHEM ADHES SBSQ	\$299.00
36500	INSERTION OF CATHETER VEIN	\$546.00
36500	INSERTION OF CATHETER VEIN	\$1,092.00
36500	INSERTION OF CATHETER VEIN	\$546.00
36555	INSERT NON-TUNNEL CV CATH	\$354.00
36556	INSERT NON-TUNNEL CV CATH	\$360.00
36556	INSERT NON-TUNNEL CV CATH	\$360.00
36556	INSERT NON-TUNNEL CV CATH	\$360.00
36556	INSERT NON-TUNNEL CV CATH	\$360.00
36557	INSERT TUNNELED CV CATH	\$974.00
36558	INSERT TUNNELED CV CATH	\$822.00
36558	INSERT TUNNELED CV CATH	\$822.00
36560	INSERT TUNNELED CV CATH	\$1,157.00
36561	INSERT TUNNELED CV CATH	\$1,052.00
36561	INSERT TUNNELED CV CATH	\$1,052.00
36565	INSERT TUNNELED CV CATH	\$1,044.00
36566	INSERT TUNNELED CV CATH	\$1,146.00
36568	INSJ PICC <5 YR W/O IMAGING	\$289.00
36569	INSJ PICC 5 YR+ W/O IMAGING	\$272.00
36569	INSJ PICC 5 YR+ W/O IMAGING	\$272.00
36570	INSERT PICVAD CATH	\$920.00
36571	INSERT PICVAD CATH	\$959.00
36572	INSJ PICC RS&I <5 YR	\$273.00
36573	INSJ PICC RS&I 5 YR+	\$252.00
36575	REPAIR TUNNELED CV CATH	\$105.00
36576	REPAIR TUNNELED CV CATH	\$587.00

CPT	Description	
		Std. Fee
36578	REPLACE TUNNELED CV CATH	\$640.00
36580	REPLACE CVAD CATH	\$199.00
36580	REPLACE CVAD CATH	\$199.00
36581	REPLACE TUNNELED CV CATH	\$583.00
36582	REPLACE TUNNELED CV CATH	\$910.00
36584	COMPL RPLCMT PICC RS&I	\$197.00
36584	COMPL RPLCMT PICC RS&I	\$197.00
36585	REPLACE PICVAD CATH	\$844.00
36589	REMOVAL TUNNELED CV CATH	\$407.00
36590	REMOVAL TUNNELED CV CATH	\$607.00
36593	DECLOT VASCULAR DEVICE	\$85.00
36595	MECH REMOV TUNNELED CV CATH	\$550.00
36595	MECH REMOV TUNNELED CV CATH	\$550.00
36596	MECH REMOV TUNNELED CV CATH	\$133.00
36596	MECH REMOV TUNNELED CV CATH	\$133.00
36597	REPOSITION VENOUS CATHETER	\$183.00
36598	INJ W/FLUOR EVAL CV DEVICE	\$110.00
36620	INSERTION CATHETER ARTERY	\$152.00
36860	EXTERNAL CANNULA DECLOTTING	\$326.00
36861	CANNULA DECLOTTING	\$397.00
36870	PERCUT THROMBECT AV FISTULA	\$892.00
36870	PERCUT THROMBECT AV FISTULA	\$892.00
36901	INTRO CATH DIALYSIS CIRCUIT	\$435.00
36902	INTRO CATH DIALYSIS CIRCUIT	\$647.00
36903	INTRO CATH DIALYSIS CIRCUIT	\$886.00
36904	THRMBC/NFS DIALYSIS CIRCUIT	\$1,020.00
36905	THRMBC/NFS DIALYSIS CIRCUIT	\$1,281.00
36906	THRMBC/NFS DIALYSIS CIRCUIT	\$1,495.00
36907	BALO ANGIOP CTR DIALYSIS SEG	\$373.00
36908	STENT PLMT CTR DIALYSIS SEG	\$559.00
36909	DIALYSIS CIRCUIT EMBOLJ	\$531.00
37182	INSERT HEPATIC SHUNT (TIPS)	\$2,496.00
37183	REMOVE HEPATIC SHUNT (TIPS)	\$1,178.00
37184	PRIM ART M-THRMBC 1ST VSL	\$1,388.00
37184	PRIM ART M-THRMBC 1ST VSL	\$2,776.00
37185	PRIM ART M-THRMBC SBSQ VSL	\$508.00
37186	SEC ART THROMBECTOMY ADD-ON	\$755.00
37187	VENOUS MECH THROMBECTOMY	\$1,229.00
37187	VENOUS MECH THROMBECTOMY	\$2,458.00
37188	VEN MECHNL THRMBC REPEAT TX	\$882.00
37188	VEN MECHNL THRMBC REPEAT TX	\$1,764.00
37191	INS ENDOVAS VENA CAVA FILTR	\$718.00
37192	REDO ENDOVAS VENA CAVA FILTR	\$1,109.00
37193	REM ENDOVAS VENA CAVA FILTER	\$1,102.00
37193	REM ENDOVAS VENA CAVA FILTER	\$1,102.00
37193	REM ENDOVAS VENA CAVA FILTER	\$1,102.00
37197	REMOVE INTRVAS FOREIGN BODY	\$953.00
37200	TRANSCATHETER BIOPSY	\$659.00
37201	TRANSCATHETER THERAPY INFUSE	\$1,445.00
37202	TRANSCATHETER THERAPY INFUSE	\$1,131.00

CPT	Description	
		Std. Fee
37203	TRANSCATHETER RETRIEVAL	\$1,006.00
37203	TRANSCATHETER RETRIEVAL	\$1,006.00
37204	TRANSCATHETER OCCLUSION	\$3,613.00
37204	TRANSCATHETER OCCLUSION	\$3,613.00
37205	TRANSCATH IV STENT PERCUT	\$1,495.00
37206	TRANSCATH IV STENT/PERC ADDL	\$747.00
37206	TRANSCATH IV STENT/PERC ADDL	\$747.00
37207	TRANSCATH IV STENT OPEN	\$1,377.00
37209	CHANGE IV CATH AT THROMB TX	\$397.00
37210	EMBOLIZATION UTERINE FIBROID	\$2,625.00
37211	THROMBOLYTIC ART THERAPY	\$1,207.00
37211	THROMBOLYTIC ART THERAPY	\$2,414.00
37211	THROMBOLYTIC ART THERAPY	\$1,207.00
37212	THROMBOLYTIC VENOUS THERAPY	\$1,061.00
37212	THROMBOLYTIC VENOUS THERAPY	\$2,122.00
37212	THROMBOLYTIC VENOUS THERAPY	\$1,061.00
37213	THROMBLYTIC ART/VEN THERAPY	\$745.00
37213	THROMBLYTIC ART/VEN THERAPY	\$1,490.00
37213	THROMBLYTIC ART/VEN THERAPY	\$745.00
37214	CESSJ THERAPY CATH REMOVAL	\$409.00
37214	CESSJ THERAPY CATH REMOVAL	\$818.00
37214	CESSJ THERAPY CATH REMOVAL	\$409.00
37215	TRANSCATH STENT CCA W/EPS	\$3,024.00
37216	TRANSCATH STENT CCA W/O EPS	\$3,214.00
37218	STENT PLACEMT ANTE CAROTID	\$2,473.00
37220	ILIAC REVASC	\$1,262.00
37220	ILIAC REVASC	\$2,524.00
37221	ILIAC REVASC W/STENT	\$1,551.00
37221	ILIAC REVASC W/STENT	\$3,102.00
37222	ILIAC REVASC ADD-ON	\$570.00
37223	ILIAC REVASC W/STENT ADD-ON	\$653.00
37224	FEM/POPL REVAS W/TLA	\$1,389.00
37225	FEM/POPL REVAS W/ATHER	\$1,882.00
37226	FEM/POPL REVASC W/STENT	\$1,632.00
37227	FEM/POPL REVASC STNT & ATHER	\$2,264.00
37228	TIB/PER REVASC W/TLA	\$1,697.00
37229	TIB/PER REVASC W/ATHER	\$2,196.00
37230	TIB/PER REVASC W/STENT	\$2,162.00
37231	TIB/PER REVASC STENT & ATHER	\$2,352.00
37232	TIB/PER REVASC ADD-ON	\$617.00
37233	TIBPER REVASC W/ATHER ADD-ON	\$1,004.00
37234	REVSC OPN/PRQ TIB/PERO STENT	\$864.00
37235	TIB/PER REVASC STNT & ATHER	\$1,228.00
37236	OPEN/PERQ PLACE STENT 1ST	\$1,372.00
37236	OPEN/PERQ PLACE STENT 1ST	\$2,744.00
37237	OPEN/PERQ PLACE STENT EA ADD	\$648.00
37238	OPEN/PERQ PLACE STENT SAME	\$950.00
37238	OPEN/PERQ PLACE STENT SAME	\$1,900.00
37239	OPEN/PERQ PLACE STENT EA ADD	\$453.00
37239	OPEN/PERQ PLACE STENT EA ADD	\$906.00

CPT	Description	
		Std. Fee
37241	VASC EMBOLIZE/OCCLUDE VENOUS	\$1,361.00
37242	VASC EMBOLIZE/OCCLUDE ARTERY	\$1,488.00
37243	VASC EMBOLIZE/OCCLUDE ORGAN	\$1,756.00
37243	VASC EMBOLIZE/OCCLUDE ORGAN	\$3,512.00
37244	VASC EMBOLIZE/OCCLUDE BLEED	\$2,055.00
37246	TRLUML BALO ANGIOP 1ST ART	\$1,063.00
37247	TRLUML BALO ANGIOP ADDL ART	\$527.00
37248	TRLUML BALO ANGIOP 1ST VEIN	\$914.00
37248	TRLUML BALO ANGIOP 1ST VEIN	\$1,828.00
37249	TRLUML BALO ANGIOP ADDL VEIN	\$449.00
37250	IV US FIRST VESSEL ADD-ON	\$354.00
37251	IV US EACH ADD VESSEL ADD-ON	\$270.00
37252	INTRVASC US NONCORONARY 1ST	\$279.00
37253	INTRVASC US NONCORONARY ADDL	\$223.00
37620	REVISION OF MAJOR VEIN	\$2,109.00
38200	INJECTION FOR SPLEEN X-RAY	\$349.00
38220	DX BONE MARROW ASPIRATIONS	\$181.00
38221	DX BONE MARROW BIOPSIES	\$220.00
38221	DX BONE MARROW BIOPSIES	\$440.00
38222	DX BONE MARROW BX & ASPIR	\$239.00
38222	DX BONE MARROW BX & ASPIR	\$478.00
38505	NEEDLE BIOPSY LYMPH NODES	\$209.00
38505	NEEDLE BIOPSY LYMPH NODES	\$418.00
38505	NEEDLE BIOPSY LYMPH NODES	\$209.00
38790	INJECT FOR LYMPHATIC X-RAY	\$244.00
38792	RA TRACER ID OF SENTINL NODE	\$116.00
38792	RA TRACER ID OF SENTINL NODE	\$232.00
40800	DRAINAGE OF MOUTH LESION	\$385.00
41019	PLACE NEEDLES H&N FOR RT	\$1,386.00
42400	BIOPSY OF SALIVARY GLAND	\$162.00
42550	INJECTION FOR SALIVARY X-RAY	\$188.00
42660	DILATION OF SALIVARY DUCT	\$264.00
42806	BIOPSY OF UPPER NOSE/THROAT	\$387.00
43456	DILATE ESOPHAGUS	\$438.00
43752	NASAL/OROGASTRIC W/TUBE PLMT	\$121.00
43752	NASAL/OROGASTRIC W/TUBE PLMT	\$121.00
43760	CHANGE GASTROSTOMY TUBE	\$140.00
43761	REPOSITION GASTROSTOMY TUBE	\$305.00
43762	RPLC GTUBE NO REVJ TRC	\$113.00
43763	RPLC GTUBE REVJ GSTRST TRC	\$246.00
44015	INSERT NEEDLE CATH BOWEL	\$427.00
44373	SMALL BOWEL ENDOSCOPY	\$593.00
44500	INTRO GASTROINTESTINAL TUBE	\$73.00
44901	DRAIN APP ABSCESS PERCUT	\$516.00
45100	BIOPSY OF RECTUM	\$874.00
45303	PROCTOSIGMOIDOSCOPY DILATE	\$273.00
47000	NEEDLE BIOPSY OF LIVER	\$305.00
47000	NEEDLE BIOPSY OF LIVER	\$305.00
47000	NEEDLE BIOPSY OF LIVER	\$305.00
47001	NEEDLE BIOPSY LIVER ADD-ON	\$311.00

