YOUR GUIDE TO CLEAR COSTS

Clarity Care

913.944.4900
9040 Quivira Road
Lenexa, KS 66215
ClarityCareKC.com

CT PRICING

	Standard Fee				Cash Discount Price			
	Out-of-pocket cost may be less after insurance.				Pay prior to service, no insurance claims			
	Call (913) 944-4928 for an estimate.							
Exam	Without Contrast	With Contrast*	Without + With Contrast*	Angiography (CTA)	Without Contrast	With Contrast*	Without + With Contrast*	Angiography (CTA)
Abdomen	$330	$525	$540	$645	$300	$350	$400	$525
Abdomen +Pelvis	$440	$740	$830	$910	$395	$650	$750	$820
Chest/Thorax	$320	$405	$480	$585	$300	$350	$400	$525
Extremity-Lower	$315	$405	$470	$590	$300	$350	$400	$525
Extremity-Upper	$345	$495	$520	$585	$300	$350	$400	$525
Head/Brain	$255	$360	$420	$580	$225	$350	$400	$525
Heart Calcium Scoring Screening	$235	n/a	n/a	n/a	$100	n/a	n/a	n/a
Lung Cancer Screening	$330	n/a	n/a	n/a	$300	n/a	n/a	n/a
Neck Soft Tissue	$360	$445	$540	$580	$300	$350	$400	$525
Pelvis	$320	$515	$520	$585	$300	$350	$400	$525
Sinus/ Maxillofacial	$310	$370	$450	n/a	$300	$350	$400	n/a
Spine-Cervical/ Neck	$315	$410	$480	n/a	$300	$350	$400	n/a
Spine-Lumbar/ Lower	$315	$410	$480	n/a	$300	$350	$400	n/a
Spine-Lumbar/ Chest	$315	$410	$480	n/a	$300	$350	$400	n/a

BREAST IMAGING PRICING

	Standard Fee	Cash Discount Price
	Out-of-pocket cost may be less after insurance.	Pay prior to service, no insurance claims
	Call (913) 944-4928 for an estimate.	
Exam		
Mammogram, Screening, with Tomosynthesis*	$355	$200
Mammogram, Diagnostic with Tomo, Both Breasts	$595	$200
Mammogram, Diagnostic with Tomo, One Breast	$470	$200
MRI, Breast - Complete	$690	$625
MRI Breast-FAST/ Limited	$500	$450
Ultrasound Breast, Complete	$205	$125
Ultrasound Breast, Limited	$170	$100

*Screening mammograms are 100% covered by most insurance plans annually starting at age 40.

ULTRASOUND PRICING

	Standard Fee Out-of-pocket cost may be less after insurance. **Call (913) 944-4928 for an estimate.**	Cash Discount Price Pay prior to service, no insurance claims
Exam		
Abdomen, Complete	$230	$150
Abdomen, Limited	$170	$115
Abdominal Aortic Aneurysm Screening	$210	$190
Arms, Duplex Scan, Complete	$385	$345
Arm(s), Duplex Scan, Limited	$240	$215
Arterial Inflow/Venous Outflow, Complete	$515	$465
Arterial Inflow/Venous Outflow, Limited	$280	$255
Breast, Complete	$205	$125
Breast, Limited	$170	$100
Chest	$130	$110
Extremity Arteries, Physiologic, Limited	$160	$145
Extremity Arteries, Physiologic, Complete	$255	$230
Extremity Veins, Duplex Scan, Complete	$365	$325
Extremity Veins, Duplex Scan, Limited	$230	$210
Extremity, Non Vascular, Limited	$125	$115
Extracranial Arteries (Carotids, etc.), bilateral	$370	$250

ULTRASOUND PRICING

Exam		
Extracranial Arteries (Carotids, etc.), Limited	$245	$165
Head/Neck Soft Tissues	$215	$150
OB <14 Weeks Single Fetus, Complete	$235	$150
OB <14 Weeks Additional Fetus, Complete	$120	$80
OB >= 14 Weeks Single Fetus, Complete	$270	$150
OB >=14 Weeks Additional Fetus, Complete	$175	$100
OB, Fetal Biophysical Profile	$170	$100
OB, Follow Up, per fetus	$220	$125
OB, Limited	$160	$100
OB, Transvaginal	$185	$100
OB, Umbilical Artery Doppler	$90	$80
Legs, Duplex Scan, Complete	$465	$420
Leg(s), Duplex Scan, Limited	$250	$225
Pelvis, Complete	$210	$150
Pelvis, Limited	$100	$90
Retroperitoneal, Complete	$215	$195
Retroperitoneal, Limited	$120	$110
Scrotum	$195	$150
Transvaginal, Non-OB	$235	$150

