

ProScan Imaging – One Bill, One Low Cost!

Self-Payment Fee Comparison

ProScan Total Fee (Scan and Read Fee)**

	ProScan Imaging	Minimum Average Savings
MRI Brain (without contrast)	\$600	76%
MRI Brain (with and without contrast)	\$1,200	63%
MRI Lumbar Spine (without contrast)	\$600	70%

Save Up To 76% at ProScan

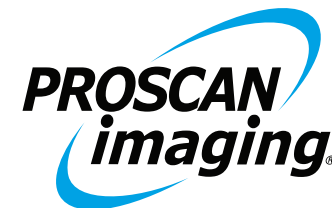
First Bill (Hospital Scan Fee Only)*

	Kettering Health	UC Health	Atrium Medical Center (Premier)	Good Samaritan North Hospital (Premier)	Miami Valley Hospital (Premier)	Upper Valley Medical Center (Premier)	Clinton Memorial Hospital
MRI Brain (without contrast)	\$2,627	N/A	N/A	N/A	N/A	N/A	\$2455.30
MRI Brain (with and without contrast)	\$3,023	\$3,486	\$3,091	\$3,091	\$3,091	\$3,091	\$3537.70
MRI Lumbar Spine (without contrast)	N/A	\$2,420	\$1,861	\$1,861	\$1,861	\$1,861	N/A

Second Bill Radiology Read Fee



For a price quote or to schedule an appointment, visit www.proscan.com or call 1-877-PROSCAN.



1-877-PROSCAN
www.proscan.com

* The hospital prices listed above include ONLY the scanning fee and DO NOT include the fee charged by the hospital's radiology group who reads your study.

These fees do not include discounts that may be offered through each hospital's Financial Assistance Program. SOURCES: Hospital pricing based on information obtained directly from each hospital's website and made public pursuant to Ohio Revised Code 3727.42. Effective dates are as follows: Kettering Health - 1/1/17; UC Health (West Chester Hospital) - 7/1/17; Atrium (Premier) - 1/1/17; Good Samaritan North Hospital (Premier) - 1/1/17; Miami Valley Hospital (Premier) - 1/1/17; Upper Valley Hospital (Premier) - 1/1/17; Clinton Memorial Hospital - 8/7/17. N/A – Pricing not available on hospital's website.

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Self-Payment Fee Comparison

ProScan Total Fee (Scan and Read Fee)**

	ProScan Imaging	Minimum Average Savings
CT Head (w/o contrast)	\$400	60%
CT C-Spine (w/o contrast)	\$400	63%
CT Head (w/wo contrast)	\$600	73%
CT Abdomen (w/ contrast)	\$500	74%
CT Chest (w/ contrast)	\$500	78%
CT Pelvis (w/ contrast)	\$500	75%
CT Abdomen & Pelvis (w/wo contrast)	\$600	89%

Save Up To 88% at ProScan

First Bill (Hospital Scan Fee Only)*

	Kettering Health	UC Health	Atrium Medical Center (Premier)	Good Samaritan North Hospital (Premier)	Miami Valley Hospital (Premier)	Upper Valley Medical Center (Premier)	Clinton Memorial Hospital
CT Head (w/o contrast)	N/A	\$1,608	\$765	\$765	\$765	\$765	\$1,264
CT C-Spine (w/o contrast)	N/A	\$1,854	\$765	\$765	\$765	\$765	\$1,634
CT Head (w/wo contrast)	\$2,247	N/A	N/A	N/A	N/A	N/A	N/A
CT Abdomen (w/ contrast)	N/A	\$2,206	\$1,611	\$1,611	\$1,611	\$1,611	N/A
CT Chest (w/ contrast)	N/A	\$1,913	N/A	N/A	N/A	N/A	\$1797.80
CT Pelvis (w/ contrast)	N/A	\$2,020	\$1,611	\$1,611	\$1,611	\$1,611	N/A
CT Abdomen & Pelvis (w/wo contrast)	\$7,976	N/A	N/A	N/A	N/A	N/A	\$2583.85



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