## Vantage Diagnostic Imaging

Full List - All Locations QUALIFIED PROCEDURES Reimbursement Schedule

Services include: technical and reading fees.

undle ID	CPT MRI Scans	Procedure		Fee	Oklahoma City	Norman	Tulsa
	70540	MRI, orbit, face, and/or neck; without contrast	\$	500.00	Х	Х	Х
	70542	MRI, orbit, face, and/or neck; with contrast	\$	650.00			
	70543	MRI, orbit, face, and/or neck; without and with contrast	\$	650.00	Х	Х	Х
	70551	MRI, brain (including brain stem); without contrast	\$	500.00	X	X	X
	70552	MRI, brain (including brain stem); with contrast	\$	650.00			
	70553	MRI, brain (including brain stem); without and with contrast	\$	650.00	Х	Х	Х
	71550	MRI, thorax (chest) without contrast	\$	500.00	X	X	X
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	71551	MRI, thorax (chest) with contrast	\$	650.00			
	71552	MRI, thorax (chest) without and with contrast	\$	650.00	Х	Х	Х
	72141	MRI, spinal canal and contents, cervical; without contrast	\$	500.00	X	Х	Х
	72142	MRI, spinal canal and contents, cervical; with contrast	\$	650.00			
	72146	MRI, spinal canal and contents, thoracic; without contrast	\$	500.00	Х	Х	Х
	72147	MRI, spinal canal and contents, thoracic; with contrast	\$	650.00			
	72148	MRI, spinal canal and contents, lumbar; without contrast	\$	500.00	Х	Х	Х
	72149	MRI, spinal canal and contents, lumbar; with contrast	\$	650.00			
	72156	MRI, spinal canal and contents, without and with contrast; cervical	\$	650.00	Х	Х	Х
	72157	MRI, spinal canal and contents, without and with contrast; thoracic	\$	650.00	X	X	X
	72158	MRI, spinal canal and contents, without and with contrast; lumbar	\$	650.00	X	X	X
	72195	MRI, pelvis; without contrast	\$	500.00	Х	Х	Х
	72196	MRI, pelvis; with contrast	\$	650.00			
	72197	MRI, pelvis; without and with contrast	\$	650.00	Х	Х	Х
	73218	MRI, upper extremity, other than joint; without contrast	\$	500.00	Х	Х	Х
	73219	MRI, upper extremity, other than joint; with contrast	\$	650.00			
	73220	MRI, upper extremity, other than joint; without and with contrast	\$	650.00	Х	Х	Х
	73220	MRI, any joint of upper extremity; without contrast	\$		X	X	X
				500.00	۸.	^	_ ^
	73222	MRI, any joint of upper extremity; with contrast	\$	650.00			
	73223	MRI, any joint of upper extremity; without and with contrast	\$	650.00	Х	Х	Х
	73718	MRI, lower extremity other than joint; without contrast	\$	500.00	Х	Х	Х
	73719	MRI, lower extremity other than joint; with contrast	\$	650.00			
	73720	MRI, lower extremity other than joint; without and with contrast	\$	650.00	Х	Х	Х
	73721	MRI, any joint of lower extremity; without contrast	\$	500.00	Х	Х	Х
	73722	MRI, any joint of lower extremity; with contrast	\$	650.00			
	73723	MRI, any joint of lower extremity; without and with contrast	\$	650.00	Х	Х	Х
	74181	MRI, abdomen; without contrast	\$	500.00	Х	Х	Х
	74182	MRI, abdomen; with contrast	\$	650.00			
	74183	MRI, abdomen; without and with contrast	\$	650.00	Х	X	Х
	MRA						
	70544	MRA, head; without contrast	\$	500.00	Х	Х	Х
	70545	MRA, head; with contrast	\$	650.00			
	70547	MRA, neck; without contrast	\$	500.00	Х	Х	Х
	70548		\$	650.00	Α	Α	
		MRA, neck; with contrast	1.9	650.00		l	
	CT Scans						
	70450	CT, head or brain; without contrast	\$	300.00	Х		Х
	70460	CT, head or brain; with contrast	\$	450.00	Х		
	70470	CT, head or brain; without and with contrast	\$	450.00	X		Х
	70480	CT, outer, middle, or inner ear; without contrast	\$	300.00	X		Х
	70481	CT, outer, middle, or inner ear; with contrast	\$	450.00	Х		
	70482	CT, outer, middle, or inner ear; without and with contrast	\$	450.00	Х		Х
	70486			100.00			X
	70487			300.00	Y		
	70467	CT, maxillofacial area; without contrast	\$	300.00	X		
		CT, maxillofacial area; with contrast	\$	450.00	Х		
	70488	CT, maxillofacial area; with contrast CT, maxillofacial area; without and with contrast	\$ \$ \$	450.00 450.00	X X		Х
	70488 70490	CT, maxillofacial area; with contrast	\$	450.00	Х		X
		CT, maxillofacial area; with contrast CT, maxillofacial area; without and with contrast	\$ \$ \$	450.00 450.00	X X		
	70490	CT, maxillofacial area; with contrast CT, maxillofacial area; without and with contrast CT, soft tissue neck; without contrast	\$ \$ \$ \$	450.00 450.00 300.00	X X X		
	70490 70491	CT, maxillofacial area; with contrast CT, maxillofacial area; without and with contrast CT, soft tissue neck; without contrast CT, soft tissue neck; with contrast CT, soft tissue neck; with contrast	\$ \$ \$ \$	450.00 450.00 300.00 450.00	X X X		Х
