

Table 3E - Radiology Services (Computed Tomography)

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 3E - Radiology Services - Computed Tomography (CT Scans)

- 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 Description	70450	70460	70470	70486	70487	70491	71250	71260	72125	72126	72131	72132	72192	72193	72194
		CT scan of head without contrast	CT scan of head with contrast	CT scan of head (multiple sections) with and without contrast	CT scan of face & jaw without contrast	CT scan of face & jaw with contrast	CT scan of neck with contrast	CT scan of chest without contrast	CT scan of chest with contrast	CT scan of cervical spine without contrast	CT scan of cervical spine with contrast	CT scan of lumbar spine without contrast	CT scan of lumbar spine with contrast	CT scan of pelvis without contrast	CT scan of pelvis with contrast	CT scan of pelvis (multiple sections) with and without contrast
§ Brattleboro Memorial Hospital	Hospital Charge															
	Physician Charge															
	Total Charge															
Central Vermont Medical Center	Hospital Charge	\$1,741	\$2,030	\$2,548	\$2,217	\$2,549	\$2,622	\$1,882	\$2,309	\$1,817	\$2,055	\$1,858	\$1,935	\$1,837	\$2,197	\$2,266
	Physician Charge	\$13	\$134	\$148	\$137	\$156	\$168	\$139	\$148	\$137	\$234	\$186	\$142	\$174	\$133	n/a
	Total Charge	\$1,753	\$2,164	\$2,696	\$2,354	\$2,705	\$2,789	\$2,021	\$2,457	\$1,954	\$2,290	\$2,044	\$2,076	\$2,011	\$2,331	n/a
Copley Hospital	Hospital Charge	\$977	\$699	\$1,205	\$977	\$699	\$1,191	\$1,021	\$1,191	\$977	\$1,553	\$430	\$1,553	\$430	\$699	n/a
	Physician Charge	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	n/a
	Total Charge	\$977	\$699	\$1,205	\$977	\$699	\$1,191	\$1,021	\$1,191	\$977	\$1,553	\$430	\$1,553	\$430	\$699	n/a
University of Vermont Medical Center	Hospital Charge	\$3,059	\$2,990	\$3,568	\$3,117	\$3,589	\$3,065	\$2,645	\$3,833	\$2,981	\$3,345	\$2,857	\$3,459	\$2,727	\$3,694	\$3,679
	Physician Charge	\$195	\$254	\$285	\$192	\$253	\$309	\$243	\$262	\$225	\$274	\$225	\$274	\$244	\$261	\$274
	Total Charge	\$3,251	\$3,244	\$3,853	\$3,309	\$3,842	\$3,374	\$2,888	\$4,095	\$3,206	\$3,619	\$3,082	\$3,733	\$2,971	\$3,955	\$3,953
§ Gifford Medical Center	Hospital Charge															
	Physician Charge															
	Total Charge															
Grace Cottage Family Health & Hospital	Hospital Charge	\$2,002	\$2,497	\$3,052	\$2,178	\$2,547	\$2,547	\$2,537	\$3,037	\$2,537	\$3,028	\$2,537	\$3,028	\$2,566	\$2,850	\$3,516
	Physician Charge	\$163	\$233	\$242	\$218	\$263	\$263	\$163	\$233	\$163	\$233	\$163	\$233	\$207	\$218	\$218
	Total Charge	\$2,165	\$2,730	\$3,294	\$2,396	\$2,810	\$2,810	\$2,700	\$3,270	\$2,700	\$3,261	\$2,700	\$3,261	\$2,773	\$3,068	\$3,734
Mt. Ascutney Hospital	Hospital Charge	\$2,237	\$3,000	\$3,544	\$2,833	\$3,462	\$3,640	\$2,936	\$3,330	\$2,847	\$3,505	\$1,442	\$3,504	\$2,905	\$3,461	\$4,571
