



CU Perinatal Centers – Parker/Platte/Littleton, CO

CPT Code	Procedure Name	Fee
36415	BLOOD DRAW	\$15.00
76801	ULTRASOUND PREGNANT UTERUS FIRST TRIMESTER, SINGLE OR FIRST GESTATION	\$450.00
76811	ULTRASOUND OF PREGNANT UTERUS, DETAILED FETAL ANATOMIC EXAM, SINGLE OR FIRST GESTATION	\$668.00
76813	ULTRASOUND OF PREGNANT UTERUS, 1ST TRIMESTER, FETAL NUCHAL TRANSLUCENCY MEASUREMENT	\$425.00
76816	ULTRASOUND OF PREGNANT UTERUS, REAL TIME W/IMAGE DOCUMENTATION, FOLLOW-UP VISIT, PER FETUS	\$385.00
76817	ULTRASOUND OF PREGNANT UTERUS, REAL TIME W/IMAGE DOCUMENTATION, TRANSVAGINAL	\$330.00
76819	FETAL BIOPHYSICAL PROFILE W/O NON-STRESS TESTING	\$300.00
76820	DOPPLER VELOCIMETRY FETAL UMBILICAL ARTERY	\$200.00
76821	DOPPLER VELOCIMETRY FETAL MIDDLE CEREBRAL ARTERY	\$325.00
76825	ECHOCARDIOGRAPHY FETAL CARDIOVASCULAR SYSTEM, REAL TIME W/IMAGE DOCUMENTATION	\$1,000.00
76827	DOPPLER ECHOCARDIOGRAPHY, FETAL, PULSED AND/OR CONTINUOUS WAVE WITH SPECTRAL DISPLAY; COMPLETE	\$410.00
99213	LEVEL 3 OFFICE/OUTPATIENT ESTABLISHED PATIENT	\$165.00
99214	LEVEL 4 OFFICE/OUTPATIENT ESTABLISHED PATIENT	\$250.00
99241	LEVEL 1 OFFICE/OUTPATIENT CONSULTATION	\$110.00
99242	LEVEL 2 OFFICE/OUTPATIENT CONSULTATION	\$200.00

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.