

Table 3F - Radiology Services (Magnetic Resonance Imaging)

Physician and Hospital Pricing of Common Outpatient Procedures - Gross Charges

Under Act 53, the information in the table below was required to be submitted by the hospitals to the Vermont Department of Health. Most of the charges in the table are effective for the period of October 1, 2021 through September 30, 2022. They are based on Common Procedural Terminology (CPT®) codes, which are defined as "a listing of descriptive terms and identifying codes for reporting medical services and procedures performed by physicians. The purpose of the terminology is to provide a uniform language that will accurately describe medical, surgical, and diagnostic services, and will thereby provide an effective means for reliable nationwide communication among physicians, patients, and third parties" (CPT® 2012 Standard Edition codebook - American Medical Association).

The tables of CPT code charges shown on the Health Department's website provide hospital and physician gross charge information for selected commonly used outpatient procedures and related physician services. The charges listed are for the procedures themselves and do not represent other procedures that your physician may order or recommend. For some procedures, additional services such as blood collection or sedation may be required in conjunction with delivering the listed procedure. There may also be charges for supplies and pharmaceuticals used in the procedure. **To completely understand all possible charges that may apply for services received, please call your hospital and/or physician. Every patient event may have unique circumstances that could require additional services determined at the time of care, which can affect your total charges. The gross charges shown do NOT take into account any discounts or insurance. Please see the "Frequently Asked Questions" page for more information about pricing issues and considerations.**

For each table:

- **All charges shown are for hospitals and hospital-employed physicians only.**
- **"N/A" for hospital charges** indicates that the hospital does not perform this particular procedure. Check with the hospital as it may perform a similar procedure that is not listed.
- **"N/A" for physician charges** indicates that the hospital does not employ any physician who performs the service. In these cases, you may expect a separate charge from your physician or another doctor not employed directly by the hospital.
- The Hospital System Averages at the bottom of the table are the averages of the charges shown for each CPT code and do not include any charges that are "N/A".
- Note that many of the codes on the list are diagnostic tests in which the physician charge component represents the medical interpretation of a resulting image, lab specimen analysis, etc.

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§ Hospital in the table below did not submit the required CPT code pricing information to the Department of Health as of May 31, 2022.

Table 3F - Radiology Services - Magnetic Resonance Imaging (MRIs)

- There is usually a physician charge for interpreting these procedures. Please check with your hospital and physician for details about pricing and your specific circumstances.

