



Hemophilia and Thrombosis Center at the University of Colorado Anschutz Medical Campus – Aurora, CO

Code	Description	Fee
36415	COLLECTION OF VENOUS BLOOD BY VENIPUNCTURE	\$43.00
99215	OUTPT ESTAB VST-LVL V	\$714.00
99214	OUTPT ESTAB VST-LVEL IV	\$512.00
99205	OUTPT NEW VST-LVL V	\$872.00
G2211	COMPLEX E/M VISIT ADD ON	\$64.00
99204	OUTPT NEW VST-LVL IV	\$661.00
96374	THERAPEUTIC PROPHYLACTIC OR DIAGNOS INJECT IV PUSH SINGLE/INITIAL SUB/DRUG	\$287.00
99213	OUTPT ESTAB VST-LVL III	\$361.00
99203	OUTPT NEW VST-LVL III	\$443.00
85247	CLOTTING FACTOR VIII VON WILLEBRAND FACTOR MULTIMETRIC ANALYSIS	\$124.00
36591	COLLECTION BLOOD SPECIMEN FROM COMPLETELY IMPLANTABLE VENOUS ACCESS DEVICE	\$141.00
85290	BLOOD CLOT FACTOR XIII TEST	\$87.00
96372	THERAPEUTIC PROPHYLACTIC OR DIAGNOSTIC INJECTION SUBCUT/INTRAMUSCULAR	\$127.00
58300	INSERT INTRAUTERINE DEVICE (58300)	\$456.00
82180	ASCORBIC ACID (VITAMIN C) BLOOD	\$54.00

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.