



ACCEPTED INSURANCE PLANS	CONTACT INFORMATION	AUTH REQUIRED FOR:	DAYS REQD TO GET AUTH:	RADIA CAN START:
Aetna	888-632-3862 or myportal.medsolutions.com	MRI, CT	1-3 Days	✓
Apple Health (Formerly DSHS)	888-213-7513 or qualishealth.org	MRI, CT	14 Days	✓
Amerigroup	800-454-3730	MRI, CT	5-7 Days	✓
Blue Cross Anthem*	877-291-0360	MRI, CT	2-4 Days	✓
Blue Cross/Blue Shield Federal Employee Plan	877-291-0509	MRI, CT	2-4 Days	✓
Cigna*	800-244-6224 or myportal.medsolutions.com	MRI, CT	2-4 Days	✓
Community Health Plan of WA (Community Essentials-Administered by First Choice)	800-440-1561	MRI, DXA	5-7 Days	✓
Coordinated Care of WA (Centene/Ambetter)	877-644-4613 or www.radnd.com	MRI, CT	5-7 Days	✓
Crime Victims	360-902-5355	MRI, CT	3-5 Days	✓
First Choice Health Network	888-896-1115	VARIES BY INDIVIDUAL PLAN		✓
First Choice Health Plan	888-896-1115	VARIES BY INDIVIDUAL PLAN		✓
GEHA	866-879-8317 or myportal.medsolutions.com	MRI, CT	4 Days	✓
Greatwest (Administered by Cigna)	800-663-8081 or myportal.medsolutions.com	MRI, CT	2-4 Days	✓
Healthnet FC	888-802-7001	MRI, CT	3-5 Days	✓
Humana (PPO and HMO Plans)	866-825-1550	MRI, CT	5-7 Days	✓
Kaiser Permanente	888-767-4670	MRI, CT	3-5 Days	✓
Labor & Industries (Qualis)	800-541-2894 or qualishealth.org	MRI, CT	14 Days	✓
Lifewise (Administered by Premiera)	866-666-0776 or provideportal.com (AIM)	MRI, CT	2-3 Days	✓
Medicare Complete	VARIES BY INDIVIDUAL PLAN			✓
Molina	855-714-2415 or 877-731-7218 (fax)	MRI, CT	5-7 Days	✓
Premiera (Heritage Prime/Signature, Amazon, PPO and HMO)	866-666-0776 or provideportal.com (AIM)	MRI, CT	2-3 Days	✓
Providence Health	800-920-1250 or provideportal.com (AIM)	MRI, CT	2-3 Days	✓
Regence-Blue Shield (Incl. Selections, Bridgspan and Uniform)	877-291-0509 or provideportal.com (AIM)	MRI, CT	2-3 Days	✓
Regence BCBS Boeing	866-455-2415 or provideportal.com (AIM)	MRI, CT	2-3 Days	✓
Soundpath Health	866-789-7747 or 253-779-8830	MRI, CT	14 Days	✓
Tricare/TriWest/Campus (Healthnet Federal Services)	844-866-9378 tricare-west.com	MRI, CT	5-7 Days	✓
United Healthcare AARP Medicare Complete*	866-889-8054 or www.uhwest.com	VARIES BY INDIVIDUAL PLAN		✓
United Healthcare Community Plan (Medicaid)	866-889-8054 or www.unitedhealthcareonline.com	MRI, CT	14 Days	✓
United Healthcare Commercial Plans	866-889-8054 or www.unitedhealthcareonline.com	VARIES BY INDIVIDUAL PLAN		✓
Worker's Compensation	VARIES BY EMPLOYER			✓

*Please remember to send chart notes with your order for these plans

This is NOT an all-inclusive list of every insurance plan accepted at our imaging center

RADIOLOGY CPT CODES

CT

CT Abdomen & Pelvis W/O Contrast	74176	CT Extremity Lower W/O Contrast	73700	CT Max/Facial W/ Contrast	70487	CT Spine Lumbar W/O Contrast	72131
CT Abdomen & Pelvis W/ Contrast	74177	CT Extremity Lower W/ Contrast	73701	CT Neck W/O Contrast	70490	CT Spine Lumbar W/ Contrast	72132
CT Abdomen & Pelvis W/O & W/ Contrast	74178	CT Extremity Upper W/O Contrast	73200	CT Neck W/ Contrast	70491	CT Spine Thoracic W/O Contrast	72128
CT Abdomen W/O Contrast	74150	CT Extremity Upper W/ Contrast	73201	CT Orbit/ IAC W/O Contrast	70480	CT Spine Thoracic W/ Contrast	72129
CT Abdomen W/ Contrast	74160	CT Extremity Upper W/O & W/ Contrast	73202	CT Orbit/ IAC W/ Contrast	70481	CT Stone Protocol/KUB W/O Contrast	74176
CT Abdomen W/O & W/ Contrast	74170	CT Head W/O Contrast	70450	CT Pelvis W/O Contrast	72192		
CT Chest W/O Contrast	71250	CT Head W/ Contrast	70460	CT Pelvis W/ Contrast	72193		
CT Chest W/ Contrast	71260	CT Head W/O & W/ Contrast	70470	CT Sinus Complete W/O Contrast	70486		
CT Chest W/O & W/ Contrast	71270	CT IVP	74178	CT Spine Cervical W/O Contrast	72125		
CT Enterography W/ Contrast	74177	CT Max/Facial W/O Contrast	70486	CT Spine Cervical W/ Contrast	72126		

CT ANGIOGRAM

CTAngiogram Abdomen	74175	CTAngiogram Head	70496	CTAngiogram Pelvis	72191		
CTAngiogram Chest	71275	CTAngiogram Neck	70498				