CPT	Description	
		Std. Fee
47011	PERCUT DRAIN LIVER LESION	\$718.00
47011	PERCUT DRAIN LIVER LESION	\$718.00
47015	INJECT/ASPIRATE LIVER CYST	\$3,391.00
47382	PERCUT ABLATE LIVER RF	\$2,296.00
47383	PERQ ABLTJ LVR CRYOABLATION	\$1,459.00
47490	INCISION OF GALLBLADDER	\$970.00
47500	INJECTION FOR LIVER X-RAYS	\$391.00
47500	INJECTION FOR LIVER X-RAYS	\$391.00
47505	INJECTION FOR LIVER X-RAYS	\$261.00
47505	INJECTION FOR LIVER X-RAYS	\$261.00
47510	INSERT CATHETER BILE DUCT	\$1,132.00
47511	INSERT BILE DUCT DRAIN	\$1,405.00
47511	INSERT BILE DUCT DRAIN	\$1,405.00
47525	CHANGE BILE DUCT CATHETER	\$772.00
47530	REVISE/REINSERT BILE TUBE	\$768.00
47531	INJECTION FOR CHOLANGIOGRAM	\$285.00
47532	INJECTION FOR CHOLANGIOGRAM	\$645.00
47533	PLMT BILIARY DRAINAGE CATH	\$913.00
47534	PLMT BILIARY DRAINAGE CATH	\$1,212.00
47535	CONVERSION EXT BIL DRG CATH	\$697.00
47536	EXCHANGE BILIARY DRG CATH	\$439.00
47536	EXCHANGE BILIARY DRG CATH	\$878.00
47537	REMOVAL BILIARY DRG CATH	\$296.00
47538	PERQ PLMT BILE DUCT STENT	\$982.00
47539	PERQ PLMT BILE DUCT STENT	\$1,328.00
47540	PERQ PLMT BILE DUCT STENT	\$1,586.00
47541	PLMT ACCESS BIL TREE SM BWL	\$844.00
47542	DILATE BILIARY DUCT/AMPULLA	\$400.00
47543	ENDOLUMINAL BX BILIARY TREE	\$503.00
47544	REMOVAL DUCT GLBLDR CALCULI	\$644.00
47552	BILIARY ENDO PERQ DX W/SPECI	\$928.00
47553	BILIARY ENDOSCOPY THRU SKIN	\$919.00
47555	BILIARY ENDOSCOPY THRU SKIN	\$1,100.00
47555	BILIARY ENDOSCOPY THRU SKIN	\$1,100.00
47556	BILIARY ENDOSCOPY THRU SKIN	\$1,251.00
47630	REMOVE BILE DUCT STONE	\$1,344.00
47801	PLACEMENT BILE DUCT SUPPORT	\$2,958.00
48102	NEEDLE BIOPSY PANCREAS	\$722.00
48511	DRAIN PANCREATIC PSEUDOCYST	\$775.00
49021	DRAIN ABDOMINAL ABSCESS	\$841.00
49021	DRAIN ABDOMINAL ABSCESS	\$841.00
49041	DRAIN PERCUT ABDOM ABSCESS	\$775.00
49061	DRAIN PERCUT RETROPER ABSC	\$718.00
49080	PUNCTURE PERITONEAL CAVITY	\$246.00
49081	REMOVAL OF ABDOMINAL FLUID	\$225.00
49082	ABD PARACENTESIS	\$219.00
49083	ABD PARACENTESIS W/IMAGING	\$322.00
49083	ABD PARACENTESIS W/IMAGING	\$322.00
49180	BIOPSY ABDOMINAL MASS	\$255.00
49185	SCLEROTX FLUID COLLECTION	\$366.00

CPT	Description	
		Std. Fee
49400	AIR INJECTION INTO ABDOMEN	\$280.00
49405	IMAGE CATH FLUID COLXN VISC	\$631.00
49406	IMAGE CATH FLUID PERI/RETRO	\$631.00
49407	IMAGE CATH FLUID TRNS/VGNL	\$678.00
49411	INS MARK ABD/PEL FOR RT PERQ	\$588.00
49418	INSERT TUN IP CATH PERC	\$651.00
49419	INSERT TUN IP CATH W/PORT	\$1,313.00
49422	REMOVE TUNNELED IP CATH	\$1,129.00
49423	EXCHANGE DRAINAGE CATHETER	\$215.00
49424	ASSESS CYST CONTRAST INJECT	\$114.00
49424	ASSESS CYST CONTRAST INJECT	\$114.00
49427	INJECTION ABDOMINAL SHUNT	\$138.00
49440	PLACE GASTROSTOMY TUBE PERC	\$659.00
49441	PLACE DUOD/JEJ TUBE PERC	\$764.00
49442	PLACE CECOSTOMY TUBE PERC	\$647.00
49446	CHANGE G-TUBE TO G-J PERC	\$486.00
49450	REPLACE G/C TUBE PERC	\$201.00
49450	REPLACE G/C TUBE PERC	\$402.00
49451	REPLACE DUOD/JEJ TUBE PERC	\$272.00
49452	REPLACE G-J TUBE PERC	\$418.00
49460	FIX G/COLON TUBE W/DEVICE	\$144.00
49465	FLUORO EXAM OF G/COLON TUBE	\$93.00
50021	RENAL ABSCESS PERCUT DRAIN	\$1,362.00
50200	RENAL BIOPSY PERQ	\$421.00
50200	RENAL BIOPSY PERQ	\$842.00
50200	RENAL BIOPSY PERQ	\$421.00
50382	CHANGE URETER STENT PERCUT	\$807.00
50382	CHANGE URETER STENT PERCUT	\$1,614.00
50384	REMOVE URETER STENT PERCUT	\$733.00
50384	REMOVE URETER STENT PERCUT	\$1,466.00
50385	CHANGE STENT VIA TRANSURETH	\$689.00
50386	REMOVE STENT VIA TRANSURETH	\$523.00
50387	CHANGE NEPHROURETERAL CATH	\$290.00
50387	CHANGE NEPHROURETERAL CATH	\$580.00
50389	REMOVE RENAL TUBE W/FLUORO	\$162.00
50389	REMOVE RENAL TUBE W/FLUORO	\$324.00
50390	DRAINAGE OF KIDNEY LESION	\$288.00
50390	DRAINAGE OF KIDNEY LESION	\$576.00
50392	INSERT KIDNEY DRAIN	\$1,758.00
50392	INSERT KIDNEY DRAIN	\$3,516.00
50392	INSERT KIDNEY DRAIN	\$1,758.00
50393	INSERT URETERAL TUBE	\$2,188.00
50393	INSERT URETERAL TUBE	\$4,376.00
50394	INJECTION FOR KIDNEY X-RAY	\$424.00
50394	INJECTION FOR KIDNEY X-RAY	\$848.00
50395	CREATE PASSAGE TO KIDNEY	\$530.00
50398	CHANGE KIDNEY TUBE	\$466.00
50398	CHANGE KIDNEY TUBE	\$932.00
50430	NJX PX NFROSGRM &/URTRGRM	\$496.00
50431	NJX PX NFROSGRM &/URTRGRM	\$195.00

CPT	Description	
		Std. Fee
50431	NJX PX NFROSGRM &/URTRGRM	\$390.00
50432	PLMT NEPHROSTOMY CATHETER	\$657.00
50432	PLMT NEPHROSTOMY CATHETER	\$1,314.00
50433	PLMT NEPHROURETERAL CATHETER	\$810.00
50433	PLMT NEPHROURETERAL CATHETER	\$1,620.00
50434	CONVERT NEPHROSTOMY CATHETER	\$621.00
50434	CONVERT NEPHROSTOMY CATHETER	\$1,242.00
50435	EXCHANGE NEPHROSTOMY CATH	\$300.00
50435	EXCHANGE NEPHROSTOMY CATH	\$600.00
50436	DILAT XST TRC NDURLGC PX	\$448.00
50437	DILAT XST TRC NEW ACCESS RCS	\$748.00
50592	PERC RF ABLATE RENAL TUMOR	\$1,072.00
50593	PERC CRYO ABLATE RENAL TUM	\$1,422.00
50606	ENDOLUMINAL BX URTR RNL PLVS	\$470.00
50684	INJECTION FOR URETER X-RAY	\$147.00
50688	CHANGE OF URETER TUBE/STENT	\$233.00
50690	INJECTION FOR URETER X-RAY	\$207.00
50690	INJECTION FOR URETER X-RAY	\$207.00
50693	PLMT URETERAL STENT PRQ	\$649.00
50693	PLMT URETERAL STENT PRQ	\$1,298.00
50694	PLMT URETERAL STENT PRQ	\$840.00
50695	PLMT URETERAL STENT PRQ	\$1,066.00
50695	PLMT URETERAL STENT PRQ	\$2,132.00
50705	URETERAL EMBOLIZATION/OCCL	\$601.00
50706	BALLOON DILATE URTRL STRIX	\$559.00
50706	BALLOON DILATE URTRL STRIX	\$1,118.00
51100	DRAIN BLADDER BY NEEDLE	\$116.00
51101	DRAIN BLADDER BY TROCAR/CATH	\$154.00
51102	DRAIN BL W/CATH INSERTION	\$428.00
51600	INJECTION FOR BLADDER X-RAY	\$132.00
51600	INJECTION FOR BLADDER X-RAY	\$132.00
51610	INJECTION FOR BLADDER X-RAY	\$188.00
51701	INSERT BLADDER CATHETER	\$82.00
51702	INSERT TEMP BLADDER CATH	\$89.00
51705	CHANGE OF BLADDER TUBE	\$152.00
51710	CHANGE OF BLADDER TUBE	\$235.00
54235	PENILE INJECTION	\$215.00
55000	DRAINAGE OF HYDROCELE	\$250.00
55700	BIOPSY OF PROSTATE	\$411.00
55876	PLACE RT DEVICE/MARKER PROS	\$295.00
58340	CATHETER FOR HYSTEROGRAPHY	\$168.00
58340	CATHETER FOR HYSTEROGRAPHY	\$168.00
58345	REOPEN FALLOPIAN TUBE	\$788.00
60100	BIOPSY OF THYROID	\$234.00
60100	BIOPSY OF THYROID	\$234.00
60300	ASPIR/INJ THYROID CYST	\$148.00
6030F	MAX STERILE BARRIERS FLWD	\$0.00
61055	INJECTION INTO BRAIN CANAL	\$357.00
61070	BRAIN CANAL SHUNT PROCEDURE	\$170.00
61623	ENDOVASC TEMPORARY VESSEL OCCL	\$1,702.00

