



Barbara Davis Center – Aurora, CO

CPT Code	Procedure Name	Fee
99213	LEVEL 3 OFFICE/OUTPATIENT VISIT, ESTABLISHED PATIENT	\$211.00
99214	LEVEL 4 OFFICE/OUTPATIENT VISIT, ESTABLISHED PATIENT	\$323.00
99215	LEVEL 5 OFFICE/OUTPATIENT VISIT, ESTABLISHED PATIENT	\$456.00
99354	OUTPATIENT, PROLONGED PHYSICIAN SERVICES, 1ST HOUR	\$382.00
99355	OUTPATIENT, PROLONGED PHYSICIAN SERVICES, EA ADD 30 MN	\$370.00
90471	IMMUNIZATION ADMINISTRATION, ONE VACCINE (SINGLE OR COMBIN VACCINE/TOXOID)	\$126.00
92015	DETERMINE REFRACTIVE STATE	\$38.00
92225	OPHTHALMOSCOPY, EXTENDED; INITIAL VISIT	\$110.00
92226	OPHTHALMOSCOPY, EXTENDED; SUBSEQUENT VISIT	\$95.00
92250	FUNDUS PHOTOGRAPHY W/INTERPRETATION & REPORT	\$390.00
95251	AMBULATORY CONTINUOUS GLUCOSE MONITORING, INTERSTITIAL TISSUE VIA SUB Q SENSOR, MIN 72 HRS INTERPRET & REPORT	\$215.00
G0109	DIABETES OUTPATIENT SELF MANAGEMENT TRAINING, GROUP, PER 30 MIN	\$86.00
G9002	COORDINATED CARE FEE MAINT RATE FOR ONGOING ASSESSMENT, SUPERVISION AND EDUCATION, PATIENTS W CHRONIC ILLNESS (1X MO)	\$208.00
S9140	DIABETIC MANAGEMENT PROGRAM VISIT TO NON-MD PROVIDER, EA 30 MINUTES	\$300.00
S9141	DIABETIC MANAGEMENT PROGRAM VISIT TO MD PROVIDER, EA 30 MINUTES	\$300.00

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.