



CU Medicine Family Medicine Centerfield - DENVER, CO

Code	Description	Fee
99214	OUTPT ESTAB VST-LEVEL IV	\$307.20
99213	OUTPT ESTAB VST-LVL III	\$216.60
36415	COLLECTION OF VENOUS BLOOD BY VENIPUNCTURE	\$25.80
90471	IMMUNIZATION ADMIN ONE VACCINE (SINGLE OR COMBIN VACCINE/TOXOID)	\$76.20
99204	OUTPT NEW VST-LVL IV	\$396.60
90832	PSYCHOTHERAPY 30 MIN WITH PATIENT AND OR FAMILY MEMBER	\$180.00
99385	PREV E & M NEW PT 18-39 YRS	\$235.20
99396	PREV E & M ESTAB PT 40-64 YRS	\$232.80
99395	PREV E & M ESTAB PT 18-39 YRS	\$213.60
99203	OUTPT NEW VST-LVL III	\$265.80
G0439	ANNUAL WELLNESS VISIT INCL PPPS SUBSEQUENT VISIT	\$313.20
90715	TDAP VACCINE GT7 IM	\$112.80
90674	CCIIV4 VACCINE PRESERVATIVE FREE 0.5 ML IM USE	\$99.60
99215	OUTPT ESTAB VST-LVL V	\$428.40
90460	IMMUN ADMIN THRU 18 YRS VIA ANY RTE ADMIN W COUNSEL OQHCP FIRST VACC COMPO	\$76.20

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.