

# Table 3F – Radiology Services (Magnetic Resonance Imaging)

## 2026 Hospital Report Card

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, 2025 through September 30, 2026. 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® Plus 2026 codebook - American Medical Association).

If you need help accessing or understanding this information, contact [AHS.VDHHospitalReportCard@vermont.gov](mailto:AHS.VDHHospitalReportCard@vermont.gov).

### Physician and Hospital Pricing of Common Outpatient Procedures - Gross Charges

- 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.



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802-863-7200



## 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, 2026.

**Table 3F - Radiology Services Magnetic Resonance Imaging (MRIs)<sup>32</sup>**

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.

Hospital	CPT Code	70540	70542	70544	70545	70551 <sup>44</sup>	70552	70553	72141	72146	72148
	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 lumbar spine without contrast
<b>Brattleboro Memorial Hospital</b>	Hospital Charge	\$3,458	\$5,789	\$3,458	N/A	\$3,458	\$5,789	\$5,789	\$3,458	\$3,458	\$3,458
	Physician Charge	\$0	\$0	\$0	N/A	\$0	\$0	\$0	\$0	\$0	\$0
	Total Charge	\$3,458	\$5,789	\$3,458	\$0	\$3,458	\$5,789	\$5,789	\$3,458	\$3,458	\$3,458
<b>Central Vermont Medical Center</b>	Hospital Charge	\$3,521	N/A	\$4,384	N/A	\$3,521	\$3,935	\$6,317	\$3,521	\$3,521	\$3,521
	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
<b>Copley Hospital</b>	Hospital Charge	\$1,899	\$0	\$2,035	\$0	\$2,924	\$2,797	\$4,849	\$2,924	\$2,035	\$3,242
	Physician Charge	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	Total Charge	\$1,899	\$0	\$2,035	\$0	\$2,924	\$2,797	\$4,849	\$2,924	\$2,035	\$3,242
<b>University of Vermont Medical Center</b>	Hospital Charge	\$4,331	N/A	\$3,766	\$2,654	\$4,105	\$5,069	\$6,039	\$4,331	\$4,266	\$4,173
	Physician Charge	\$287	\$347	\$257	\$256	\$318	\$382	\$490	\$318	\$318	\$318
	Total Charge	\$4,618	\$347	\$4,023	\$2,910	\$4,423	\$5,451	\$6,529	\$4,649	\$4,584	\$4,491
<b>S Gifford Medical Center</b>	Hospital Charge										
	Physician Charge										
	Total Charge										
<b>Grace Cottage Family Health &amp; Hospital</b>	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
