

CU Medicine Urology Cherry Creek Medical Center - Denver, CO

Code	Procedure Name	Fee	
81003	URINALYSIS AUTOMATED W/O MICROSCOPY	\$	12.00
99214	OUTPT ESTAB VST-LVEL IV	\$	512.00
99204	OUTPT NEW VST-LVL IV	\$	661.00
51798	MEASUREMT POST-VOIDING RESIDUAL URINE &/OR BLADDER CAP BY ULTRASOUND NON-IMAGIN	\$	98.00
99213	OUTPT ESTAB VST-LVL III	\$	361.00
52000	CYSTOURETHROSCOPY (52000)	\$1	,264.00
99024	POST-OP VISIT INCL GLOBAL SVCS	\$	-
51741	COMPLEX UROFLOWMETRY (EG CEE)	\$	331.00
52287	CYSTOURETHROSCOPY WITH INJECTION FOR CHEMODENERVATION BLADDER	\$2	,029.00
99203	OUTPT NEW VST-LVL III	\$	443.00
99215	OUTPT ESTAB VST-LVL V	\$	714.00
52310	CYSTOURETHROSCOPY SIMPLE W/REMOVAL FOREIGN BODY CALCULUS/URETERAL STENT	\$1	,650.00
57160	FITTING & INSERT PESSARY OR OTHER INTRAVAGINAL SUPPORT DEVICE	\$	378.00
99205	OUTPT NEW VST-LVL V	\$	872.00
99212	OUTPT ESTAB VST-LVL II	\$	225.00

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.