	70490 70491 70492 71250	CT, maxillofacial area; with contrast CT, maxillofacial area; without and with contrast CT, soft tissue neck; without contrast CT, soft tissue neck; with contrast CT, soft tissue neck; without and with contrast CT, toft tissue neck; without and with contrast CT, thorax; without contrast	\$ \$ \$ \$ \$	450.00 450.00 300.00 450.00 450.00 300.00	X X X X X		X
	70490 70491 70492 71250 71260	CT, maxillofacial area; with contrast CT, maxillofacial area; without and with contrast CT, soft tissue neck; without contrast CT, soft tissue neck; with contrast CT, soft tissue neck; without and with contrast CT, thorax; without contrast CT, thorax; without contrast CT, thorax; without contrast	\$ \$ \$ \$ \$ \$	450.00 450.00 300.00 450.00 450.00 300.00 450.00	X X X X X X		X X X
	70490 70491 70492 71250 71260 71270	CT, maxillofacial area; with contrast CT, maxillofacial area; without and with contrast CT, soft tissue neck; without contrast CT, soft tissue neck; with contrast CT, soft tissue neck; without and with contrast CT, thorax; without contrast CT, thorax; with contrast CT, thorax; with contrast CT, thorax; without and with contrast CT, thorax; without and with contrast	\$ \$ \$ \$ \$ \$ \$	450.00 450.00 300.00 450.00 450.00 300.00 450.00 450.00	X X X X X X		X X X
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	70490 70491 70492 71250 71260 71270 72125 72126	CT, maxillofacial area; with contrast CT, maxillofacial area; without and with contrast CT, soft tissue neck; without contrast CT, soft tissue neck; with contrast CT, soft tissue neck; without and with contrast CT, thorax; without contrast CT, thorax; without contrast CT, thorax; without and with contrast CT, thorax; without and with contrast CT, cervical spine; without contrast CT, cervical spine; without contrast CT, cervical spine; without contrast CT, cervical spine; with contrast	\$ \$ \$ \$ \$ \$ \$	450.00 450.00 300.00 450.00 450.00 300.00 450.00 450.00 300.00 450.00	X X X X X X		X X X
	70490 70491 70492 71250 71260 71270 72125 72126 72127	CT, maxillofacial area; with contrast CT, maxillofacial area; without and with contrast CT, soft tissue neck; without contrast CT, soft tissue neck; with contrast CT, soft tissue neck; with contrast CT, soft tissue neck; without and with contrast CT, thorax; without contrast CT, thorax; without and with contrast CT, thorax; without and with contrast CT, cervical spine; without contrast CT, cervical spine; with contrast CT, cervical spine; with contrast CT, cervical spine; with contrast	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	450.00 450.00 300.00 450.00 450.00 300.00 450.00 450.00 300.00 450.00 450.00	X X X X X X X X X X		X X X X
	70490 70491 70492 71250 71260 71270 72125 72126	CT, maxillofacial area; with contrast CT, maxillofacial area; without and with contrast CT, soft tissue neck; without contrast CT, soft tissue neck; with contrast CT, soft tissue neck; without and with contrast CT, thorax; without contrast CT, thorax; without contrast CT, thorax; without and with contrast CT, thorax; without and with contrast CT, cervical spine; without contrast CT, cervical spine; without contrast CT, cervical spine; without contrast	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	450.00 450.00 300.00 450.00 450.00 300.00 450.00 450.00 300.00 450.00	X X X X X X X		X X X
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	70490 70491 70492 71250 71260 71270 72125 72126 72127 72128 72129 72130 72131 72132 72132 72193 72194	CT, maxillofacial area; with contrast CT, maxillofacial area; without and with contrast CT, soft tissue neck; without contrast CT, soft tissue neck; with contrast CT, soft tissue neck; with contrast CT, soft tissue neck; with contrast CT, thorax; without contrast CT, thorax; without and with contrast CT, thorax; without and with contrast CT, cervical spine; without contrast CT, cervical spine; with contrast CT, cervical spine; with contrast CT, thoracic spine; without and with contrast CT, thoracic spine; without contrast CT, thoracic spine; without contrast CT, tumbar spine; without and with contrast CT, lumbar spine; without and with contrast CT, lumbar spine; without and with contrast CT, pelvis; without and with contrast CT, pelvis; without and with contrast CT, pelvis; without and with contrast CT, upper extremity; without contrast CT, upper extremity; without contrast	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	450.00 450.00 450.00 450.00 450.00 300.00 450.00 300.00 450.00 300.00 450.00 300.00 450.00 300.00 450.00 300.00 450.00 300.00 450.00	X X X X X X X X X X X X X X X X X X X		X X X X X X X X X X X X X X X X X X X
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## Vantage Diagnostic Imaging

