

NEW  
**FRONTIER**  
 IMAGING

Ph: (307) 382-4282  
 Fax: (307) 382-4291

**CPT CODES**

**CATSCAN**

**IV Contrast: 87.00**

74150	Abdomen w/o contrast	\$ 809.00	
74160	Abdomen w/ contrast	\$1175.00	w/ contrast: \$1262.00
74170	Abdomen w_w/o contrast	\$1324.00	w/ contrast: \$1411.00
74176	Abdomen-Pelvis w/o contrast	\$ 700.00	
74177	Abdomen-Pelvis w/contrast	\$ 975.00	w/ contrast: \$1062.00
74178	Abdomen-Pelvis w_w/o contrast	\$1275.00	w/ contrast: \$1362.00
70450	Brain/Head w/o contrast	\$ 643.00	
70460	Brain/Head w/ contrast	\$ 836.00	w/ contrast: \$923.00
70470	Brain/Head w_w/o contrast	\$1008.00	w/ contrast: \$1095.00
72125	Cervical w/o contrast	\$ 775.00	
72126	Cervical w/ contrast	\$ 936.00	w/ contrast: \$1023.00
72127	Cervical w_w/o contrast	\$1131.00	w/ contrast: \$1218.00
71250	Chest w/o contrast	\$ 835.00	
71260	Chest w/ contrast	\$1100.00	w/ contrast: \$1187.00
71270	Chest w_w/o contrast	\$1450.00	w/ contrast: \$1537.00
74175	CT Angio Abdomen	\$1333.00	
74171	CT Angio Abdomen-Pelvis	\$2500.00	
71275	CT Angio Chest	\$1480.00	
70496	CT Angio Head	\$1307.00	
73706	CT Angio Lower Extremity	\$1334.00	
70498	CT Angio Neck	\$1307.00	
72191	CT Angio Pelvis	\$1319.00	
73206	CT Angio Upper Extremity	\$1316.00	
73700	Lower Extremity w/o contrast	\$ 900.00	
73701	Lower Extremity w/contrast	\$ 902.00	w/ contrast: \$987.00
73702	Lower Extremity w_w/o contrast	\$1144.00	w/ contrast: \$1231.00
72131	Lumbar w/o contrast	\$ 775.00	
72132	Lumbar w/contrast	\$ 933.00	w/ contrast: \$1020.00
72133	Lumar w_w/o contrast	\$1134.00	w/ contrast: \$1221.00
70486	Maxillofacial (Sinus) w/o contrast	\$ 830.00	
70487	Maxillofacial (Sinus) w/contrast	\$ 943.00	w/ contrast: \$1030.00
70488	Maxillofacial (Sinus) w_w/o contrast	\$1145.00	w/ contrast: \$1232.00
72192	Pelvis w/o contrast	\$ 740.00	
72193	Pelvis w/contrast	\$ 995.00	w/ contrast: \$1082.00
72194	Pelvis w_w/o contrast	\$1129.00	w/ contrast: \$1216.00
70490	Soft Tissue Neck w/o contrast	\$ 836.00	
70491	Soft Tissue Neck w/ contrast	\$1000.00	w/ contrast: \$1087.00
70492	Soft Tissue Neck w_w/o contrast	\$1207.00	w/ contrast: \$1294.00
72128	Thoracic w/o contrast	\$ 775.00	

72129	Thoracic w/ contrast	\$ 936.00	w/ contrast: \$1023.00
72130	Thoracic w_w/o contrast	\$1136.00	w/ contrast: \$1223.00
73200	Upper Extremity w/o contrast	\$ 807.00	
73201	Upper Extremity w/contrast	\$ 964.00	w/ contrast: \$1051.00
73202	Upper Extremity w_w/o contrast	\$1142.00	w/ contrast: \$1229.00

## DEXA

77080	Dexa Bone Density	\$ 285.00	
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## MAMMOGRAPHY (DIGITAL)

G0202	Screening	\$ 319.00 = \$ 350.00	
G0206	Diagnostic-Unilateral	\$ 369.00= \$ 400.00	
G0204	Diagnostic-Bilateral	\$ 448.00= \$ 479.00	
77052	Computer Aided Detection	\$ 31.00	