CPT	Description	
		Std. Fee
61624	TRANSCATH OCCLUSION CNS	\$3,421.00
61626	TRANSCATH OCCLUSION NON-CNS	\$2,573.00
61645	PERQ ART M-THROMBECT &/NFS	\$2,331.00
61650	EVASC PRLNG ADMN RX AGNT 1ST	\$1,553.00
61651	EVASC PRLNG ADMN RX AGNT ADD	\$660.00
62267	INTERDISCAL PERQ ASPIR DX	\$472.00
62267	INTERDISCAL PERQ ASPIR DX	\$472.00
62270	DX LMBR SPI PNXR	\$230.00
62272	THER SPI PNXR DRG CSF	\$247.00
62284	INJECTION FOR MYELOGRAM	\$254.00
62287	PERCUTANEOUS DISKECTOMY	\$1,664.00
62290	NJX PX DISCOGRAPHY LUMBAR	\$508.00
62290	NJX PX DISCOGRAPHY LUMBAR	\$508.00
62291	NJX PX DISCOGRAPHY CRV/THRC	\$502.00
62302	MYELOGRAPHY LUMBAR INJECTION	\$363.00
62303	MYELOGRAPHY LUMBAR INJECTION	\$368.00
62304	MYELOGRAPHY LUMBAR INJECTION	\$357.00
62305	MYELOGRAPHY LUMBAR INJECTION	\$373.00
62310	INJECT SPINE CERV/THORACIC	\$319.00
62311	INJECT SPINE LUMBAR/SACRAL	\$263.00
62311	INJECT SPINE LUMBAR/SACRAL	\$263.00
62320	NJX INTERLAMINAR CRV/THRC	\$301.00
62321	NJX INTERLAMINAR CRV/THRC	\$325.00
62322	NJX INTERLAMINAR LMBR/SAC	\$259.00
62323	NJX INTERLAMINAR LMBR/SAC	\$296.00
62324	NJX INTERLAMINAR CRV/THRC	\$277.00
62325	NJX INTERLAMINAR CRV/THRC	\$319.00
62326	NJX INTERLAMINAR LMBR/SAC	\$271.00
62327	NJX INTERLAMINAR LMBR/SAC	\$289.00
62328	DX LMBR SPI PNXR W/FLUOR/CT	\$272.00
62329	THER SPI PNXR CSF FLUOR/CT	\$337.00
63303	REMOV VERT XDRL BDY LMBR/SAC	\$6,904.00
63600	REMOVE SPINAL CORD LESION	\$2,667.00
64400	NJX AA&/STRD TRIGEMINAL NRV	\$208.00
64420	NJX AA&/STRD NTRCOST NRV 1	\$176.00
64421	NJX AA&/STRD NTRCOST NRV EA	\$270.00
64461	PVB THORACIC SINGLE INJ SITE	\$256.00
64462	PVB THORACIC 2ND+ INJ SITE	\$162.00
64463	PVB THORACIC CONT INFUSION	\$249.00
64479	NJX AA&/STRD TFRM EPI C/T 1	\$386.00
64480	NJX AA&/STRD TFRM EPI C/T EA	\$185.00
64483	NJX AA&/STRD TFRM EPI L/S 1	\$331.00
64483	NJX AA&/STRD TFRM EPI L/S 1	\$662.00
64490	INJ PARAVERT F JNT C/T 1 LEV	\$313.00
64493	INJ PARAVERT F JNT L/S 1 LEV	\$268.00
64493	INJ PARAVERT F JNT L/S 1 LEV	\$536.00
64517	N BLOCK INJ HYPOGAS PLXS	\$368.00
64530	N BLOCK INJ CELIAC PELUS	\$272.00
64646	CHEMODENERV TRUNK MUSC 1-5	\$388.00
68850	INJECTION FOR TEAR SAC X-RAY	\$161.00

CPT	Description	
		Std. Fee
70010	CONTRAST X-RAY OF BRAIN	\$180.00
70030	X-RAY EYE FOR FOREIGN BODY	\$25.00
70030	X-RAY EYE FOR FOREIGN BODY	\$25.00
70100	X-RAY EXAM OF JAW <4VIEWS	\$27.00
70110	X-RAY EXAM OF JAW 4/> VIEWS	\$37.00
70110	X-RAY EXAM OF JAW 4/> VIEWS	\$37.00
70120	X-RAY EXAM OF MASTOIDS	\$27.00
70130	X-RAY EXAM OF MASTOIDS	\$50.00
70134	X-RAY EXAM OF MIDDLE EAR	\$51.00
70140	X-RAY EXAM OF FACIAL BONES	\$31.00
70150	X-RAY EXAM OF FACIAL BONES	\$39.00
70160	X-RAY EXAM OF NASAL BONES	\$26.00
70160	X-RAY EXAM OF NASAL BONES	\$26.00
70170	X-RAY EXAM OF TEAR DUCT	\$44.00
70190	X-RAY EXAM OF EYE SOCKETS	\$33.00
70200	X-RAY EXAM OF EYE SOCKETS	\$41.00
70200	X-RAY EXAM OF EYE SOCKETS	\$41.00
70210	X-RAY EXAM OF SINUSES	\$26.00
70220	X-RAY EXAM OF SINUSES	\$37.00
70240	X-RAY EXAM PITUITARY SADDLE	\$29.00
70250	X-RAY EXAM OF SKULL	\$37.00
70250	X-RAY EXAM OF SKULL	\$37.00
7025F	PT INFOSYS ALARM 4 NXT MAMMO	\$0.00
70260	X-RAY EXAM OF SKULL	\$51.00
70328	X-RAY EXAM OF JAW JOINT	\$27.00
70330	X-RAY EXAM OF JAW JOINTS	\$37.00
70332	X-RAY EXAM OF JAW JOINT	\$91.00
70336	MAGNETIC IMAGE JAW JOINT	\$216.00
70355	PANORAMIC X-RAY OF JAWS	\$33.00
70360	X-RAY EXAM OF NECK	\$25.00
70370	THROAT X-RAY & FLUOROSCOPY	\$47.00
70371	SPEECH EVALUATION COMPLEX	\$125.00
70380	X-RAY EXAM OF SALIVARY GLAND	\$27.00
70390	X-RAY EXAM OF SALIVARY DUCT	\$55.00
70450	CT HEAD/BRAIN W/O DYE	\$125.00
70450	CT HEAD/BRAIN W/O DYE	\$125.00
70460	CT HEAD/BRAIN W/DYE	\$165.00
70470	CT HEAD/BRAIN W/O & W/DYE	\$187.00
70480	CT ORBIT/EAR/FOSSA W/O DYE	\$188.00
70481	CT ORBIT/EAR/FOSSA W/DYE	\$202.00
70482	CT ORBIT/EAR/FOSSA W/O&W/DYE	\$212.00
70486	CT MAXILLOFACIAL W/O DYE	\$125.00
70486	CT MAXILLOFACIAL W/O DYE	\$125.00
70487	CT MAXILLOFACIAL W/DYE	\$165.00
70488	CT MAXILLOFACIAL W/O & W/DYE	\$186.00
70490	CT SOFT TISSUE NECK W/O DYE	\$188.00
70491	CT SOFT TISSUE NECK W/DYE	\$203.00
70492	CT SFT TSUE NCK W/O & W/DYE	\$213.00
70496	CT ANGIOGRAPHY HEAD	\$256.00
70498	CT ANGIOGRAPHY NECK	\$256.00

CPT	Description	
		Std. Fee
70540	MRI ORBIT/FACE/NECK W/O DYE	\$197.00
70542	MRI ORBIT/FACE/NECK W/DYE	\$237.00
70543	MRI ORBT/FAC/NCK W/O & W/DYE	\$314.00
70543	MRI ORBT/FAC/NCK W/O & W/DYE	\$314.00
70544	MR ANGIOGRAPHY HEAD W/O DYE	\$177.00
70544	MR ANGIOGRAPHY HEAD W/O DYE	\$177.00
70545	MR ANGIOGRAPHY HEAD W/DYE	\$176.00
70546	MR ANGIOGRAPH HEAD W/O&W/DYE	\$264.00
70547	MR ANGIOGRAPHY NECK W/O DYE	\$177.00
70548	MR ANGIOGRAPHY NECK W/DYE	\$177.00
70549	MR ANGIOGRAPH NECK W/O&W/DYE	\$264.00
70551	MRI BRAIN STEM W/O DYE	\$217.00
70552	MRI BRAIN STEM W/DYE	\$261.00
70553	MRI BRAIN STEM W/O & W/DYE	\$336.00
70554	FMRI BRAIN BY TECH	\$311.00
70555	FMRI BRAIN BY PHYS/PSYCH	\$370.00
71040	CONTRAST X-RAY OF BRONCHI	\$96.00
71045	X-RAY EXAM CHEST 1 VIEW	\$58.00
71045	X-RAY EXAM CHEST 1 VIEW	\$28.00
71046	X-RAY EXAM CHEST 2 VIEWS	\$87.00
71046	X-RAY EXAM CHEST 2 VIEWS	\$33.00
71047	X-RAY EXAM CHEST 3 VIEWS	\$111.00
71047	X-RAY EXAM CHEST 3 VIEWS	\$42.00
71048	X-RAY EXAM CHEST 4+ VIEWS	\$119.00
71048	X-RAY EXAM CHEST 4+ VIEWS	\$48.00
71060	CONTRAST X-RAY OF BRONCHI	\$120.00
71090	X-RAY & PACEMAKER INSERTION	\$88.00
71090	X-RAY & PACEMAKER INSERTION	\$88.00
71100	X-RAY EXAM RIBS UNI 2 VIEWS	\$33.00
71101	X-RAY EXAM UNILAT RIBS/CHEST	\$40.00
71110	X-RAY EXAM RIBS BIL 3 VIEWS	\$40.00
71111	X-RAY EXAM RIBS/CHEST4/> VWS	\$48.00
71120	X-RAY EXAM BREASTBONE 2/>VWS	\$30.00
71130	X-RAY STRENOCLAVIC JT 3/>VWS	\$33.00
71250	CT THORAX DX C-	\$150.00
71260	CT THORAX DX C+	\$183.00
71270	CT THORAX DX C-/C+	\$202.00
71271	CT THORAX LUNG CANCER SCR C-	\$156.56
71275	CT ANGIOGRAPHY CHEST	\$266.00
71275	CT ANGIOGRAPHY CHEST	\$266.00
71550	MRI CHEST W/O DYE	\$214.00
71551	MRI CHEST W/DYE	\$253.00
71552	MRI CHEST W/O & W/DYE	\$332.00
71555	MRI ANGIO CHEST W OR W/O DYE	\$262.00
72010	X-RAY EXAM SPINE AP&LAT	\$71.00
72020	X-RAY EXAM OF SPINE 1 VIEW	\$23.00
72020	X-RAY EXAM OF SPINE 1 VIEW	\$23.00
72040	X-RAY EXAM NECK SPINE 2-3 VW	\$33.00
72040	X-RAY EXAM NECK SPINE 2-3 VW	\$33.00
72050	X-RAY EXAM NECK SPINE 4/5VWS	\$46.00

