



CHILDRENS COLORADO BRIARGATE CENTER

Code	Description	FEE
J0585	Injection, onabotulinumtoxina, 1 unit	\$10.00
99214	OUTPT ESTAB VST-LEVEL IV	\$429.00
95004	PERCUTANEOUS TEST W/ALLERGENIC EXTRACTS IMMED TYPE REACT SPECIFY NUMBER TESTS	\$34.00
99204	OUTPT NEW VST-LVL IV	\$649.00
99203	OUTPT NEW VST-LVL III	\$428.00
99213	OUTPT ESTAB VST-LVL III	\$294.00
J0586	Injection, abobotulinumtoxina, 5 units	\$13.00
99215	OUTPT ESTAB VST-LVL V	\$575.00
93000	ELECTROCARDIOGRAM,AT LEAST 12 LEADS	\$91.00
99205	OUTPT NEW VST-LVL V	\$816.00
93325	DOPPLER COLOR FLOW ADD ON	\$229.00
93306	ECHOCARDIOGRAPH TRANSTHORAC REAL-TIME W/IMAGE DOC COMPLETE W/SPECTRAL DOPPLER	\$1,137.00
99212	OUTPT ESTAB VST-LVL II	\$179.00
99202	OUTPT NEW VST-LVL II	\$302.00
93303	TRANSTHORACIC ECHOCARDIOGRAPHY;COMPLETE	\$1,356.00
93320	DOPPLER ECHOCARDIOGRAPHY;COMPLETE	\$298.00

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.