	CPT Code	70540	70542	70544	70545	70551	70552	70553	72141	72146	72148
Hospital	Description	MRI scan of face & neck without contrast	MRI scan of face & neck with contrast	MRI scan of head without contrast	MRI scan of head with contrast	MRI scan of brain without contrast	MRI scan of brain with contrast	MRI scan of brain (multiple sequences) with and without contrast	MRI scan of cervical spine without contrast	MRI scan of thoracic spine without contrast	MRI scan of thoracic spine with contrast
§ Brattleboro Memorial Hospital	Hospital Charge										
	Physician Charge										
	Total Charge										
Central Vermont Medical Center	Hospital Charge	\$2,995	n/a	\$3,729	n/a	\$2,995	\$3,347	\$5,373	\$2,995	\$2,995	\$2,995
	Physician Charge	\$159	n/a	\$125	n/a	\$171	n/a	\$270	\$186	\$185	\$169
	Total Charge	\$3,154	n/a	\$3,854	n/a	\$3,165	n/a	\$5,643	\$3,181	\$3,180	\$3,164
Copley Hospital	Hospital Charge	\$641	n/a	\$895	n/a	\$1,732	\$1,466	\$3,269	\$1,732	\$895	\$1,920
	Physician Charge	\$0	n/a	\$0	n/a	\$0	\$0	\$0	\$0	\$0	\$0
	Total Charge	\$641	n/a	\$895	n/a	\$1,732	\$1,466	\$3,269	\$1,732	\$895	\$1,920
University of Vermont Medical Center	Hospital Charge	\$4,623	\$0	\$4,020	\$4,137	\$4,382	\$5,360	\$6,448	\$4,623	\$4,554	\$4,455
	Physician Charge	\$301	\$366	\$269	\$269	\$331	\$400	\$516	\$333	\$333	\$333
	Total Charge	\$4,924	\$366	\$4,289	\$4,406	\$4,713	\$5,760	\$6,964	\$4,956	\$4,887	\$4,788
§ Gifford Medical Center	Hospital Charge										
	Physician Charge										
	Total Charge										
Grace Cottage Family Health & Hospital	Hospital Charge	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	Physician Charge	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	Total Charge	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Mt. Ascutney Hospital	Hospital Charge	\$4,383	\$4,843	\$4,932	n/a	\$4,494	\$4,959	\$6,379	\$4,123	\$4,123	\$4,123
	Physician Charge	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	Total Charge	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
North Country Hospital	Hospital Charge	\$2,344	\$2,849	\$3,233	\$2,334	\$3,988	\$3,041	\$5,422	\$3,901	\$3,955	\$3,999
	Physician Charge	\$282	\$341	\$427	\$228	\$487	\$524	\$825	\$538	\$540	\$494
	Total Charge	\$2,626	\$3,190	\$3,659	\$2,562	\$4,475	\$3,566	\$6,247	\$4,438	\$4,494	\$4,493
Northeastern Vermont Regional Hospital	Hospital Charge	\$3,319	\$3,837	\$3,941	\$3,837	\$3,319	\$3,319	\$3,941	\$3,319	\$3,319	\$3,837
	Physician Charge	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	Total Charge	\$3,319	\$3,837	\$3,941	\$3,837	\$3,319	\$3,319	\$3,941	\$3,319	\$3,319	\$3,837
Northwestern Medical Center	Hospital Charge	\$2,240	\$1,662	\$2,240	\$2,036	\$2,016	\$1,692	\$2,463	\$2,463	\$2,463	\$2,463
	Physician Charge	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	Total Charge	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Porter Hospital	Hospital Charge	\$3,241	\$4,021	\$3,692	n/a	\$3,241	\$4,021	\$4,403	\$2,928	\$3,191	\$3,191
	Physician Charge	\$141	\$171	\$127	n/a	\$157	\$188	\$240	\$157	\$157	\$157
	Total Charge	\$3,382	\$4,192	\$3,819	n/a	\$3,398	\$4,212	\$4,643	\$3,085	\$3,348	\$3,348
Rutland Regional Medical Center	Hospital Charge	\$2,954	\$3,253	\$2,898	\$3,248	\$3,139	\$3,410	\$4,325	\$3,107	\$3,117	\$3,122
	Physician Charge	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	Total Charge	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Southwestern Vermont Medical Center	Hospital Charge	\$2,651	\$2,741	\$3,288	\$3,421	\$3,120	\$3,239	\$3,391	\$3,078	\$2,651	\$3,176
	Physician Charge	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	Total Charge	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Springfield Hospital	Hospital Charge	\$1,655	\$1,650	\$1,655	\$1,763	\$2,137	\$2,464	\$2,996	\$2,591	\$2,591	\$2,252
	Physician Charge	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	Total Charge	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Hospital System Averages	Hospital Charge	\$2,822	\$2,762	\$3,138	\$2,968	\$3,142	\$3,302	\$4,401	\$3,169	\$3,077	\$3,230
	Physician Charge	\$177	\$293	\$189	\$248	\$229	\$278	\$370	\$243	\$243	\$231
	Total Charge	\$3,008	\$2,896	\$3,410	\$3,602	\$3,467	\$3,665	\$5,118	\$3,452	\$3,354	\$3,592

* not performed at Grace Cottage Hospital.