CPT	Description	
		Std. Fee
72052	X-RAY EXAM NECK SPINE 6/>VWS	\$53.00
72069	X-RAY EXAM TRUNK SPINE STAND	\$36.00
72069	X-RAY EXAM TRUNK SPINE STAND	\$36.00
72070	X-RAY EXAM THORAC SPINE 2VWS	\$33.00
72072	X-RAY EXAM THORAC SPINE 3VWS	\$32.00
72074	X-RAY EXAM THORAC SPINE4/>VW	\$32.00
72080	X-RAY EXAM THORACOLMB 2/> VW	\$32.00
72080	X-RAY EXAM THORACOLMB 2/> VW	\$32.00
72081	X-RAY EXAM ENTIRE SPI 1 VW	\$39.00
72082	X-RAY EXAM ENTIRE SPI 2/3 VW	\$47.00
72083	X-RAY EXAM ENTIRE SPI 4/5 VW	\$51.00
72084	X-RAY EXAM ENTIRE SPI 6/> VW	\$60.00
72090	X-RAY EXAM SCLOIOSIS ERECT	\$46.00
72090	X-RAY EXAM SCLOIOSIS ERECT	\$46.00
72100	X-RAY EXAM L-S SPINE 2/3 VWS	\$33.00
72100	X-RAY EXAM L-S SPINE 2/3 VWS	\$33.00
72110	X-RAY EXAM L-2 SPINE 4/>VWS	\$46.00
72114	X-RAY EXAM L-S SPINE BENDING	\$48.00
72120	X-RAY BEND ONLY L-S SPINE	\$33.00
72125	CT NECK SPINE W/O DYE	\$157.00
72125	CT NECK SPINE W/O DYE	\$157.00
72125	CT NECK SPINE W/O DYE	\$157.00
72126	CT NECK SPINE W/DYE	\$179.00
72127	CT NECK SPINE W/O & W/DYE	\$186.00
72128	CT CHEST SPINE W/O DYE	\$147.00
72128	CT CHEST SPINE W/O DYE	\$147.00
72129	CT CHEST SPINE W/DYE	\$179.00
72130	CT CHEST SPINE W/O & W/DYE	\$186.00
72131	CT LUMBAR SPINE W/O DYE	\$147.00
72131	CT LUMBAR SPINE W/O DYE	\$147.00
72132	CT LUMBAR SPINE W/DYE	\$179.00
72132	CT LUMBAR SPINE W/DYE	\$179.00
72133	CT LUMBAR SPINE W/O & W/DYE	\$186.00
72141	MRI NECK SPINE W/O DYE	\$218.00
72142	MRI NECK SPINE W/DYE	\$263.00
72146	MRI CHEST SPINE W/O DYE	\$218.00
72147	MRI CHEST SPINE W/DYE	\$261.00
72148	MRI LUMBAR SPINE W/O DYE	\$218.00
72149	MRI LUMBAR SPINE W/DYE	\$263.00
72156	MRI NECK SPINE W/O & W/DYE	\$336.00
72157	MRI CHEST SPINE W/O & W/DYE	\$336.00
72158	MRI LUMBAR SPINE W/O & W/DYE	\$336.00
72159	MR ANGIO SPINE W/O&W/DYE	\$265.00
72170	X-RAY EXAM OF PELVIS	\$26.00
72170	X-RAY EXAM OF PELVIS	\$26.00
72190	X-RAY EXAM OF PELVIS	\$32.00
72190	X-RAY EXAM OF PELVIS	\$32.00
72191	CT ANGIOGRAPH PELV W/O&W/DYE	\$265.00
72192	CT PELVIS W/O DYE	\$160.00
72192	CT PELVIS W/O DYE	\$160.00

CPT	Description	
		Std. Fee
72193	CT PELVIS W/DYE	\$171.00
72194	CT PELVIS W/O & W/DYE	\$179.00
72195	MRI PELVIS W/O DYE	\$215.00
72196	MRI PELVIS W/DYE	\$255.00
72197	MRI PELVIS W/O & W/DYE	\$332.00
72198	MR ANGIO PELVIS W/O & W/DYE	\$262.00
72200	X-RAY EXAM SI JOINTS	\$26.00
72202	X-RAY EXAM SI JOINTS 3/> VWS	\$28.00
72220	X-RAY EXAM SACRUM TAILBONE	\$26.00
72220	X-RAY EXAM SACRUM TAILBONE	\$26.00
72240	MYELOGRAPHY NECK SPINE	\$134.00
72240	MYELOGRAPHY NECK SPINE	\$134.00
72240	MYELOGRAPHY NECK SPINE	\$134.00
72255	MYELOGRAPHY THORACIC SPINE	\$136.00
72255	MYELOGRAPHY THORACIC SPINE	\$136.00
72265	MYELOGRAPHY L-S SPINE	\$122.00
72265	MYELOGRAPHY L-S SPINE	\$122.00
72270	MYELOGPHY 2/> SPINE REGIONS	\$196.00
72270	MYELOGPHY 2/> SPINE REGIONS	\$196.00
72285	DISCOGRAPHY CERV/THOR SPINE	\$177.00
72291	PERQ VERTE/SACROPLSTY FLUOR	\$196.00
72291	PERQ VERTE/SACROPLSTY FLUOR	\$196.00
72291	PERQ VERTE/SACROPLSTY FLUOR	\$196.00
72292	PERQ VERTE/SACROPLSTY CT	\$201.00
72295	X-RAY OF LOWER SPINE DISK	\$127.00
72295	X-RAY OF LOWER SPINE DISK	\$127.00
72295	X-RAY OF LOWER SPINE DISK	\$127.00
73000	X-RAY EXAM OF COLLAR BONE	\$25.00
73000	X-RAY EXAM OF COLLAR BONE	\$25.00
73010	X-RAY EXAM OF SHOULDER BLADE	\$27.00
73020	X-RAY EXAM OF SHOULDER	\$23.00
73020	X-RAY EXAM OF SHOULDER	\$23.00
73030	X-RAY EXAM OF SHOULDER	\$28.00
73030	X-RAY EXAM OF SHOULDER	\$28.00
73040	CONTRAST X-RAY OF SHOULDER	\$80.00
73040	CONTRAST X-RAY OF SHOULDER	\$80.00
73050	X-RAY EXAM OF SHOULDERS	\$31.00
73060	X-RAY EXAM OF HUMERUS	\$25.00
73060	X-RAY EXAM OF HUMERUS	\$25.00
73060	X-RAY EXAM OF HUMERUS	\$25.00
73070	X-RAY EXAM OF ELBOW	\$24.00
73070	X-RAY EXAM OF ELBOW	\$24.00
73070	X-RAY EXAM OF ELBOW	\$24.00
73070	X-RAY EXAM OF ELBOW	\$24.00
73080	X-RAY EXAM OF ELBOW	\$26.00
73080	X-RAY EXAM OF ELBOW	\$26.00
73085	CONTRAST X-RAY OF ELBOW	\$84.00
73085	CONTRAST X-RAY OF ELBOW	\$84.00
73090	X-RAY EXAM OF FOREARM	\$25.00
73090	X-RAY EXAM OF FOREARM	\$25.00

CPT	Description	
		Std. Fee
73090	X-RAY EXAM OF FOREARM	\$25.00
73092	X-RAY EXAM OF ARM INFANT	\$24.00
73100	X-RAY EXAM OF WRIST	\$25.00
73100	X-RAY EXAM OF WRIST	\$25.00
73100	X-RAY EXAM OF WRIST	\$25.00
73110	X-RAY EXAM OF WRIST	\$26.00
73110	X-RAY EXAM OF WRIST	\$26.00
73115	CONTRAST X-RAY OF WRIST	\$83.00
73120	X-RAY EXAM OF HAND	\$25.00
73120	X-RAY EXAM OF HAND	\$25.00
73120	X-RAY EXAM OF HAND	\$25.00
73120	X-RAY EXAM OF HAND	\$25.00
73130	X-RAY EXAM OF HAND	\$26.00
73130	X-RAY EXAM OF HAND	\$26.00
73130	X-RAY EXAM OF HAND	\$26.00
73140	X-RAY EXAM OF FINGER(S)	\$20.00
73140	X-RAY EXAM OF FINGER(S)	\$20.00
73140	X-RAY EXAM OF FINGER(S)	\$20.00
73200	CT UPPER EXTREMITY W/O DYE	\$147.00
73201	CT UPPER EXTREMITY W/DYE	\$171.00
73201	CT UPPER EXTREMITY W/DYE	\$171.00
73202	CT UPPR EXTREMITY W/O&W/DYE	\$179.00
73206	CT ANGIO UPR EXTRM W/O&W/DYE	\$263.00
73218	MRI UPPER EXTREMITY W/O DYE	\$198.00
73218	MRI UPPER EXTREMITY W/O DYE	\$198.00
73218	MRI UPPER EXTREMITY W/O DYE	\$198.00
73219	MRI UPPER EXTREMITY W/DYE	\$238.00
73220	MRI UPPR EXTREMITY W/O&W/DYE	\$315.00
73220	MRI UPPR EXTREMITY W/O&W/DYE	\$315.00
73221	MRI JOINT UPR EXTREM W/O DYE	\$199.00
73221	MRI JOINT UPR EXTREM W/O DYE	\$199.00
73222	MRI JOINT UPR EXTREM W/DYE	\$238.00
73223	MRI JOINT UPR EXTR W/O&W/DYE	\$315.00
73225	MR ANGIO UPR EXTR W/O&W/DYE	\$251.00
73500	X-RAY EXAM OF HIP	\$26.00
73500	X-RAY EXAM OF HIP	\$26.00
73501	X-RAY EXAM HIP UNI 1 VIEW	\$28.00
73502	X-RAY EXAM HIP UNI 2-3 VIEWS	\$33.00
73503	X-RAY EXAM HIP UNI 4/> VIEWS	\$42.00
73510	X-RAY EXAM OF HIP	\$35.00
73510	X-RAY EXAM OF HIP	\$35.00
73520	X-RAY EXAM OF HIPS	\$43.00
73520	X-RAY EXAM OF HIPS	\$43.00
73520	X-RAY EXAM OF HIPS	\$43.00
73521	X-RAY EXAM HIPS BI 2 VIEWS	\$34.00
73522	X-RAY EXAM HIPS BI 3-4 VIEWS	\$44.00
73523	X-RAY EXAM HIPS BI 5/> VIEWS	\$47.00
73525	CONTRAST X-RAY OF HIP	\$84.00
73525	CONTRAST X-RAY OF HIP	\$84.00
73525	CONTRAST X-RAY OF HIP	\$84.00

