



CU FAMILY MEDICINE DEPOT HILL – Boulder, CO

CPT Code	Procedure Name	Fee
36415	COLLECTION OF VENOUS BLOOD BY VENIPUNCTURE	\$15.00
87880	STREP A ASSAY W/OPTIC	\$64.00
90460	IMMUN ADMIN THRU 18 YRS VIA ANY RTE ADMIN W COUNSEL OQHCP FIRST VACC COMPON	\$127.00
90461	IMMUN ADMIN THRU 18 YRS VIA ANY RTE ADMIN EACH ADDIT VACC COMPONENT	\$64.00
96127	BRIEF EMOTION BEHAV ASSESSMT W SCORING AND DOC P STANDARDIZED INSTRUMENT	\$33.00
96372	THERAPEUTIC PROPHYLACTIC OR DIAGNOSTIC INJECTION SUBCUT/INTRAMUSCULAR	\$127.00
99202	OUTPT NEW VST-LVL II	\$203.00
99203	OUTPT NEW VST-LVL III	\$304.00
99213	OUTPT ESTAB VST-LVL III	\$203.00
99214	OUTPT ESTAB VST-LEVEL IV	\$310.00
99395	PREV E & M ESTAB PT 18-39 YRS	\$353.00
99396	PREV E & M ESTAB PT 40-64 YRS	\$383.00
J1050	INJECTION MEDROXYPROGESTERONE ACETATE 1 MG	\$0.84
J1071	INJECTION TESTOSTERONE 1 MG	\$1.00
J3300	Injection, triamcinolone acetonide, preservative free, 1 mg	\$6.00

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.