<b>Mt. Ascutney Hospital</b>	Hospital Charge	\$5,209	N/A	\$5,861	\$3,248	\$5,342	N/A	\$7,581	\$4,899	\$4,899	\$4,899
	Physician Charge	\$0	N/A	\$0	\$0	\$0	N/A	\$0	\$0	\$0	\$0
	Total Charge	\$5,209	N/A	\$5,861	\$3,248	\$5,342	N/A	\$7,581	\$4,899	\$4,899	\$4,899
<b>North Country Hospital</b>	Hospital Charge	\$2,896	\$3,519	\$3,994	\$2,883	\$5,300	\$4,223	\$7,399	\$4,819	\$4,885	\$4,940
	Physician Charge	\$348	\$422	\$527	\$282	\$602	\$648	\$1,019	\$664	\$667	\$611
	Total Charge	\$3,244	\$3,941	\$4,521	\$3,165	\$5,902	\$4,871	\$8,417	\$5,483	\$5,552	\$5,550
<b>Northeastern Vermont Regional Hospital</b>	Hospital Charge	\$3,539	\$2,893	\$4,006	\$3,099	\$4,004	\$4,126	\$5,680	\$4,090	\$3,995	\$4,156
	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
<b>Northwestern Medical Center</b>	Hospital Charge	\$2,838	\$2,106	\$2,838	\$2,579	\$2,554	\$2,144	\$3,121	\$3,121	\$3,121	\$3,121
	Physician Charge	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	Total Charge	\$2,838	\$2,106	\$2,838	\$2,579	\$2,554	\$2,144	\$3,121	\$3,121	\$3,121	\$3,121
<b>Porter Hospital</b>	Hospital Charge	\$2,146	\$2,664	\$4,214	N/A	\$3,697	\$2,666	\$5,007	\$3,321	\$3,638	\$3,633
	Physician Charge	\$334	\$401	\$297	N/A	\$367	\$442	\$567	\$367	\$367	\$369
	Total Charge	\$2,480	\$3,065	\$4,511	N/A	\$4,064	\$3,108	\$5,574	\$3,688	\$4,005	\$4,002
<b>Rutland Regional Medical Center</b>	Hospital Charge	\$3,921	\$4,318	\$3,846	\$4,311	\$4,167	\$4,527	\$5,741	\$4,125	\$4,139	\$4,145
	Physician Charge	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	Total Charge	\$3,921	\$4,318	\$3,846	\$4,311	\$4,167	\$4,527	\$5,741	\$4,125	\$4,139	\$4,145
<b>Southwestern Vermont Medical Center</b>	Hospital Charge	\$3,605	\$3,727	\$4,472	\$4,653	\$4,243	\$4,405	\$4,612	\$4,186	\$3,605	\$4,320
	Physician Charge	\$242	\$257	\$242	\$105	\$268	\$242	\$358	\$279	\$279	\$242
	Total Charge	\$3,847	\$3,984	\$4,714	\$4,758	\$4,511	\$4,674	\$4,970	\$4,465	\$3,884	\$4,562
<b>S Springfield Hospital</b>	Hospital Charge										
	Physician Charge										
	Total Charge										
<b>Hospital System Averages</b>	Hospital Charge	\$3,397	\$3,127	\$3,898	\$2,928	\$3,938	\$3,968	\$5,649	\$3,890	\$3,778	\$3,964
	Physician Charge	\$135	\$178	\$147	\$92	\$173	\$218	\$270	\$181	\$181	\$171
	Total Charge	\$3,502	\$2,944	\$3,979	\$2,621	\$4,149	\$4,170	\$5,841	\$4,090	\$3,964	\$4,163

