



CU MARCUS INSTITUTE FOR BRAIN HEALTH - Aurora, CO

CPT Code	Procedure Name	Fee
92507	TREAT SPEECH,VOICE,AUUDITORY DSORDR;INDIV	\$392.00
92508	TREAT,SPEECH,VOICE,AUDITORY DSORDR;GROUP	\$124.00
92523	EVALUATION SPEECH SOUND PRODUCTION W EVAL LANGUAGE COMPREHENSION AND EXPRESS	\$987.00
96116	NEUROBEHAV STATUS EXAM PER HOUR PSYC OR PHYS TIME BOTH FTF TIME W PT	\$523.00
96131	PSYCHOLOGICAL TST EVAL SVC PHYS/QHP EA ADDL HOUR	\$415.00
96150	HEALTH AND BEHAVIOR ASSESS EACH 15 MIN FACE-TO-FACE INITIAL ASSESSMENT	\$76.00
96152	HEALTH AND BEHAVIOR INTERVENTION EACH 15 MIN FACE-TO-FACE INDIVIDUAL	\$97.00
96153	HEALTH/BEHAVIOR INTERVENTION EACH 15 MIN FACE TO FACE GROUP	\$23.00
96154	HEALTH/BEHAVIOR INTERVENTION EACH 15 MIN FACE-TO-FACE FAMILY W/PATIENT	\$95.00
97112	NEUROMUSCULAR REEDUCATION 1/MORE AREA	\$175.00
97163	PHYSICAL THERAPY EVALUATION HIGH COMPLEX 45 MINS	\$420.00
97530	THERAPEUTIC ACTIVITIES DIRECT PT CONTACT EACH 15 MIN	\$214.00
99205	OUTPT NEW VST-LVL V	\$668.00
99213	OUTPT ESTAB VST-LVL III	\$203.00
99215	OUTPT ESTAB VST-LVL V	\$439.00

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.