## MRA

74185	Abdomen	\$1917.00	
71555	Chest	\$1793.00	
70544	Head w/o contrast	\$1550.00	
70545	Head w/contrast	\$1578.00	
70546	Head w_w/o contrast	\$2043.00	
73725	Lower Extremity	\$1925.00	
70547	Neck w/o contrast	\$1339.00	
70548	Neck w/contrast	\$1578.00	
70549	Neck w_w/o contrast	\$2042.00	
72198	Pelvis	\$1784.00	

## MRI

### IV Contrast: 91.00

74181	Abdomen w/o contrast	\$1675.00	
74182	Abdomen w/contrast	\$1671.00	w/ contrast: \$1762.00
74183	Abdomen w_w/o contrast	\$2123.00	w/ contrast: \$2214.00
73721	Ankle w/o contrast	\$1675.00	
73722	Ankle w/contrast	\$1950.00	w/ contrast: \$2041.00
73723	Ankle w_w/o contrast	\$2375.00	w/ contrast: \$2466.00
70551	Brain w/o contrast	\$1388.00	
70552	Brain w/contrast	\$1681.00	w/ contrast: \$1772.00
70553	Brain w_w/o contrast	\$2141.00	w/ contrast: \$2232.00
77058	Breast Unilateral	\$2257.00	w/ contrast: \$2348.00
77059	Breast Bilateral	\$2379.00	w/ contrast: \$2470.00
72141	Cervical w/o contrast	\$1550.00	
72142	Cervical w/contrast	\$1582.00	w/ contrast: \$1673.00
72156	Cervical w_w/o contrast	\$2024.00	w/ contrast: \$2115.00
71550	Chest w/o contrast	\$1286.00	
71551	Chest w/contrast	\$1551.00	w/ contrast: \$1642.00
71552	Chest w_w/o contrast	\$1973.00	w/ contrast: \$2064.00
73721	Hip w/o contrast	\$1367.00	
73722	Hip w/contrast	\$1654.00	w/ contrast: \$1745.00
73723	Hip w_w/o contrast	\$2104.00	w/ contrast: \$2195.00
73721	Knee w/o contrast	\$1367.00	

73722	Knee w/contrast	\$1654.00	
73723	Knee w_w/o contrast	\$2104.00	w/ contrast: \$2195.00
73718	Lower Extremity w/o contrast	\$1550.00	
73719	Lower Extremity w/contrast	\$1651.00	w/ contrast: \$1742.00
73720	Lower Extremity w_w/o contrast	\$2104.00	w/ contrast: \$2195.00
72148	Lumbar w/o contrast	\$1590.00	
72149	Lumbar w/contrast	\$1561.00	w/ contrast: \$1652.00
72158	Lumbar w_w/o contrast	\$1990.00	w/ contrast: \$2081.00
70540	Orbit Face/Neck w/o contrast	\$1366.00	
70542	Orbit Face/Neck w/contrast	\$1651.00	w/ contrast: \$1742.00
70543	Orbit Face/Neck w_w/o contrast	\$2103.00	w/ contrast: \$2194.00
72195	Pelvis w/o contrast	\$1475.00	
72196	Pelvis w/contrast	\$1552.00	w/ contrast: \$1643.00
72197	Pelvis w_w/o contrast	\$1972.00	w/ contrast: \$2063.00
73221	Shoulder w/o contrast	\$1475.00	
73222	Shoulder w/contrast	\$1850.00	w/ contrast: \$1941.00
73223	Shoulder w_w/o contrast	\$2103.00	w/ contrast: \$2194.00
72146	Thoracic w/o contrast	\$1550.00	
72147	Thoracic w/contrast	\$1583.00	w/ contrast: \$1674.00
72157	Thoracic w_w/o contrast	\$2024.00	w/ contrast: \$2115.00
70336	TMJ	\$1500.00	
73218	Upper Extremity w/o contrast	\$1363.00	
73219	Upper Extremity w/contrast	\$1652.00	w/ contrast: \$1743.00
73220	Upper Extremity w_w/o contrast	\$2104.00	w/ contrast: \$2195.00
73221	Upper Extremity (Joint) w/o contrast	\$1475.00	
73222	Upper Extremity (Joint) w/contrast	\$1850.00	w/ contrast: \$1941.00
73223	Upper Extremity (Joint) w_w/o contrast	\$2103.00	w/ contrast: \$2194.00

