University of Colorado Medicine
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CU Medicine Orthopedics – Broomfield –
Broomfield, CO

Code	Description	Fee
99204	OUTPT NEW VST-LVL IV	$661.00
99214	OUTPT ESTAB VST-LVEL IV	$512.00
20610	ARTHROCENTESIS ASPIRATION AND OR INJECT MAJOR JOINT OR BURSA	$326.00
99213	OUTPT ESTAB VST-LVL III	$361.00
99205	OUTPT NEW VST-LVL V	$872.00
99215	OUTPT ESTAB VST-LVL V	$714.00
20550	INJECTION(S) SINGLE TENDON SHEATH/LIGAMENT	$289.00
99203	OUTPT NEW VST-LVL III	$443.00
20600	ARTHROCENTESIS ASPIRATION AND OR INJECT SMALL JOINT OR BURSA	$268.00
27786	CLOSE TREAT DISTAL FIBULAR FX W/O MANIPULATION	$1,625.00
20605	ARTHROCENTESIS ASPIRATION AND OR INJECT INTERMED JOINT OR BURSA	$276.00
20611	ARTHROCENTESIS ASPIR AND OR INJ MAJOR JOINT OR BURSA WITH USG W PERM RR	$504.00
28470	CLOSED TREAT METATARSAL FX W/O MANIPULATION EACH	$1,126.00
76942	ULTRASONIC GUIDANCE FOR NEEDLE PLACEMENT (BIOPSY/ASPIRATION INJECTION)	$797.00
20612	ASPIRATION &/OR INJECTION GANGLION CYST(S) ANY LOCATION	$325.00

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.