



CU Family Medicine Centennial – Centennial, CO

Code	Description	Fee
99214	OUTPT ESTAB VST-LVEL IV	\$512.00
99213	OUTPT ESTAB VST-LVL III	\$361.00
36415	COLLECTION OF VENOUS BLOOD BY VENIPUNCTURE	\$43.00
99396	PREV E & M ESTAB PT 40-64 YRS	\$388.00
99212	OUTPT ESTAB VST-LVL II	\$225.00
G2211	COMPLEX E/M VISIT ADD ON	\$64.00
90471	IMMUNIZATION ADMIN ONE VACCINE (SINGLE OR COMBIN VACCINE/TOXOID)	\$127.00
99395	PREV E & M ESTAB PT 18-39 YRS	\$356.00
G0439	ANNUAL WELLNESS VISIT INCL PPPS SUBSEQUENT VISIT	\$522.00
90677	PNEUMOCOCCAL CONJUGATE VACCINE, 20 VALENT (PCV20), FOR INTRAMUSCULAR USE	\$1,446.00
90715	TDAP VACCINE GT7 IM	\$188.00
99215	OUTPT ESTAB VST-LVL V	\$714.00
90472	IMMUNIZATION ADMIN EACH ADDIT VACCINE (SINGLE OR COMBIN VACCINE/TOXOID)	\$74.00
99203	OUTPT NEW VST-LVL III	\$443.00
99204	OUTPT NEW VST-LVL IV	\$661.00

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.