



Barbara Davis Center for Diabetes Pediatric Clinic - CU Anschutz Medical Campus – Aurora, CO

Code	Description	Fee
99215	OUTPT ESTAB VST-LVL V	\$714.00
36416	COLLECTION OF CAPILLARY BLOOD SPECIMEN	\$9.00
83036	HEMOGLOBIN GLYCOSYLATED (A1C)	\$52.00
96127	BRIEF EMOTION BEHAV ASSESSMT W SCORING AND DOC P STANDARDIZED INSTRUMENT	\$33.00
97802	MEDICAL NUTRITION, INDIV, IN	\$187.00
G0108	DIABETES OP SELF MANAGE INDIV PER 30 MIN	\$280.00
G9002	COORDINATED CARE FEE MAINT RATE	\$224.00
99214	OUTPT ESTAB VST-LVEL IV	\$512.00
96413	CHEMO, IV INFUSION, 1 HR	\$747.00
97803	MED NUTRITION, INDIV, SUBSEQ	\$161.00
G0109	DIABETES OP SELF MANAGE GROUP PER 30 MIN	\$86.00
96159	HEALTH BEHAVIOR IVNTJ INDIV F2F EA ADDL 15 MIN	\$113.00
97804	MEDICAL NUTRITION, GROUP	\$86.00
96158	HEALTH BEHAVIOR IVNTJ INDIV F2F 1ST 30 MIN	\$330.00
99213	OUTPT ESTAB VST-LVL III	\$361.00

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.