



CU Medicine Physical Medicine and Rehabilitation — UHealth Cherry Creek Medical Center
– Denver, CO

Code	Description	Fee
99213	OUTPT ESTAB VST-LVL III	\$361.00
99203	OUTPT NEW VST-LVL III	\$443.00
99214	OUTPT ESTAB VST-LEVEL IV	\$512.00
99204	OUTPT NEW VST-LVL IV	\$661.00
64483	INJECT TXFORAMINAL EPIDURAL W/IG LUMBAR/SACRAL SINGLE LEVEL	\$736.00
99212	OUTPT ESTAB VST-LVL II	\$225.00
20610	ARTHROCENTESIS ASPIRATION AND OR INJECT MAJOR JOINT OR BURSA	\$238.00
27096	INJECT SACROILIAC JOINT	\$538.00
64493	INJECT DIAG/THERAP AGENT W/IMAGE GUID LUMBAR/SACRAL SINGLE LEV	\$640.00
64635	DESTRUCT NEUROLYTIC AGENT PVFJN W IG LUMBAR OR SACRAL SINGLE FACET JOINT	\$1,130.00
77002	FLUOROSCOPIC GUIDANCE FOR NEEDLE PALCEMENT	\$112.00
99215	OUTPT ESTAB VST-LVL V	\$714.00
64636	DESTRUCT NEUROLYTIC AGENT PVFJN W IG LUMBAR OR SACRAL EACH ADDIT FACET JOINT	\$303.00
64490	INJECTION DIAG/THERAP AGENT CERVICAL/THORACIC SINGLE LEV	\$952.00
64494	INJECT DIAG/THERAP AGENT WITH IMAGE GUID LUMBAR/SACRAL SECOND LEV	\$433.00

If you are not covered by health insurance, you are strongly encouraged to contact our billing office at 303.493.7700 to discuss payment options prior to receiving a health care service from a health care provider at our clinic since posted health care prices may not reflect the actual amount of your financial responsibility.