	Physician Charge	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	Total Charge	\$2,237	\$3,000	\$3,544	\$2,833	\$3,462	\$3,640	\$2,936	\$3,330	\$2,847	\$3,505	\$1,442	\$3,504	\$2,905	\$3,461	\$4,571
North Country Hospital	Hospital Charge	\$1,846	\$1,984	\$2,736	\$2,122	\$2,558	\$2,423	\$1,997	\$2,494	\$2,128	\$1,754	\$2,163	\$1,754	\$2,047	\$2,430	\$2,060
	Physician Charge	\$456	\$427	\$490	\$416	\$275	\$492	\$430	\$483	\$439	\$298	\$441	\$287	\$492	\$492	\$381
	Total Charge	\$2,301	\$2,411	\$3,227	\$2,538	\$2,833	\$2,914	\$2,427	\$2,978	\$2,567	\$2,052	\$2,604	\$2,041	\$2,538	\$2,922	\$2,440
Northeastern Vermont Regional Hospital	Hospital Charge	\$533	\$561	\$864	\$533	\$561	\$561	\$533	\$561	\$533	\$534	\$533	\$561	\$533	\$561	\$864
	Physician Charge	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	Total Charge	\$533	\$561	\$864	\$533	\$561	\$561	\$533	\$561	\$533	\$534	\$533	\$561	\$533	\$561	\$864
Northwestern Medical Center	Hospital Charge	\$1,755	\$1,253	\$1,888	\$1,755	\$1,755	\$1,755	\$1,755	\$1,755	\$1,755	\$1,366	\$1,755	\$1,740	\$1,755	\$1,755	\$2,316
	Physician Charge	n/a	n/a	n/a	n/a	n/a	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	n/a	n/a	n/a	n/a	n/a
Porter Hospital	Hospital Charge	\$1,642	\$2,004	\$2,453	\$1,758	\$2,108	\$2,112	\$2,086	\$2,436	\$2,086	\$2,502	\$2,086	\$2,425	\$2,051	\$2,334	\$3,380
	Physician Charge	\$89	\$120	\$134	\$90	\$119	\$146	\$123	\$131	\$112	\$129	\$104	\$129	\$114	\$123	\$129
	Total Charge	\$1,731	\$2,124	\$2,587	\$1,848	\$2,227	\$2,258	\$2,209	\$2,567	\$2,198	\$2,631	\$2,192	\$2,554	\$2,165	\$2,457	\$3,509
Rutland Regional Medical Center	Hospital Charge	\$1,601	\$1,922	\$2,327	\$1,954	\$2,391	\$2,152	\$1,790	\$2,269	\$1,940	\$2,156	\$1,903	\$2,663	\$1,824	\$2,183	\$2,439
	Physician Charge	n/a	n/a	n/a	n/a	n/a	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	n/a	n/a	n/a	n/a	n/a
Southwestern Vermont Medical Center	Hospital Charge	\$1,937	\$2,140	\$2,698	\$1,931	\$2,075	\$2,505	\$2,226	\$2,499	\$2,226	\$2,498	\$2,226	\$2,498	\$2,226	\$2,549	\$2,916
	Physician Charge	n/a	n/a	n/a	n/a	n/a	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	n/a	n/a	n/a	n/a	n/a
Springfield Hospital	Hospital Charge	\$930	\$1,130	\$2,006	\$930	\$3,004	\$1,483	\$995	\$1,455	\$3,010	\$1,889	\$1,988	\$2,499	\$1,701	\$2,290	\$2,577
	Physician Charge	n/a	n/a	n/a	n/a	n/a	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	n/a	n/a	n/a	n/a	n/a
Hospital System Averages	Hospital Charge	\$1,688	\$1,851	\$2,407	\$1,859	\$2,275	\$2,171	\$1,867	\$2,264	\$2,070	\$2,182	\$1,815	\$2,302	\$1,883	\$2,250	\$2,780
	Physician Charge	\$131	\$167	\$186	\$150	\$152	\$197	\$157	\$180	\$154	\$167	\$160	\$152	\$176	\$175	\$200
	Total Charge	\$1,869	\$2,117	\$2,659	\$2,099	\$2,392	\$2,442	\$2,092	\$2,556	\$2,123	\$2,431	\$1,878	\$2,410	\$2,041	\$2,432	\$3,179