Full List - All Locations QUALIFIED PROCEDURES Reimbursement Schedule

Services include: technical and reading fees.

Bundle ID	СРТ	Procedure	Fee	Oklahoma City	Norman	Tulsa
ULTRASOUND						
OLTRASCOND	76775	Aorta	\$ 100.00			Х
	76700	Abdomen	\$ 150.00			X
	93975	Vascular Abdominal	\$ 300.00			X
	76770	Kidneys (Renal)	\$ 135.00			X
	93975	Renal Artery Duplex Scan Complete	\$ 240.00			X
-	93976	Renal Artery Duplex Scan Complete  Renal Artery Duplex Scan Limited	\$ 195.00			X
-	93880	Carotid	\$ 195.00			X
-						
	76981	Abdomen Elastography				X
	76856	Pelvic Area (Non-OB) Trans Abdominal	\$ 135.00			Х
	76830	Pelvic Area (Non-OB) Trans Vaginal	\$ 150.00			Х
	76857	Bladder	\$ 100.00			X
	76870	Testicles	\$ 100.00			X
	93971	Venous Upper & Lower Ext. Unilateral	\$ 150.00			X
	93970	Venous Upper & Lower Ext. Bilateral	\$ 235.00			X
	76536	Neck/Head	\$ 135.00			Х
	76881	Elbow	\$ 135.00			Х
	76881	Hands/Wrist	\$ 135.00			Х
	76881	Knee	\$ 135.00			Х
	76881	Ankle	\$ 135.00			Х
	76881	Foot	\$ 135.00			Х
	76604	Chest	\$ 125.00			X
	76604	Upper Back	\$ 125.00	İ		X
	76705	Lower Back	\$ 125.00			Х
	76881	Groin	\$ 135.00			Х