All Vermont Community Hospitals

	CPT Code	72149	72156	72157	72158	72195	72197	72198	73221	73222	73721
Hospital	Description	MRI scan of lumbar spine with contrast	MRI scan of cervical spine (multiple sequences) with and without contrast	MRI scan of thoracic spine (multiple sequences) with and without contrast	MRI scan of lumbar spine (multiple sequences) with and without contrast	MRI scan of pelvis without contrast	MRI scan of pelvis (multiple sequences) with and without contrast	MRI scan of pelvis angiography	MRI scan of any joint, upper extremity without contrast	MRI scan of any joint, upper extremity with contrast	MRI scan of any joint, lower extremity without contrast
§ Brattleboro Memorial Hospital	Hospital Charge										
	Physician Charge										
	Total Charge										
Central Vermont Medical Center	Hospital Charge	\$3,347	\$5,373	\$5,373	\$5,373	\$2,995	\$5,373	n/a	\$2,995	\$3,347	\$2,995
	Physician Charge	n/a	\$291	\$302	\$285	\$319	n/a	n/a	\$157	\$439	\$275
	Total Charge	n/a	\$5,664	\$5,674	\$5,658	\$3,314	n/a	n/a	\$3,152	\$3,786	\$3,269
Copley Hospital	Hospital Charge	\$1,466	\$1,466	\$1,466	\$1,466	\$895	\$1,466	n/a	\$1,732	\$2,614	\$1,732
	Physician Charge	\$0	\$0	\$0	\$0	\$0	\$0	n/a	\$0	\$0	\$0
	Total Charge	\$1,466	\$1,466	\$1,466	\$1,466	\$895	\$1,466	n/a	\$1,732	\$2,614	\$1,732
University of Vermont Medical Center	Hospital Charge	\$4,651	\$6,559	\$6,447	\$6,531	\$4,449	\$5,191	n/a	\$4,260	\$4,676	\$4,173
	Physician Charge	\$402	\$516	\$516	\$516	\$328	\$494	\$400	\$307	\$368	\$305
	Total Charge	\$5,053	\$7,075	\$6,963	\$7,047	\$4,777	\$5,685	n/a	\$4,566	\$5,044	\$4,478
§ Gifford Medical Center	Hospital Charge										
	Physician Charge										
	Total Charge										
Grace Cottage Family Health & Hospital	Hospital Charge	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	Physician Charge	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	Total Charge	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Mt. Ascutney Hospital	Hospital Charge	n/a	\$6,379	\$6,379	\$6,379	\$4,469	\$6,383	n/a	\$4,246	\$4,561	\$4,342
	Physician Charge	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	Total Charge	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
North Country Hospital	Hospital Charge	\$3,427	\$5,245	\$3,387	\$5,518	\$2,991	\$5,162	\$2,429	\$3,041	\$4,886	\$3,035
	Physician Charge	\$435	\$797	\$719	\$793	\$488	\$745	\$346	\$347	\$401	\$446
	Total Charge	\$3,862	\$6,042	\$4,106	\$6,311	\$3,479	\$5,907	\$2,775	\$3,388	\$5,287	\$3,481
Northeastern Vermont Regional Hospital	Hospital Charge	\$3,837	\$3,941	\$3,941	\$3,941	\$3,452	\$4,099	\$4,137	\$3,319	\$3,977	\$3,319
	Physician Charge	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	Total Charge	\$3,837	\$3,941	\$3,941	\$3,941	\$3,452	\$4,099	\$4,137	\$3,319	\$3,977	\$3,319
Northwestern Medical Center	Hospital Charge	\$2,444	\$2,463	\$2,463	\$2,463	\$2,239	\$2,316	n/a	\$4,922	\$4,922	\$4,476
	Physician Charge	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	Total Charge	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Porter Hospital	Hospital Charge	\$3,776	\$4,220	\$4,345	\$4,118	\$2,636	\$3,922	n/a	\$2,806	\$3,190	\$2,981
	Physician Charge	\$188	\$240	\$240	\$241	\$154	\$231	n/a	\$144	\$172	\$14
	Total Charge	\$3,964	\$4,460	\$4,585	\$4,359	\$2,790	\$4,153	n/a	\$2,950	\$3,362	\$2,995
Rutland Regional Medical Center	Hospital Charge	\$3,313	\$4,329	\$4,527	\$4,343	\$2,982	\$4,098	\$2,798	\$3,034	\$3,531	\$2,962
	Physician Charge	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	Total Charge	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Southwestern Vermont Medical Center	Hospital Charge	\$3,325	\$3,485	\$3,626	\$3,477	\$2,652	\$3,314	n/a	\$3,161	\$3,373	\$3,165
	Physician Charge	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	Total Charge	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Springfield Hospital	Hospital Charge	\$2,576	\$2,996	\$2,996	\$2,996	\$1,655	\$2,299	\$949	\$2,283	\$2,656	\$146
	Physician Charge	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	Total Charge	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Hospital System Averages	Hospital Charge	\$3,216	\$4,223	\$4,086	\$4,237	\$2,856	\$3,966	\$2,578	\$3,254	\$3,794	\$3,030
	Physician Charge	\$256	\$369	\$355	\$367	\$258	\$367	\$373	\$191	\$276	\$208
	Total Charge	\$3,636	\$4,775	\$4,456	\$4,797	\$3,118	\$4,262	\$3,456	\$3,185	\$4,012	\$3,212

1. Grace Cottage does not perform these procedures.