DEXA / BONE DENSITOMETRY

Axial Skeleton, 1 or more sites (hip, pelvis, spine)	77080	Axial Skeleton, 1 or more sites & vertebral fracture assessment	77085	Vertebral Fracture Assessment	77086		
Appendicular Skeletons (periph.radius,wrist,heel)	77081						

MR ANGIOGRAM

MR Angiogram Abdomen	74185	MR Angiogram Extremity Upper	73225	MR Angiogram Head W/O & W/ Contrast	70546	MR Angiogram Neck W/O & W/ Contrast	70549
MR Angiogram Chest	71555	MR Angiogram Head W/O Contrast	70544	MR Angiogram Neck W/O Contrast	70547	MR Angiogram Pelvis	72198
MR Angiogram Extremity Lower	73725	MR Angiogram Head W/ Contrast	70545	MR Angiogram Neck W/ Contrast	70548		

MRI

MRI Abdomen W/O Contrast	74181	MRI Extremity Lower W/O & W/ Contrast - Femur, Tib/Fib, Foot	73720	MRI Extremity Upper W/O & W/ Contrast - Scapula, Humerus, Forearm, Hand, Fingers	73220	MRI Spine Cervical W/O Contrast	72141
MRI Abdomen W/O & W/ Contrast	74183	MRI Extremity Lower Arthrogram - Hip, Knee, Ankle, Toe Joint	73722	MRI Upper Extremity Arthrogram - Shoulder, Elbow, Wrist	73222	MRI Spine Cervical W/O & W/ Contrast	72156
MRI Bone Marrow Survey	77084	MRI Extremity Lower Joint W/O Contrast - Hip, Knee, Ankle	73721	MRI Extremity Upper Joint W/O Contrast	73221	MRI Spine Lumbar W/O Contrast	72148
MRI Brain W/O Contrast	70551	MRI Extremity Lower Joint W/O & W/ Contrast - Hip, Knee, Ankle	73723	MRI Extremity Upper Joint W/O & W/ Contrast	73223	MRI Spine Lumbar W/O & W/ Contrast	72158
MRI Brain W/O & W/ Contrast	70553	MRI Extremity Upper W/O Contrast - Scapula, Humerus, Forearm, Hand, Fingers	73218	MRI Orbit, Face, Neck W/O Contrast	70540	MRI Spine Thoracic W/O Contrast	72146
MRI Brachial Plexus W/O	71550			MRI Orbit, Face, Neck W/O & W/ Contrast	70543	MRI Spine Thoracic W/O & W/ Contrast	72157
MRI Brachial Plexus W/O & W/ Contrast	71552			MRI Pelvis W/O & W/ Contrast	72197	MRI TMJ W/O Contrast	70336
MRI Breast W/O & W/ Contrast	77059						
MRI Enterography	74183, 72197						
MRI Extremity Lower W/O Contrast - Femur, Tib/Fib, Foot	73718						

ULTRASOUND

US Abdomen Complete	76700	US Extremity Veins Bilateral	93970	US OB > 14 weeks	76805	US Pelvis (Transvaginal)	76830
US Abdomen Ltd.	76705	US Extremity Veins Unilateral	93971	US OB Transvaginal	76817	US Pleural Effusion Chest	76604
US Bi-Carotid Dop-extracranial Artery	93880	US Neck, Thyroid	76536	US Pelvis limited (bladder)	76857	US Retroperitoneal Compl. (Renal & Bladder)	76770
US Extremity, non-vascular limited	76882	US OB < 14 weeks Pregnancy 1st Trim.	76801	US Pelvis (Transabdominal)	76856	US Retroperitoneal Ltd. (Aorta or Renal)	76775
US Extremity, non-vascular	76881	US OB additional gestation	76802	US Pelvis (Transab & Transvag)	76856 & 76830	US Scrotum & Contents	76870

X-RAY

ABD 2 views	74019	Foot 3 views	73630	Ribs, (1) Side 3 views	71101	Spine Lumbar 2 or 3 views	72100
Abdomen KUB 1 view	74018	Forearm 2 views	73090	Ribs, (2) Sides 4 views	71111	Spine Lumbar 4 or 5 views	72110
AC Joints	73050	Hand 3 views	73130	Sacrum / Coccyx 3 views	72220	Spine Scoliosis Study 2-3 views	72082
Ankle 3 views	73610	Hip Bilateral 3-4 views	73522	SC Joints min 3 views	71130	Spine Thoracic 2 views	72080
Bone Age Studies	77072	Hip Unilateral 2-3 views	73502	Scapula	73010	Sternum	71120
Calcaneus 2 views	73650	Humerus 2 views	73060	Shoulder 2 or more views	73030	Tib / Fib 2 views	73590
Chest PA & Lat	71046	Knee 3 views	73562	SI Joints 3 or more views	72202	Toe (s) 3 views	73660
Clavicle	73000	Knee 4 or more views	73564	Sinuses 3 views	70220	Wrist 3 or more views	73110
Elbow 3 views	73080	Mandible 4 views	70110	Skull 4 views	70260		
Eyes, Foreign Body	70030	Nasal Bones 3 views	70160	Soft Tissue Neck	70360		
Facial Bones Complete	70150	Orbits 4 views	70200	Spine Cervical 2 or 3 views	72040		
Femur 2 views	73552	Pelvis 2 views	72170	Spine Cervical 4 or 5 views	72050		
Finger(s) 3 views	73140	Pelvis 3 views	72190	Spine Cervical 6 or more views	72052		

To schedule an appointment please call (425) 640-4942.

Please visit www.Radiax.com for more information about Radia.

This is not an all-inclusive CPT code list. Codes subject to change, please visit CMS.gov for more information about CPT codes.