	CPT Code	72149	72156	72157	72158	72195	72197	72198	73221	73222	73221
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
<b>Brattleboro Memorial Hospital</b>	Hospital Charge	\$5,789	\$5,789	\$5,789	\$5,789	\$3,458	\$5,789	N/A	\$3,458	\$2,670	\$3,458
	Physician Charge	\$0	\$0	\$0	\$0	\$0	\$0	N/A	\$0	\$0	\$0
	Total Charge	\$5,789	\$5,789	\$5,789	\$5,789	\$3,458	\$5,789	\$0	\$3,458	\$2,670	\$3,458
<b>Central Vermont Medical Center</b>	Hospital Charge	\$3,935	\$6,317	\$6,317	\$6,317	\$3,521	\$6,317	N/A	\$3,521	\$3,935	\$3,521
	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
<b>Copley Hospital</b>	Hospital Charge	\$2,621	\$2,810	\$2,810	\$2,810	\$2,002	\$2,810	\$2,810	\$2,924	\$4,413	\$2,924
	Physician Charge	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	Total Charge	\$2,621	\$2,810	\$2,810	\$2,810	\$2,002	\$2,810	\$2,810	\$2,924	\$4,413	\$2,924
<b>University of Vermont Medical Center</b>	Hospital Charge	\$2,777	\$6,143	\$6,135	\$6,117	\$4,168	\$4,946	\$2,656	\$3,990	\$4,380	\$3,909
	Physician Charge	\$382	\$490	\$490	\$490	\$313	\$469	\$382	\$292	\$348	\$291
	Total Charge	\$3,159	\$6,633	\$6,625	\$6,607	\$4,481	\$5,415	\$3,038	\$4,282	\$4,728	\$4,200
<b>§ Gifford Medical Center</b>	Hospital Charge										
	Physician Charge										
	Total Charge										
<b>Grace Cottage Family Health &amp; Hospital</b>	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
<b>Mt. Ascutney Hospital</b>	Hospital Charge	\$5,651	\$7,581	\$7,581	\$7,581	\$5,311	\$7,586	N/A	\$5,046	\$5,420	\$5,160
	Physician Charge	\$0	\$0	\$0	\$0	\$0	\$0	N/A	\$0	\$0	\$0
	Total Charge	\$5,651	\$7,581	\$7,581	\$7,581	\$5,311	\$7,586	N/A	\$5,046	\$5,420	\$5,160
<b>North Country Hospital</b>	Hospital Charge	\$4,233	\$6,479	\$4,184	\$6,816	\$3,695	\$6,377	\$3,001	\$3,757	\$6,036	\$3,750
	Physician Charge	\$538	\$985	\$889	\$980	\$603	\$920	\$428	\$429	\$496	\$551
	Total Charge	\$4,771	\$7,464	\$5,073	\$7,796	\$4,299	\$7,297	\$3,429	\$4,186	\$6,532	\$4,301
<b>Northeastern Vermont Regional Hospital</b>	Hospital Charge	\$4,156	\$4,604	\$4,959	\$4,752	\$3,616	\$4,788	\$3,823	\$4,339	\$4,646	\$4,339
	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
<b>Northwestern Medical Center</b>	Hospital Charge	\$2,152	\$3,121	\$3,121	\$3,121	\$2,837	\$2,935	N/A	\$6,237	\$6,237	\$6,237
	Physician Charge	\$0	\$0	\$0	\$0	\$0	\$0	N/A	\$0	\$0	\$0
	Total Charge	\$2,152	\$3,121	\$3,121	\$3,121	\$2,837	\$2,935	N/A	\$6,237	\$6,237	\$6,237
<b>Porter Hospital</b>	Hospital Charge	\$2,501	\$4,838	\$4,956	\$4,697	\$1,746	\$4,105	N/A	\$3,201	\$4,276	\$3,470
	Physician Charge	\$443	\$568	\$568	\$568	\$363	\$544	N/A	\$337	\$405	\$337
	Total Charge	\$2,944	\$5,406	\$5,524	\$5,265	\$2,109	\$4,649	N/A	\$3,538	\$4,681	\$3,807
<b>Rutland Regional Medical Center</b>	Hospital Charge	\$4,398	\$5,747	\$6,009	\$5,766	\$3,959	\$5,440	\$3,471	\$4,029	\$4,687	\$3,932
	Physician Charge	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	Total Charge	\$4,398	\$5,747	\$6,009	\$5,766	\$3,959	\$5,440	\$3,471	\$4,029	\$4,687	\$3,932
<b>Southwestern Vermont Medical Center</b>	Hospital Charge	\$4,523	\$4,739	\$4,932	\$4,729	\$3,607	\$4,508	N/A	\$4,300	\$4,588	\$4,305
	Physician Charge	\$289	\$388	\$388	\$358	\$222	\$279	N/A	\$242	\$257	\$242
	Total Charge	\$4,812	\$5,127	\$5,320	\$5,087	\$3,829	\$4,787	N/A	\$4,542	\$4,845	\$4,547
<b>§ Springfield Hospital</b>	Hospital Charge										
	Physician Charge										
	Total Charge										
<b>Hospital System Averages</b>	Hospital Charge	\$3,885	\$5,288	\$5,163	\$5,318	\$3,447	\$5,055	\$3,152	\$4,073	\$4,662	\$4,091
	Physician Charge	\$184	\$270	\$259	\$266	\$167	\$246	\$203	\$144	\$167	\$158
	Total Charge	\$4,033	\$5,520	\$5,317	\$5,536	\$3,587	\$5,190	\$2,550	\$4,249	\$4,912	\$4,285