CPT	Description	Std. Fee
73530	X-RAY EXAM OF HIP	\$47.00
73540	X-RAY EXAM OF PELVIS & HIPS	\$34.00
73540	X-RAY EXAM OF PELVIS & HIPS	\$34.00
73542	X-RAY EXAM SACROILIAC JOINT	\$76.00
73550	X-RAY EXAM OF THIGH	\$26.00
73550	X-RAY EXAM OF THIGH	\$26.00
73550	X-RAY EXAM OF THIGH	\$26.00
73551	X-RAY EXAM OF FEMUR 1	\$25.00
73552	X-RAY EXAM OF FEMUR 2/>	\$28.00
73560	X-RAY EXAM OF KNEE 1 OR 2	\$25.00
73560	X-RAY EXAM OF KNEE 1 OR 2	\$25.00
73562	X-RAY EXAM OF KNEE 3	\$28.00
73562	X-RAY EXAM OF KNEE 3	\$28.00
73564	X-RAY EXAM KNEE 4 OR MORE	\$33.00
73564	X-RAY EXAM KNEE 4 OR MORE	\$33.00
73565	X-RAY EXAM OF KNEES	\$26.00
73580	CONTRAST X-RAY OF KNEE JOINT	\$83.00
73590	X-RAY EXAM OF LOWER LEG	\$25.00
73590	X-RAY EXAM OF LOWER LEG	\$25.00
73590	X-RAY EXAM OF LOWER LEG	\$25.00
73592	X-RAY EXAM OF LEG INFANT	\$24.00
73600	X-RAY EXAM OF ANKLE	\$25.00
73600	X-RAY EXAM OF ANKLE	\$25.00
73600	X-RAY EXAM OF ANKLE	\$25.00
73610	X-RAY EXAM OF ANKLE	\$26.00
73610	X-RAY EXAM OF ANKLE	\$26.00
73615	CONTRAST X-RAY OF ANKLE	\$84.00
73620	X-RAY EXAM OF FOOT	\$23.00
73620	X-RAY EXAM OF FOOT	\$23.00
73620	X-RAY EXAM OF FOOT	\$23.00
73630	X-RAY EXAM OF FOOT	\$25.00
73630	X-RAY EXAM OF FOOT	\$25.00
73630	X-RAY EXAM OF FOOT	\$25.00
73650	X-RAY EXAM OF HEEL	\$24.00
73650	X-RAY EXAM OF HEEL	\$24.00
73650	X-RAY EXAM OF HEEL	\$24.00
73660	X-RAY EXAM OF TOE(S)	\$20.00
73660	X-RAY EXAM OF TOE(S)	\$20.00
73660	X-RAY EXAM OF TOE(S)	\$20.00
73700	CT LOWER EXTREMITY W/O DYE	\$147.00
73700	CT LOWER EXTREMITY W/O DYE	\$147.00
73701	CT LOWER EXTREMITY W/DYE	\$171.00
73701	CT LOWER EXTREMITY W/DYE	\$171.00
73702	CT LWR EXTREMITY W/O&W/DYE	\$178.00
73706	CT ANGIO LWR EXTR W/O&W/DYE	\$278.00
73718	MRI LOWER EXTREMITY W/O DYE	\$198.00
73719	MRI LOWER EXTREMITY W/DYE	\$237.00
73720	MRI LWR EXTREMITY W/O&W/DYE	\$315.00
73721	MRI JNT OF LWR EXTRE W/O DYE	\$199.00
73721	MRI JNT OF LWR EXTRE W/O DYE	\$199.00

CPT	Description	
		Std. Fee
73722	MRI JOINT OF LWR EXTR W/DYE	\$238.00
73723	MRI JOINT LWR EXTR W/O&W/DYE	\$315.00
73723	MRI JOINT LWR EXTR W/O&W/DYE	\$315.00
73725	MR ANG LWR EXT W OR W/O DYE	\$264.00
74018	X-RAY EXAM ABDOMEN 1 VIEW	\$78.00
74018	X-RAY EXAM ABDOMEN 1 VIEW	\$28.00
74019	X-RAY EXAM ABDOMEN 2 VIEWS	\$95.00
74019	X-RAY EXAM ABDOMEN 2 VIEWS	\$35.00
74021	X-RAY EXAM ABDOMEN 3+ VIEWS	\$112.00
74021	X-RAY EXAM ABDOMEN 3+ VIEWS	\$42.00
74022	X-RAY EXAM COMPLETE ABDOMEN	\$47.00
74022	X-RAY EXAM COMPLETE ABDOMEN	\$47.00
74150	CT ABDOMEN W/O DYE	\$175.00
74160	CT ABDOMEN W/DYE	\$187.00
74170	CT ABDOMEN W/O & W/DYE	\$206.00
74174	CT ANGIO ABD&PELV W/O&W/DYE	\$321.00
74175	CT ANGIO ABDOM W/O & W/DYE	\$265.00
74176	CT ABD & PELVIS W/O CONTRAST	\$256.00
74177	CT ABD & PELV W/CONTRAST	\$267.00
74177	CT ABD & PELV W/CONTRAST	\$267.00
74178	CT ABD & PELV 1/> REGNS	\$295.00
74181	MRI ABDOMEN W/O DYE	\$214.00
74181	MRI ABDOMEN W/O DYE	\$214.00
74182	MRI ABDOMEN W/DYE	\$254.00
74183	MRI ABDOMEN W/O & W/DYE	\$332.00
74183	MRI ABDOMEN W/O & W/DYE	\$332.00
74185	MRI ANGIO ABDOM W ORW/O DYE	\$262.00
74190	X-RAY EXAM OF PERITONEUM	\$69.00
74210	X-RAY XM PHRNX&/CRV ESOPH C+	\$52.00
74220	X-RAY XM ESOPHAGUS 1CNTRST	\$68.00
74221	X-RAY XM ESOPHAGUS 2CNTRST	\$102.00
74230	X-RAY XM SWLNG FUNCJ C+	\$78.00
74230	X-RAY XM SWLNG FUNCJ C+	\$78.00
74240	X-RAY XM UPR GI TRC 1CNTRST	\$102.00
74240	X-RAY XM UPR GI TRC 1CNTRST	\$102.00
74241	X-RAYUPPER GI DELAY W/KUB	\$102.00
74245	X-RAY UPPER GI&SMALL INTEST	\$134.00
74246	X-RAY XM UPR GI TRC 2CNTRST	\$102.00
74247	CONTRST X-RAY UPPR GI TRACT	\$102.00
74248	X-RAY SM INT F-THRU STD	\$102.00
74249	CONTRST X-RAY UPPR GI TRACT	\$134.00
74250	X-RAY XM SM INT 1CNTRST STD	\$69.00
74251	X-RAY XM SM INT 2CNTRST STD	\$102.00
74260	X-RAY EXAM OF SMALL BOWEL	\$74.00
74261	CT COLONOGRAPHY DX	\$353.00
74262	CT COLONOGRAPHY DX W/DYE	\$367.00
74263	CT COLONOGRAPHY SCREENING	\$336.00
74270	X-RAY XM COLON 1CNTRST STD	\$102.00
74280	X-RAY XM COLON 2CNTRST STD	\$146.00
74283	THER NMA RDCTJ INTUS/OBSTR CJ	\$299.00

CPT	Description	
		Std. Fee
74290	CONTRAST X-RAY GALLBLADDER	\$47.00
74300	X-RAY BILE DUCTS/PANCREAS	\$53.00
74300	X-RAY BILE DUCTS/PANCREAS	\$53.00
74301	X-RAYS AT SURGERY ADD-ON	\$31.00
74301	X-RAYS AT SURGERY ADD-ON	\$31.00
74305	X-RAY BILE DUCTS/PANCREAS	\$69.00
74305	X-RAY BILE DUCTS/PANCREAS	\$69.00
74305	X-RAY BILE DUCTS/PANCREAS	\$69.00
74320	CONTRAST X-RAY OF BILE DUCTS	\$90.00
74320	CONTRAST X-RAY OF BILE DUCTS	\$90.00
74320	CONTRAST X-RAY OF BILE DUCTS	\$90.00
74327	X-RAY BILE STONE REMOVAL	\$114.00
74327	X-RAY BILE STONE REMOVAL	\$114.00
74328	X-RAY BILE DUCT ENDOSCOPY	\$104.00
74328	X-RAY BILE DUCT ENDOSCOPY	\$104.00
74329	X-RAY FOR PANCREAS ENDOSCOPY	\$105.00
74329	X-RAY FOR PANCREAS ENDOSCOPY	\$105.00
74330	X-RAY BILE/PANC ENDOSCOPY	\$133.00
74330	X-RAY BILE/PANC ENDOSCOPY	\$133.00
74340	X-RAY GUIDE FOR GI TUBE	\$79.00
74355	X-RAY GUIDE INTESTINAL TUBE	\$113.00
74360	X-RAY GUIDE GI DILATION	\$82.00
74363	X-RAY BILE DUCT DILATION	\$126.00
74363	X-RAY BILE DUCT DILATION	\$126.00
74400	UROGRAPHY IV +-KUB TOMOG	\$72.00
74400	UROGRAPHY IV +-KUB TOMOG	\$72.00
74410	UROGRAPHY NFS DRIP&/BOLUS	\$71.00
74415	UROGRAPHY NFS DRIP&/BLS W/NF	\$72.00
74420	UROGRAPHY RTRGR +-KUB	\$51.00
74420	UROGRAPHY RTRGR +-KUB	\$51.00
74425	UROGRAPHY ANTEGRADE RS&I	\$51.00
74425	UROGRAPHY ANTEGRADE RS&I	\$51.00
74425	UROGRAPHY ANTEGRADE RS&I	\$51.00
74430	CONTRAST X-RAY BLADDER	\$47.00
74430	CONTRAST X-RAY BLADDER	\$47.00
74445	X-RAY EXAM OF PENIS	\$159.00
74450	X-RAY URETHRA/BLADDER	\$48.00
74450	X-RAY URETHRA/BLADDER	\$48.00
74455	X-RAY URETHRA/BLADDER	\$48.00
74455	X-RAY URETHRA/BLADDER	\$48.00
74470	X-RAY EXAM OF KIDNEY LESION	\$77.00
74475	X-RAY CONTROL CATH INSERT	\$90.00
74475	X-RAY CONTROL CATH INSERT	\$90.00
74475	X-RAY CONTROL CATH INSERT	\$90.00
74480	X-RAY CONTROL CATH INSERT	\$90.00
74480	X-RAY CONTROL CATH INSERT	\$90.00
74480	X-RAY CONTROL CATH INSERT	\$90.00
74485	DILATION URTR/URT RS&I	\$76.00
74485	DILATION URTR/URT RS&I	\$76.00
74710	X-RAY MEASUREMENT OF PELVIS	\$50.00