All Vermont Community Hospitals

	CPT Code	74150	74160	74170	74176	74177	74178
Hospital	Description	CT scan of abdomen without contrast	CT scan of abdomen with contrast	CT scan of abdomen (multiple sections) with and without contrast	CT scan of abdomen & pelvis without contrast	CT scan of abdomen & pelvis with contrast	CT scan of abdomen & pelvis (multiple sections) with and without contrast
§ Brattleboro Memorial Hospital	Hospital Charge						
	Physician Charge						
	Total Charge						
Central Vermont Medical Center	Hospital Charge	\$2,086	\$2,379	\$3,328	\$3,381	\$4,364	\$4,996
	Physician Charge	\$142	\$149	\$161	\$207	\$217	\$240
	Total Charge	\$2,228	\$2,528	\$3,490	\$3,588	\$4,581	\$5,236
Copley Hospital	Hospital Charge	\$430	\$1,191	\$699	\$1,224	\$1,486	\$1,466
	Physician Charge	\$0	\$0	\$0	\$0	\$0	\$0
	Total Charge	\$430	\$1,191	\$699	\$1,224	\$1,486	\$1,466
University of Vermont Medical Center	Hospital Charge	\$2,795	\$3,568	\$4,189	\$5,153	\$6,188	\$8,135
	Physician Charge	\$267	\$285	\$313	\$392	\$410	\$451
	Total Charge	\$3,062	\$3,853	\$4,502	\$5,555	\$6,598	\$8,586
§ Gifford Medical Center	Hospital Charge						
	Physician Charge						
	Total Charge						
Grace Cottage Family Health & Hospital	Hospital Charge	\$2,524	\$2,907	\$3,059	\$3,598	\$4,381	\$5,256
	Physician Charge	\$218	\$242	\$267	\$331	\$345	\$382
	Total Charge	\$2,742	\$3,149	\$3,326	\$3,929	\$4,726	\$5,638
Mt. Ascutney Hospital	Hospital Charge	\$2,978	\$3,733	\$5,118	\$3,453	\$4,367	\$4,361
	Physician Charge	\$0	\$0	\$0	\$0	\$0	\$0
	Total Charge	\$2,978	\$3,733	\$5,118	\$3,453	\$4,367	\$4,361
North Country Hospital	Hospital Charge	\$2,049	\$2,444	\$2,997	\$2,928	\$4,636	\$5,889
	Physician Charge	\$492	\$487	\$555	\$845	\$887	\$979
	Total Charge	\$2,541	\$2,931	\$3,552	\$3,773	\$5,523	\$6,867
Northeastern Vermont Regional Hospital	Hospital Charge	\$533	\$561	\$864	\$1,490	\$1,100	\$1,650
	Physician Charge	n/a	n/a	n/a	n/a	n/a	n/a
	Total Charge	\$533	\$561	\$864	\$1,490	\$1,100	\$1,650
Northwestern Medical Center	Hospital Charge	\$1,755	\$1,755	\$1,888	\$3,445	\$3,445	\$3,631
	Physician Charge	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
Porter Hospital	Hospital Charge	\$2,029	\$2,387	\$2,671	\$2,746	\$3,102	\$3,600
	Physician Charge	\$126	\$134	\$148	\$183	\$192	\$211
	Total Charge	\$2,155	\$2,521	\$2,819	\$2,929	\$3,294	\$3,811
Rutland Regional Medical Center	Hospital Charge	\$1,834	\$2,288	\$2,727	\$3,525	\$3,673	\$4,761
	Physician Charge	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
Southwestern Vermont Medical Center	Hospital Charge	\$2,229	\$2,503	\$3,272	\$3,053	\$3,674	\$5,002
	Physician Charge	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
Springfield Hospital	Hospital Charge	\$1,618	\$2,185	\$2,577	\$3,897	\$3,964	\$4,344
	Physician Charge	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
Hospital System Averages	Hospital Charge	\$1,905	\$2,325	\$2,782	\$3,158	\$3,698	\$4,424
	Physician Charge	\$178	\$185	\$206	\$280	\$293	\$323
	Total Charge	\$2,084	\$2,558	\$3,046	\$3,243	\$3,847	\$4,702