



CU Specialty Clinic For Children – Colorado Springs, CO

CPT Code	Procedure Name	Fee
99202	LEVEL 2 OFFICE/OUTPATIENT VISIT, NEW PATIENT	\$203.00
99203	LEVEL 3 OFFICE/OUTPATIENT VISIT, NEW PATIENT	\$303.00
99204	LEVEL 4 OFFICE/OUTPATIENT VISIT, NEW PATIENT	\$512.00
99205	LEVEL 5 OFFICE/OUTPATIENT VISIT, NEW PATIENT	\$666.00
99213	LEVEL 3 OFFICE/OUTPATIENT VISIT, ESTABLISHED PATIENT	\$201.00
99214	LEVEL 4 OFFICE/OUTPATIENT VISIT, ESTABLISHED PATIENT	\$309.00
99215	LEVEL 5 OFFICE/OUTPATIENT VISIT, ESTABLISHED PATIENT	\$438.00
99243	LEVEL 3 OFFICE/OUTPATIENT CONSULTATION	\$381.00
99244	LEVEL 4 OFFICE/OUTPATIENT CONSULTATION	\$604.00
93000	ELECTROCARDIOGRAM, ROUTINE, AT LEAST 12 LEADS, INCLUDES INTERPRETATION AND REPORT	\$91.00
93303	TRANSTHORACIC ECHOCARDIOGRAPHY;COMPLETE	\$1,356.00
93320	DOPPLER ECHOCARDIOGRAPHY;COMPLETE	\$298.00
93325	DOPPLER COLOR FLOW IN ADDITION TO ECHOCARDIOGRAPHY	\$229.00
95004	ALLERGY TEST, SCRATCH, PUNCTURE, PRICK W EXTRACTS, IMMEDIATE TYPE REACTION	\$34.00
J0585	INJECTION, BOTOX, 1 unit	\$9.00

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.