CPT	Description	
		Std. Fee
74712	MRI FETAL SNGL/1ST GESTATION	\$441.00
74713	MRI FETAL EAADDL GESTATION	\$262.00
74740	X-RAY FEMALE GENITAL TRACT	\$55.00
74740	X-RAY FEMALE GENITAL TRACT	\$55.00
74742	X-RAY FALLOPIAN TUBE	\$87.00
75557	CARDIAC MRI FOR MORPH	\$338.00
75561	CARDIAC MRI FOR MORPH W/DYE	\$374.00
75563	CARD MRI W/STRESS IMG & DYE	\$430.00
75565	CARD MRI VELOC FLOW MAPPING	\$36.00
75571	CT HRT W/O DYE W/CA TEST	\$84.00
75572	CT HRT W/3D IMAGE	\$254.00
75573	CT HRT W/3D IMAGE CONGEN	\$369.00
75574	CT ANGIO HRT W/3D IMAGE	\$347.00
75600	CONTRAST EXAM THORACIC AORTA	\$71.00
75605	CONTRAST EXAM THORACIC AORTA	\$164.00
75625	CONTRAST EXAM ABDOMINL AORTA	\$164.00
75625	CONTRAST EXAM ABDOMINL AORTA	\$164.00
75630	X-RAY AORTA LEG ARTERIES	\$259.00
75635	CT ANGIO ABDOMINAL ARTERIES	\$350.00
75658	ARTERY X-RAYS ARM	\$188.00
75660	ARTERY X-RAYS HEAD & NECK	\$216.00
75662	ARTERY X-RAYS HEAD & NECK	\$271.00
75676	ARTERY X-RAYS NECK	\$216.00
75676	ARTERY X-RAYS NECK	\$216.00
75705	ARTERY X-RAYS SPINE	\$335.00
75705	ARTERY X-RAYS SPINE	\$335.00
75710	ARTERY X-RAYS ARM/LEG	\$166.00
75710	ARTERY X-RAYS ARM/LEG	\$166.00
75710	ARTERY X-RAYS ARM/LEG	\$166.00
75716	ARTERY X-RAYS ARMS/LEGS	\$190.00
75716	ARTERY X-RAYS ARMS/LEGS	\$190.00
75716	ARTERY X-RAYS ARMS/LEGS	\$190.00
75722	ARTERY X-RAYS KIDNEY	\$188.00
75724	ARTERY X-RAYS KIDNEYS	\$243.00
75726	ARTERY X-RAYS ABDOMEN	\$163.00
75726	ARTERY X-RAYS ABDOMEN	\$163.00
75731	ARTERY X-RAYS ADRENAL GLAND	\$167.00
75733	ARTERY X-RAYS ADRENALS	\$186.00
75736	ARTERY X-RAYS PELVIS	\$163.00
75736	ARTERY X-RAYS PELVIS	\$163.00
75741	ARTERY X-RAYS LUNG	\$186.00
75743	ARTERY X-RAYS LUNGS	\$237.00
75746	ARTERY X-RAYS LUNG	\$165.00
75756	ARTERY X-RAYS CHEST	\$165.00
75774	ARTERY X-RAY EACH VESSEL	\$52.00
75774	ARTERY X-RAY EACH VESSEL	\$52.00
75791	AV DIALYSIS SHUNT IMAGING	\$254.00
75801	LYMPH VESSEL X-RAY ARM/LEG	\$131.00
75803	LYMPH VESSEL X-RAY ARMS/LEGS	\$172.00
75805	LYMPH VESSEL X-RAY TRUNK	\$119.00

CPT	Description	
		Std. Fee
75807	LYMPH VESSEL X-RAY TRUNK	\$173.00
75809	NONVASCULAR SHUNT X-RAY	\$70.00
75810	VEIN X-RAY SPLEEN/LIVER	\$168.00
75820	VEIN X-RAY ARM/LEG	\$102.00
75820	VEIN X-RAY ARM/LEG	\$102.00
75822	VEIN X-RAY ARMS/LEGS	\$153.00
75825	VEIN X-RAY TRUNK	\$166.00
75825	VEIN X-RAY TRUNK	\$166.00
75827	VEIN X-RAY CHEST	\$166.00
75831	VEIN X-RAY KIDNEY	\$163.00
75833	VEIN X-RAY KIDNEYS	\$213.00
75840	VEIN X-RAY ADRENAL GLAND	\$167.00
75842	VEIN X-RAY ADRENAL GLANDS	\$218.00
75860	VEIN X-RAY NECK	\$164.00
75885	VEIN X-RAY LIVER W/HEMODYNAM	\$204.00
75887	VEIN X-RAY LIVER W/O HEMODYN	\$205.00
75889	VEIN X-RAY LIVER W/HEMODYNAM	\$162.00
75891	VEIN X-RAY LIVER	\$164.00
75893	VENOUS SAMPLING BY CATHETER	\$79.00
75893	VENOUS SAMPLING BY CATHETER	\$79.00
75894	X-RAYS TRANSCATH THERAPY	\$195.00
75896	X-RAYS TRANSCATH THERAPY	\$216.00
75896	X-RAYS TRANSCATH THERAPY	\$216.00
75896	X-RAYS TRANSCATH THERAPY	\$216.00
75898	FOLLOW-UP ANGIOGRAPHY	\$247.00
75898	FOLLOW-UP ANGIOGRAPHY	\$247.00
75901	REMOVE CVA DEVICE OBSTRUCT	\$70.00
75901	REMOVE CVA DEVICE OBSTRUCT	\$70.00
75902	REMOVE CVA LUMEN OBSTRUCT	\$56.00
75940	X-RAY PLACEMENT VEIN FILTER	\$90.00
75940	X-RAY PLACEMENT VEIN FILTER	\$90.00
75945	INTRAVASCULAR US	\$68.00
75946	INTRAVASCULAR US ADD-ON	\$68.00
75952	ENDOVASC REPAIR ABDOM AORTA	\$662.00
75953	ABDOM ANEURYSM ENDOVAS RPR	\$201.00
75954	ILIAC ANEURYSM ENDOVAS RPR	\$335.00
75960	TRANSCATH IV STENT RS&I	\$131.00
75960	TRANSCATH IV STENT RS&I	\$131.00
75962	REPAIR ARTERIAL BLOCKAGE	\$78.00
75962	REPAIR ARTERIAL BLOCKAGE	\$78.00
75964	REPAIR ARTERY BLOCKAGE EACH	\$53.00
75966	REPAIR ARTERIAL BLOCKAGE	\$189.00
75966	REPAIR ARTERIAL BLOCKAGE	\$189.00
75968	REPAIR ARTERY BLOCKAGE EACH	\$53.00
75970	VASCULAR BIOPSY	\$118.00
75978	REPAIR VENOUS BLOCKAGE	\$78.00
75978	REPAIR VENOUS BLOCKAGE	\$78.00
75980	CONTRAST XRAY EXAM BILE DUCT	\$236.00
75982	CONTRAST XRAY EXAM BILE DUCT	\$236.00
75982	CONTRAST XRAY EXAM BILE DUCT	\$236.00

CPT	Description	Std. Fee
75984	XRAY CONTROL CATHETER CHANGE	\$103.00
75984	XRAY CONTROL CATHETER CHANGE	\$103.00
75989	ABSCCESS DRAINAGE UNDER X-RAY	\$172.00
75989	ABSCCESS DRAINAGE UNDER X-RAY	\$172.00
76000	FLUOROSCOPY <1 HR PHYS/QHP	\$26.00
76001	FLUOROSCOPE EXAM EXTENSIVE	\$105.00
76010	X-RAY NOSE TO RECTUM	\$27.00
76080	X-RAY EXAM OF FISTULA	\$77.00
76080	X-RAY EXAM OF FISTULA	\$77.00
76098	X-RAY EXAM SURGICAL SPECIMEN	\$24.00
76098	X-RAY EXAM SURGICAL SPECIMEN	\$24.00
76100	X-RAY EXAM OF BODY SECTION	\$92.00
76101	COMPLEX BODY SECTION X-RAY	\$98.00
76102	COMPLEX BODY SECTION X-RAYS	\$99.00
76376	3D RENDER W/INTRP POSTPROCES	\$29.00
76377	3D RENDER W/INTRP POSTPROCES	\$116.00
76380	CAT SCAN FOLLOW-UP STUDY	\$144.00
76390	MR SPECTROSCOPY	\$204.00
76391	MR ELASTOGRAPHY	\$162.00
76496	FLUOROSCOPIC PROCEDURE	\$58.00
76506	ECHO EXAM OF HEAD	\$95.00
76506	ECHO EXAM OF HEAD	\$95.00
76536	US EXAM OF HEAD AND NECK	\$82.00
76604	US EXAM CHEST	\$79.00
76604	US EXAM CHEST	\$79.00
76604	US EXAM CHEST	\$79.00
76641	ULTRASOUND BREAST COMPLETE	\$107.00
76642	ULTRASOUND BREAST LIMITED	\$100.00
76645	US EXAM BREAST(S)	\$92.00
76645	US EXAM BREAST(S)	\$92.00
76700	US EXAM ABDOM COMPLETE	\$118.00
76705	ECHO EXAM OF ABDOMEN	\$86.00
76705	ECHO EXAM OF ABDOMEN	\$86.00
76706	US ABDL AORTA SCREEN AAA	\$82.00
76770	US EXAM ABDO BACK WALL COMP	\$108.00
76775	US EXAM ABDO BACK WALL LIM	\$84.00
76776	US EXAM K TRANSPL W/DOPPLER	\$111.00
76800	US EXAM SPINAL CANAL	\$177.00
76801	OB US < 14 WKS SINGLE FETUS	\$147.00
76802	OB US < 14 WKS ADDL FETUS	\$124.00
76805	OB US >= 14 WKS SNGL FETUS	\$148.00
76810	OB US >= 14 WKS ADDL FETUS	\$147.00
76811	OB US DETAILED SNGL FETUS	\$288.00
76812	OB US DETAILED ADDL FETUS	\$270.00
76813	OB US NUCHAL MEAS 1 GEST	\$179.00
76814	OB US NUCHAL MEAS ADD-ON	\$151.00
76815	OB US LIMITED FETUS(S)	\$96.00
76816	OB US FOLLOW-UP PER FETUS	\$128.00
76817	TRANSVAGINAL US OBSTETRIC	\$112.00
76818	FETAL BIOPHYS PROFILE W/NST	\$159.00

CPT	Description	
		Std. Fee
76819	FETAL BIOPHYS PROFIL W/O NST	\$116.00
76820	UMBILICAL ARTERY ECHO	\$79.00
76825	ECHO EXAM OF FETAL HEART	\$246.00
76830	TRANSVAGINAL US NON-OB	\$102.00
76830	TRANSVAGINAL US NON-OB	\$102.00
76831	ECHO EXAM UTERUS	\$108.00
76856	US EXAM PELVIC COMPLETE	\$101.00
76857	US EXAM PELVIC LIMITED	\$73.00
76870	US EXAM SCROTUM	\$94.00
76872	US TRANSRECTAL	\$98.00
76872	US TRANSRECTAL	\$98.00
76873	ECHOGRAP TRANS R PROS STUDY	\$233.00
76881	US COMPL JOINT R-T W/IMG	\$91.00
76882	US LMTD JT/NONVASC XTR STRUX	\$72.00
76885	US EXAM INFANT HIPS DYNAMIC	\$109.00
76886	US EXAM INFANT HIPS STATIC	\$89.00
76936	ECHO GUIDE FOR ARTERY REPAIR	\$290.00
76937	US GUIDE VASCULAR ACCESS	\$42.00
76937	US GUIDE VASCULAR ACCESS	\$42.00
76940	US GUIDE TISSUE ABLATION	\$303.00
76942	ECHO GUIDE FOR BIOPSY	\$98.00
76942	ECHO GUIDE FOR BIOPSY	\$98.00
76942	ECHO GUIDE FOR BIOPSY	\$98.00
76946	ECHO GUIDE FOR AMNIOCENTESIS	\$57.00
76978	US TRGT DYN MBUBB 1ST LES	\$237.00
76979	US TRGT DYN MBUBB EA ADDL	\$124.00
76981	USE PARENCHYMA	\$87.00
76982	USE 1ST TARGET LESION	\$87.00
76983	USE EA ADDL TARGET LESION	\$74.00
76998	US GUIDE INTRAOP	\$187.00
77001	FLUOROGUIDE FOR VEIN DEVICE	\$56.00
77001	FLUOROGUIDE FOR VEIN DEVICE	\$56.00
77002	NEEDLE LOCALIZATION BY XRAY	\$82.00
77003	FLUOROGUIDE FOR SPINE INJECT	\$88.00
77003	FLUOROGUIDE FOR SPINE INJECT	\$88.00
77011	CT SCAN FOR LOCALIZATION	\$183.00
77012	CT SCAN FOR NEEDLE BIOPSY	\$169.00
77012	CT SCAN FOR NEEDLE BIOPSY	\$169.00
77013	CT GUIDE FOR TISSUE ABLATION	\$572.00
77014	CT SCAN FOR THERAPY GUIDE	\$127.00
77021	MRI GUIDANCE NDL PLMT RS&I	\$220.00
77021	MRI GUIDANCE NDL PLMT RS&I	\$220.00
77022	MRI GDN PARNCHYMA TISS ABLTJ	\$621.00
77031	STEREOTACT GUIDE FOR BRST BX	\$257.00
77031	STEREOTACT GUIDE FOR BRST BX	\$257.00
77032	GUIDANCE FOR NEEDLE BREAST	\$92.00
77032	GUIDANCE FOR NEEDLE BREAST	\$92.00
77046	MRI BREAST C- UNILATERAL	\$212.00
77047	MRI BREAST C- BILATERAL	\$234.00
77048	MRI BREAST C-+ W/CAD UNI	\$306.00

