



CU HELEN AND ARTHUR E JOHNSON DEPRESSION CTR - Aurora, CO

CPT Code	Procedure Name	Fee
90785	INTERACTIVE COMPLEXITY	\$43.00
90791	PSYCHIATRIC DIAGNOSTIC EVALUATION	\$386.00
90792	PSYCHIATRIC DIAGNOSTIC EVALUATION WITH MEDICAL SERVICE	\$435.00
90833	PSYCHOTHERAPY 30 MIN W PATIENT AND OR FAMILTY MEMBER WP W EVAL & MGMT SVC	\$201.00
90834	PSYCHOTHERAPY 45 MIN WITH PATIENT AND OR FAMILY MEMBER	\$256.00
90836	PSYCHOTHERAPY 45 MIN W PATIENT AND OR FAMILY MEMBER W EVAL & MGMT SVC	\$253.00
90837	PSYCHOTHERAPY 60 MIN WITH PATIENT AND OR FAMILY MEMBER	\$385.00
90838	PSYCHOTHERAPY 60 MIN W PATIENT AND OR FAMILY MEMBER W EVAL & MGMT SVC	\$335.00
90846	FAMILY PSYTX W/O PATIENT	\$310.00
90847	FAMILY PSYTX W/PATIENT	\$324.00
90853	GROUP/PSYCHOTHERAPY	\$76.00
99213	OUTPT ESTAB VST-LVL III	\$203.00
99214	OUTPT ESTAB VST-LVEL IV	\$310.00
99215	OUTPT ESTAB VST-LVL V	\$439.00
997	MISSED APPOINTMENT CHARGE	\$40.00

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.