



CU Medicine Medical Oncology Cherry Creek Medical Center - Denver, CO

Code	Description	Fee
56605	BIOPSY OF VULVA OR PERINEUM; 1 LESION	\$ 493.00
58300	INSERT INTRAUTERINE DEVICE (58300)	\$ 423.00
600999	E CLINIC TELEMEDICINE NO CHARGE	\$ -
90791	PSYCHIATRIC DIAGNOSTIC EVALUATION	\$ 640.00
90832	PSYCHOTHERAPY 30 MIN WITH PATIENT AND OR FAMILY MEMBER	\$ 278.00
90834	PSYCHOTHERAPY 45 MIN WITH PATIENT AND OR FAMILY MEMBER	\$ 367.00
99024	POST-OP VISIT INCL GLOBAL SVCS	\$ -
99203	OUTPT NEW VST-LVL III	\$ 443.00
99204	OUTPT NEW VST-LVL IV	\$ 659.00
99205	OUTPT NEW VST-LVL V	\$ 871.00
99212	OUTPT ESTAB VST-LVL II	\$ 225.00
99213	OUTPT ESTAB VST-LVL III	\$ 360.00
99214	OUTPT ESTAB VST-LVL IV	\$ 507.00
99215	OUTPT ESTAB VST-LVL V	\$ 713.00
99396	PREV E & M ESTAB PT 40-64 YRS	\$ 388.00

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.