CPT	Description	
		Std. Fee
77049	MRI BREAST C-+ W/CAD BI	\$335.00
77051	COMPUTER DX MAMMOGRAM ADD-ON	\$8.00
77051	COMPUTER DX MAMMOGRAM ADD-ON	\$8.00
77052	COMP SCREEN MAMMOGRAM ADD-ON	\$8.00
77052	COMP SCREEN MAMMOGRAM ADD-ON	\$8.00
77053	X-RAY OF MAMMARY DUCT	\$52.00
77054	X-RAY OF MAMMARY DUCTS	\$67.00
77055	MAMMOGRAM ONE BREAST	\$103.00
77056	MAMMOGRAM BOTH BREASTS	\$127.00
77057	MAMMOGRAM SCREENING	\$103.00
77058	MRI ONE BREAST	\$238.00
77059	MRI BOTH BREASTS	\$238.00
77061	BREAST TOMOSYNTHESIS UNI	\$158.00
77062	BREAST TOMOSYNTHESIS BI	\$158.00
77063	BREAST TOMOSYNTHESIS BI	\$87.00
77063	BREAST TOMOSYNTHESIS BI	\$87.00
77065	DX MAMMO INCL CAD UNI	\$105.00
77066	DX MAMMO INCL CAD BI	\$129.00
77067	SCR MAMMO BI INCL CAD	\$66.00
77071	X-RAY STRESS VIEW	\$135.00
77072	X-RAYS FOR BONE AGE	\$28.00
77073	X-RAYS BONE LENGTH STUDIES	\$42.00
77074	X-RAYS BONE SURVEY LIMITED	\$67.00
77074	X-RAYS BONE SURVEY LIMITED	\$67.00
77075	X-RAYS BONE SURVEY COMPLETE	\$79.00
77076	X-RAYS BONE SURVEY INFANT	\$103.00
77077	JOINT SURVEY SINGLE VIEW	\$47.00
77077	JOINT SURVEY SINGLE VIEW	\$47.00
77078	CT BONE DENSITY AXIAL	\$36.00
77079	CT BONE DENSITY PERIPHERAL	\$32.00
77080	DXA BONE DENSITY AXIAL	\$30.00
77081	DXA BONE DENSITY/PERIPHERAL	\$32.00
77082	DXA BONE DENSITY VERT FX	\$25.00
77083	RADIOGRAPHIC ABSORPTIOMETRY	\$35.00
77084	MAGNETIC IMAGE BONE MARROW	\$235.00
77085	DXA BONE DENSITY STUDY	\$45.00
77086	FRACTURE ASSESSMENT VIA DXA	\$26.00
77263	RADIATION THERAPY PLANNING	\$480.00
77290	SET RADIATION THERAPY FIELD	\$235.00
78012	THYROID UPTAKE MEASUREMENT	\$28.00
78013	THYROID IMAGING W/BLOOD FLOW	\$53.00
78014	THYROID IMAGING W/BLOOD FLOW	\$72.00
78015	THYROID MET IMAGING	\$96.00
78018	THYROID MET IMAGING BODY	\$121.00
78020	THYROID MET UPTAKE	\$81.00
78070	PARATHYROID PLANAR IMAGING	\$114.00
78071	PARATHYRD PLANAR W/WO SUBTRJ	\$172.00
78072	PARATHYRD PLANAR W/SPECT&CT	\$225.00
78075	ADRENAL CORTEX & MEDULLA IMG	\$103.00
78102	BONE MARROW IMAGING LTD	\$78.00

CPT	Description	
		Std. Fee
78103	BONE MARROW IMAGING MULT	\$106.00
78104	BONE MARROW IMAGING BODY	\$112.00
78110	PLASMA VOLUME SINGLE	\$28.00
78111	PLASMA VOLUME MULTIPLE	\$32.00
78120	RED CELL MASS SINGLE	\$34.00
78122	BLOOD VOLUME	\$63.00
78135	RED CELL SURVIVAL KINETICS	\$93.00
78185	SPLEEN IMAGING	\$59.00
78195	LYMPH SYSTEM IMAGING	\$173.00
78201	LIVER IMAGING	\$62.00
78202	LIVER IMAGING WITH FLOW	\$70.00
78205	LIVER IMAGING (3D)	\$99.00
78206	LIVER IMAGE (3D) WITH FLOW	\$137.00
78215	LIVER AND SPLEEN IMAGING	\$71.00
78216	LIVER & SPLEEN IMAGE/FLOW	\$80.00
78220	LIVER FUNCTION STUDY	\$91.00
78223	HEPATOBIILIARY IMAGING	\$137.00
78223	HEPATOBIILIARY IMAGING	\$137.00
78226	HEPATOBIILIARY SYSTEM IMAGING	\$107.00
78227	HEPATOBI SYST IMAGE W/DRUG	\$131.00
78230	SALIVARY GLAND IMAGING	\$56.00
78231	SERIAL SALIVARY IMAGING	\$77.00
78232	SALIVARY GLAND FUNCTION EXAM	\$58.00
78258	ESOPHAGEAL MOTILITY STUDY	\$107.00
78261	GASTRIC MUCOSA IMAGING	\$100.00
78262	GASTROESOPHAGEAL REFLUX EXAM	\$97.00
78264	GASTRIC EMPTYING IMAG STUDY	\$107.00
78265	GASTRIC EMPTYING IMAG STUDY	\$141.00
78266	GASTRIC EMPTYING IMAG STUDY	\$156.00
78270	VIT B-12 ABSORPTION EXAM	\$31.00
78271	VIT B-12 ABSRP EXAM INT FAC	\$30.00
78278	ACUTE GI BLOOD LOSS IMAGING	\$143.00
78290	MECKELS DIVERT EXAM	\$99.00
78291	LEVEEN/SHUNT PATENCY EXAM	\$124.00
78300	BONE IMAGING LIMITED AREA	\$91.00
78305	BONE IMAGING MULTIPLE AREAS	\$120.00
78306	BONE IMAGING WHOLE BODY	\$124.00
78315	BONE IMAGING 3 PHASE	\$147.00
78320	BONE IMAGING (3D)	\$147.00
78351	BONE MINERAL DUAL PHOTON	\$96.00
78428	CARDIAC SHUNT IMAGING	\$110.00
78429	MYOCRD IMG PET 1 STD W/CT	\$244.00
78433	MYOCRD IMG PET 2RTRACER CT	\$315.00
78445	VASCULAR FLOW IMAGING	\$68.00
78451	HT MUSCLE IMAGE SPECT SING	\$196.00
78452	HT MUSCLE IMAGE SPECT MULT	\$230.00
78453	HT MUSCLE IMAGE PLANAR SING	\$144.00
78454	HT MUSC IMAGE PLANAR MULT	\$195.00
78456	ACUTE VENOUS THROMBUS IMAGE	\$142.00
78457	VENOUS THROMBOSIS IMAGING	\$112.00

CPT	Description	
		Std. Fee
78458	VEN THROMBOSIS IMAGES BILAT	\$112.00
78459	MYOCRD IMG PET SINGLE STUDY	\$207.00
78466	HEART INFARCT IMAGE	\$102.00
78469	HEART INFARCT IMAGE (3D)	\$133.00
78472	GATED HEART PLANAR SINGLE	\$140.00
78473	GATED HEART MULTIPLE	\$208.00
78481	HEART FIRST PASS SINGLE	\$139.00
78483	HEART FIRST PASS MULTIPLE	\$208.00
78491	MYOCRD IMG PET 1STD RST/STRS	\$209.00
78492	MYOCRD IMG PET MLT RST&STRS	\$262.00
78494	HEART IMAGE SPECT	\$170.00
78496	HEART FIRST PASS ADD-ON	\$71.00
78579	LUNG VENTILATION IMAGING	\$69.00
78580	LUNG PERFUSION IMAGING	\$107.00
78582	LUNG VENTILAT&PERFUS IMAGING	\$154.00
78584	LUNG V/Q IMAGE SINGLE BREATH	\$152.00
78585	LUNG V/Q IMAGING	\$166.00
78586	AEROSOL LUNG IMAGE SINGLE	\$91.00
78587	AEROSOL LUNG IMAGE MULTIPLE	\$137.00
78588	PERFUSION LUNG IMAGE	\$162.00
78594	VENT IMAGE MULT PROJ GAS	\$90.00
78596	LUNG DIFFERENTIAL FUNCTION	\$205.00
78597	LUNG PERFUSION DIFFERENTIAL	\$104.00
78598	LUNG PERF&VENTILAT DIFERENTL	\$121.00
78600	BRAIN IMAGE < 4 VIEWS	\$66.00
78601	BRAIN IMAGE W/FLOW < 4 VIEWS	\$73.00
78605	BRAIN IMAGE 4+ VIEWS	\$78.00
78606	BRAIN IMAGE W/FLOW 4 + VIEWS	\$92.00
78607	BRAIN IMAGING (3D)	\$173.00
78608	BRAIN IMAGING (PET)	\$210.00
78609	BRAIN IMAGING (PET)	\$238.00
78610	BRAIN FLOW IMAGING ONLY	\$44.00
78630	CEREBROSPINAL FLUID SCAN	\$99.00
78635	CSF VENTRICULOGRAPHY	\$94.00
78645	CSF SHUNT EVALUATION	\$81.00
78647	CEREBROSPINAL FLUID SCAN	\$132.00
78650	CSF LEAKAGE IMAGING	\$87.00
78700	KIDNEY IMAGING MORPHOL	\$65.00
78701	KIDNEY IMAGING WITH FLOW	\$69.00
78707	K FLOW/FUNCT IMAGE W/O DRUG	\$137.00
78708	K FLOW/FUNCT IMAGE W/DRUG	\$173.00
78709	K FLOW/FUNCT IMAGE MULTIPLE	\$201.00
78710	KIDNEY IMAGING (3D)	\$90.00
78725	KIDNEY FUNCTION STUDY	\$54.00
78740	URETERAL REFLUX STUDY	\$80.00
78740	URETERAL REFLUX STUDY	\$80.00
78761	TESTICULAR IMAGING W/FLOW	\$105.00
78800	RP LOCLZJ TUM 1 AREA 1 D IMG	\$99.00
78801	RP LOCLZJ TUM 2+AREA 1+D IMG	\$117.00
78802	RP LOCLZJ TUM WHBDY 1 D IMG	\$122.00