MRI PRICING

	Standard Fee			Cash Discount Price		
	Out-of-pocket cost may be less after insurance.			Pay prior to service, no insurance claims		
	Call (913) 944-4928 for an estimate.					
Exam	Without Contrast	With Contrast*	Without + With Contrast*	Without Contrast	With Contrast*	Without + With Contrast*
Abdomen	$550	$855	$955	$500	$750	$850
Abdomen MR Angiography	$940	$940	$940	$850	$850	$850
Brain	$540	$755	$890	$500	$700	$800
Breast-Complete	$690	$690	$690	$625	$625	$625
Breast-Fast/Ltd	$500	$500	$500	$450	$450	$450
Chest	$740	n/a	$1,170	$650	n/a	$1,050
Chest MR Angiography	$940	$940	$940	$850	$850	$850
Extremity-Lower-Joint	$560	$895	$1,100	$500	$600	$1,000
Extremity-Lower-Non Joint	$630	n/a	$955	$550	n/a	$850
Extremity-Lower-MR Angiography	$940	$940	$940	$850	$850	$850
Extremity-Upper-Joint	$560	$895	$1,105	$500	$600	$1,000
Extremity-Upper-Non Joint	$725	n/a	$1,170	$650	n/a	$1,050
Face, Neck and/or Orbits	$635	$410	$480	$300	$350	$400
Head MR Angiography	$595	$630	$910	$550	$600	$800
Neck MR Angiography	$600	$675	$955	$550	$600	$850
Pelvis	$645	n/a	$955	$600	n/a	$850
Pelvis MR Angiography	$945	$945	$945	$850	$850	$850
Prostate	n/a	n/a	$955	n/a	n/a	$900
Spine-Cervical/Neck	$530	$770	$895	$500	$700	$800
Spine-Lumbar/Lower	$530	$770	$895	$500	$700	$800
Spine-Thoracic/Chest	$530	$770	$895	$500	$700	$800

DEXA BONE DENSITY PRICING

	Standard Fee	Cash Discount Price
	Out-of-pocket cost may be less after insurance.	Pay prior to service, no insurance claims
	Call (913) 944-4928 for an estimate.	
Exam		
Axial (eg, hips, pelvis, spine)	$80	$60
Peripheral (forearm, wrist, heel)	$65	$60

X-RAY PRICING

	Standard Fee Out-of-pocket cost may be less after insurance. **Call (913) 944-4928 for an estimate.**	Cash Discount Price Pay prior to service, no insurance claims
Exam	Price	Price
Ankle, 2 views	$65	$55
Ankle, 3+ views	$75	$55
Arm, Upper (Humerus)	$65	$55
Chest 1 view	$50	$45
Chest 2 views	$70	$55
Clavicle (collarbone)	$65	$60
Elbow, 2 views	$60	$55
Elbow, 3 views	$65	$55
Finger(s), 2+ views	$75	$70
Foot, 2 views	$60	$50
Foot, 3+ views	$70	$55
Forearm, 2 views	$60	$55
Hand, 2 views	$65	$60
Hand, 3 views	$75	$60
Hip, 1 view	$65	$55
Hip, 2-3 views	$95	$55
Hips, 2 views	$85	$75
Hips, 3-4 views	$105	$95
Hips, 5+ views	$125	$110
Knee, 1-2 views	$70	$55
Knee, 3 views	$80	$55

X-RAY PRICING

Exam		Price
Knee, 4+ views	$95	$85
Knees, standing, 1 view	$80	$70
Leg, Lower (Tibia & Fibula) 2 views	$65	$55
Leg, Upper (Femur) 2+ views	$70	$55
Pelvis, 1-2 views	$55	$50
Ribs, unilateral 2 views	$75	$65
Ribs/Chest, 3+ views	$85	$75
Sacroiliac Joints, 3+ views	$80	$70
Sacrum & Coccyx (tailbone)	$65	$60
Sacroiliac Joints, 3+ views	$80	$70
Sacrum & Coccyx (tailbone)	$65	$60
Shoulder, 1 view	$45	$40
Shoulder, 2+ views	$70	$55
Spine, Cervical, thoracic or lumbar, 1 view	$50	$45
Spine-Cervical/Neck 2-3 views	$80	$70
Spine-Cervical/Neck 4-5 views	$105	$90
Spine-Cervical/Neck 6+ views	$125	$110
Spine-Lumbar/Lower 2-3 views	$80	$70
Spine-Lumbar/Lower 4+ views	$105	$90
Spine, Scoliosis Evaluation 1 view	$85	$75
Spine, Scoliosis Evaluation 2-3 views	$140	$125
Spine-Thoracic/Chest 2 views	$65	$55
Spine-Thoracic/Chest 3 views	$80	$70
Wrist, 2 views	$70	$55
Wrist, 3 views	$80	$55

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