



## CU MEDICINE LOW VISION REHABILITATION AMC - AURORA, CO

Code	Description	FEE
G2212	PROLONG SERVICES OUTPT/OFFICE ONLY, 15 MINS	\$130.00
99417	PROLONGED OFFICE/OUTPATIENT E/M SVC EA 15 MIN	\$130.00
99215	OUTPT ESTAB VST-LVL V	\$575.00
3792499	LOW VISION REFRACTION AND MAG ASSESSMENT	\$75.00
99205	OUTPT NEW VST-LVL V	\$816.00
3992499	LOW VISION REFRACTION CONFIRMATORY	\$45.00
92082	VISUAL FLD EXAM;INTERMEDIATE	\$335.00
92081	VISUAL FIELD EXAM;LIMITED	\$233.00
92015	DETERMINE REFRACTIVE STATE	\$72.00
92083	VISUAL FIELD,EXAM;EXTENDED	\$432.00
99214	OUTPT ESTAB VST-LVEL IV	\$429.00
99213	OUTPT ESTAB VST-LVL III	\$294.00
99212	OUTPT ESTAB VST-LVL II	\$179.00
92060	SENSORIMOTOR EXAM,W/MULT MEASUREMENTS	\$325.00
99203	OUTPT NEW VST-LVL III	\$428.00

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.