CPT	Description	
		Std. Fee
78803	RP LOCLZJ TUM SPECT 1 AREA	\$152.00
78804	RP LOCLZJ TUM WHBDY 2+D IMG	\$152.00
78805	ABSCCESS IMAGING LTD AREA	\$105.00
78806	ABSCCESS IMAGING WHOLE BODY	\$122.00
78807	NUCLEAR LOCALIZATION/ABSCCESS	\$152.00
78808	IV INJ RA DRUG DX STUDY	\$128.00
78811	PET IMAGE LTD AREA	\$226.00
78812	PET IMAGE SKULL-THIGH	\$275.00
78813	PET IMAGE FULL BODY	\$287.00
78814	PET IMAGE W/CT LMTD	\$317.00
78815	PET IMAGE W/CT SKULL-THIGH	\$350.00
78816	PET IMAGE W/CT FULL BODY	\$353.00
78830	RP LOCLZJ TUM SPECT W/CT 1	\$210.00
78831	RP LOCLZJ TUM SPECT 2 AREAS	\$257.00
78832	RP LOCLZJ TUM SPECT W/CT 2	\$299.00
79005	NUCLEAR RX ORAL ADMIN	\$257.00
79101	NUCLEAR RX IV ADMIN	\$279.00
79200	NUCLEAR RX INTRACAV ADMIN	\$296.00
79300	NUCLR RX INTERSTIT COLLOID	\$232.00
79403	HEMATOPOIETIC NUCLEAR TX	\$324.00
79440	NUCLEAR RX INTRA-ARTICULAR	\$278.00
79445	NUCLEAR RX INTRA-ARTERIAL	\$338.00
90772	THER/PROPH/DIAG INJ, SC/IM	\$54.00
93010	ELECTROCARDIOGRAM REPORT	\$25.00
93015	CARDIOVASCULAR STRESS TEST	\$214.00
93503	INSERT/PLACE HEART CATHETER	\$384.00
93875	EXTRACRANIAL STUDY	\$79.00
93880	EXTRACRANIAL BILAT STUDY	\$117.00
93882	EXTRACRANIAL UNI/LTD STUDY	\$74.00
93886	INTRACRANIAL COMPLETE STUDY	\$139.00
93888	INTRACRANIAL LIMITED STUDY	\$75.00
93888	INTRACRANIAL LIMITED STUDY	\$75.00
93922	UPR/L XTREMITY ART 2 LEVELS	\$37.00
93923	UPR/LXTR ART STDY 3+ LVLS	\$66.00
93924	LWR XTR VASC STDY BILAT	\$73.00
93925	LOWER EXTREMITY STUDY	\$115.00
93926	LOWER EXTREMITY STUDY	\$71.00
93930	UPPER EXTREMITY STUDY	\$117.00
93931	UPPER EXTREMITY STUDY	\$73.00
93965	EXTREMITY STUDY	\$51.00
93970	EXTREMITY STUDY	\$102.00
93971	EXTREMITY STUDY	\$66.00
93975	VASCULAR STUDY	\$170.00
93975	VASCULAR STUDY	\$170.00
93976	VASCULAR STUDY	\$117.00
93976	VASCULAR STUDY	\$117.00
93976	VASCULAR STUDY	\$117.00
93978	VASCULAR STUDY	\$118.00
93979	VASCULAR STUDY	\$73.00
93980	PENILE VASCULAR STUDY	\$179.00

CPT	Description	
		Std. Fee
93981	PENILE VASCULAR STUDY	\$65.00
93990	DOPPLER FLOW TESTING	\$73.00
94060	EVALUATION OF WHEEZING	\$160.00
94060	EVALUATION OF WHEEZING	\$36.00
96420	CHEMO IA PUSH TECNIQUE	\$284.00
96450	CHEMOTHERAPY INTO CNS	\$236.00
96450	CHEMOTHERAPY INTO CNS	\$236.00
99024	POSTOP FOLLOW-UP VISIT	\$0.00
99144	MOD SEDAT PHYS/QHP 5YRS/>	\$58.00
99145	MOD SEDAT PHYS/QHP EA 15 MIN	\$22.00
99145	MOD SEDAT PHYS/QHP EA 15 MIN	\$22.00
99151	MOD SED SAME PHYS/QHP <5 YRS	\$70.00
99152	MOD SED SAME PHYS/QHP 5/>YRS	\$37.00
99153	MOD SED SAME PHYS/QHP EA	\$30.00
99155	MOD SED OTH PHYS/QHP <5 YRS	\$272.00
99156	MOD SED OTH PHYS/QHP 5/>YRS	\$223.00
99157	MOD SED OTHER PHYS/QHP EA	\$169.00
99201	OFFICE/OUTPATIENT VISIT NEW	\$77.00
99202	OFFICE O/P NEW SF 15-29 MIN	\$146.00
99203	OFFICE O/P NEW LOW 30-44 MIN	\$223.00
99204	OFFICE O/P NEW MOD 45-59 MIN	\$376.00
99205	OFFICE O/P NEW HI 60-74 MIN	\$489.00
99211	OFFICE O/P EST MINIMAL PROB	\$27.00
99212	OFFICE O/P EST SF 10-19 MIN	\$73.00
99213	OFFICE O/P EST LOW 20-29 MIN	\$148.00
99214	OFFICE O/P EST MOD 30-39 MIN	\$227.00
99215	OFFICE O/P EST HI 40-54 MIN	\$321.00
99217	OBSERVATION CARE DISCHARGE	\$209.00
99218	INITIAL OBSERVATION CARE	\$289.00
99221	INITIAL HOSPITAL CARE	\$294.00
99222	INITIAL HOSPITAL CARE	\$396.00
99223	INITIAL HOSPITAL CARE	\$616.00
99224	SUBSEQUENT OBSERVATION CARE	\$115.00
99225	SUBSEQUENT OBSERVATION CARE	\$210.00
99226	SUBSEQUENT OBSERVATION CARE	\$304.00
99231	SUBSEQUENT HOSPITAL CARE	\$114.00
99232	SUBSEQUENT HOSPITAL CARE	\$208.00
99232	SUBSEQUENT HOSPITAL CARE	\$416.00
99233	SUBSEQUENT HOSPITAL CARE	\$301.00
99238	HOSPITAL DISCHARGE DAY	\$208.00
99241	OFFICE CONSULTATION	\$131.00
99242	OFFICE CONSULTATION	\$208.00
99243	OFFICE CONSULTATION	\$261.00
99244	OFFICE CONSULTATION	\$387.00
99245	OFFICE CONSULTATION	\$492.00
99251	INPATIENT CONSULTATION	\$137.00
99252	INPATIENT CONSULTATION	\$210.00
99253	INPATIENT CONSULTATION	\$263.00
99281	EMERGENCY DEPT VISIT	\$62.00
COVID	COVID19 ENCOUNTER	\$0.00

CPT	Description	
		Std. Fee
G0202	SCR MAMMO BI INCL CAD	\$102.00
G0202	SCR MAMMO BI INCL CAD	\$102.00
G0202	SCR MAMMO BI INCL CAD	\$102.00
G0204	DX MAMMO INCL CAD BI	\$127.00
G0204	DX MAMMO INCL CAD BI	\$127.00
G0206	DX MAMMO INCL CAD UNI	\$102.00
G0206	DX MAMMO INCL CAD UNI	\$102.00
G0219	PET IMG WHOLBOD MELANO NONCO	\$236.00
G0235	PET NOT OTHERWISE SPECIFIED	\$214.00
G0279	TOMOSYNTHESIS, MAMMO	\$87.00
G0279	TOMOSYNTHESIS, MAMMO	\$87.00
G0297	LDCT FOR LUNG CA SCREEN	\$148.00
G0364	BONE MARROW ASPIRATE &BIOPSY	\$26.00
G0365	VESSEL MAPPING HEMO ACCESS	\$36.00
G0365	VESSEL MAPPING HEMO ACCESS	\$36.00
G0389	ULTRASOUND EXAM AAA SCREEN	\$85.00
G1000	CDSM APPLIED PATHWAYS	\$0.00
G1001	CDSM EVICORE	\$0.00
G1002	CDSM MEDCURRENT	\$0.00
G1003	CDSM MEDICALIS	\$0.00
G1004	CDSM NDSC	\$0.00
G1005	CDSM NIA	\$0.00
G1006	CDSM TEST APPROP	\$0.00
G1007	CDSM AIM	\$0.00
G1008	CDSM CRANBERRY PK	\$0.00
G1009	CDSM SAGE HEALTH	\$0.00
G1010	CDSM STANSON	\$0.00
G1011	CDSM QUALIFIED NOS	\$0.00
G9318	IMAGE STD NOMENCLATURE	\$0.00
G9319	IMAGE NOT STD NOMENCLATURE	\$0.00
G9321	DOC COUNT OF CT IN 12MO	\$0.00
G9322	NO DOC COUNT OF CT IN 12MO	\$0.00
G9326	CT DONE NO RAD DS INDEX, NRG	\$0.00
G9327	CT DONE RAD DS INDEX	\$0.00
G9329	NORSN NO DICOM FORMAT DOC	\$0.00
G9340	DICOM FORMAT DOC ON RPT	\$0.00
G9342	NO SRCH FOR CT IN 12MO NORSN	\$0.00
G9345	FOLLOW UP PULM NOD	\$0.00
G9347	NO FOLLOW UP PULM NOD NORSN	\$0.00
G9354	1 OR NO CT SINUS W/IN 90D DX	\$0.00
G9355	NO EARLY IND/DELIVERY	\$0.00
G9500	RAD EXPOS IND/EXP TM DOC	\$0.00
G9501	RAD EXPOS IND/EXP TM NO DOC	\$0.00
G9544	NO FILT REMOV W/IN 3MOS PLCM	\$0.00
G9546	FOLLOW UP RECOMMENDATION NOT DOCUMENTED	\$0.00
G9547	CYS REN LES OR ADREN	\$0.00
G9548	NO F/U REC IMAGE STUDY	\$0.00
G9549	DOC MED RSN FOR F/U IMAG	\$0.00
G9550	IMAG REC	\$0.00
G9551	ABD IMAG NO LES,KID/LIVR/ADR	\$0.00

CPT	Description	
		Std. Fee
G9552	INC THYR NODE <1.0 IN RPT	\$0.00
G9554	CT/CTA/MRI/A CHST FOLL REC	\$0.00
G9555	DOC MED RSN FOR FOLLUP IMAGE	\$0.00
G9556	CT/CTA/MRI/A NO FOLLUP IMAG	\$0.00
G9557	CT/CTA/MRI/A NO THYR <1.0CM	\$0.00
G9637	DOC >1 DOSE REDUC TECH	\$0.00
G9638	NO DOC >1 DOSE REDUC TECH	\$0.00
G9745	DOC RSN NO HBP SCRNR OR F/U	\$0.00
G9754	INCID PULM NODULE	\$0.00
G9755	DOC MED RSN NO FLLW UP	\$0.00
G9756	SURG PROC W/SILICONE OIL	\$0.00
M1018	PT DX HST CR PT SK LG CR SCR	\$0.00
NOMIP	NONREPORTABLE ENCOUNTER	\$0.00
NON S	NON SUFFICIENT FUNDS	\$26.00
Q0083	CHEMO BY OTHER THAN INFUSION	\$79.00
S8032	LOW DOSE CT LUNG SCREENING	\$152.00
S8032	LOW DOSE CT LUNG SCREENING	\$152.00