## ULTRASOUND

76700	Abdomen	\$ 413.00	
93922	Arterial Upper/Lower-ABI only	\$ 358.00	
93925	Arterial Lower Extremity, Bilateral	\$ 559.00	
93926	Arterial Lower Extremity, Unilateral	\$ 357.00	
93930	Arterial Upper Extremity, Bilateral	\$ 541.00	
93931	Arterial Upper Extremity, Unilateral	\$ 342.00	
76645	Breast (not to use as of 1/2/15)	\$ 276.00	
76641	Breast Limited	\$ 276.00	
76642	Breast Full	\$ 351.00	
93880	Carotid Bilateral	\$ 565.00	
76880	Extremity, Non-Vascular	\$ 386.00	
76705	Gallbladder	\$ 350.00	
76705	Gallbladder with Kinevac	\$ 520.00	
76770	Kidneys, Renal, Bladder	\$ 393.00	
76705	Liver	\$ 350.00	
76856	Pelvic (non-obstetric)	\$ 395.00	
76802	OB less than 14wks	\$ 219.00	
76805	OB greater than 14wks	\$ 441.00	
76817	OB-Transvaginal	\$ 308.00	
76870	Testicular (Scrotal)	\$ 361.00	
76536	Thyroid (Soft Tissue Neck)	\$ 338.00	
76830	Transvaginal (Pelvic)	\$ 395.00 + 395.00= 790.00	
93970	Venous Extremity, Bilateral	\$ 650.00	

93971 Venous Extremity, Unilateral \$ 425.00

**X-RAY**

74000	Abdomen 1view (KUB)	\$ 83.00
74022	Abdomen Series Complete	\$ 156.00
73610	Ankle Complete	\$ 120.00
71010	Chest 1view	\$ 79.00
71020	Chest 2view (PA & LAT)	\$ 140.00
73000	Clavicle Complete	\$ 135.00
73080	Elbow Complete	\$ 135.00
70030	Eye-Foreign Body	\$ 120.00
73090	Forearm Complete	\$ 105.00
73550	Femur	\$ 91.00
73140	Finger	\$ 89.00
73630	Foot Complete	\$ 130.00
73130	Hand Complete	\$ 120.00
73510	Hip, Unilateral	\$ 135.00
73520	Hip, Bilateral	\$ 129.00
73060	Humerus	\$ 125.00
73564	Knee Complete	\$ 145.00
72190	Pelvis Complete	\$ 130.00
71101	Rib Complete, Unilateral	\$ 127.00
71111	Rib Complete, Bilateral	\$ 180.00
72220	Sacrum and Coccyx	\$ 94.00
73010	Scapula Complete	\$ 95.00
73040	Shoulder Arthrogram	\$ 341.00
73030	Shoulder Complete	\$ 125.00
70220	Sinuses Complete	\$ 125.00
70260	Skull Complete	\$ 152.00
72052	Spine-Cervical Complete	\$ 235.00
72114	Spine-Lumbar Complete	\$ 215.00
72074	Spine-Thoracic Complete	\$ 143.00
71120	Sternum Complete	\$ 105.00
73590	Tibia, Fibula	\$ 89.00
73660	Toe	\$ 83.00
73115	Wrist Arthrogram	\$ 310.00
73110	Wrist Complete	\$ 105.00

\*Prices Subject to Change

Updated 5/13/2014

**\*\*ALL self-pay patients are always given 10% off the price listed below. Another 10% off if the patient pays entire bill within 30 days from the time of their visit. Please note that all self-pay patients are required to pay at least half down at the time of visit. There are payment arrangements that can be set up on a month to month basis, after initial down payment is made. We do have applications for payment help located at our facility such as Medicaid applications and Breast and Cervical applications for mammograms and such. If you have any questions whatsoever please call us at our office. Thank you!**