



CU Medicine Obstetrics and Gynecology Central Park – Denver, CO

Code	Procedure Name	Fee
36415	COLLECTION OF VENOUS BLOOD BY VENIPUNCTURE	\$ 42.00
1300306	NO CHARGE/CONSULT/BUNDLED VISIT	\$ -
99213	OUTPT ESTAB VST-LVL III	\$ 361.00
99214	OUTPT ESTAB VST-LVEL IV	\$ 512.00
99203	OUTPT NEW VST-LVL III	\$ 443.00
81025	URINE PREGNANCY TEST BY VISUAL COLOR COMPARISON METHODS	\$ 34.00
99204	OUTPT NEW VST-LVL IV	\$ 661.00
99212	OUTPT ESTAB VST-LVL II	\$ 225.00
59025	FETAL NON-STRESS TEST (59025)	\$ 245.00
99215	OUTPT ESTAB VST-LVL V	\$ 714.00
99385	PREV E & M NEW PT 18-39 YRS	\$ 392.00
58300	INSERT INTRAUTERINE DEVICE (58300)	\$ 442.00
90471	IMMUNIZATION ADMIN ONE VACCINE (SINGLE OR COMBIN VACCINE/TOXOID)	\$ 127.00
76801	ULTRASOUND PREGNANT UTERUS FIRST TRIMESTER SINGLE OR FIRST GESTATION	\$ 497.00
58301	REMOVE INTRAUTERINE DEVICE (58301)	\$ 565.00

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.