

Service	CPT	Charge
New Patient Visit	99202-99205	\$150.00
Established Patient Visit	99212-99215	\$120.00
Well Child Check	99391-99394	\$120.00
Annual Physical	99395-99397	\$155.00
Xray	70000-74022	\$80.00
EKG	93000	\$50.00
Nebulizer Treatment	94640	\$20.00
IV Treatment	93630	\$65.00
Additional IV bag	93631	\$15.00
Laceration Repair	12001	\$135.00
Skin Procedure	11300-11313	\$50.00
Skin Procedure with repair	11400-11646	\$100.00
Toradol Injection	96372, J1885	\$25.00
Rocephin Injection	96372, J0696	\$30.00
Rapid Strep Test	87880	\$15.00
Rapid Flu Test	87804	\$20.00
<p>If you are covered by health insurance, you are strongly encouraged to consult with your health insurer to determine accurate information about your financial responsibility for a particular service. If you are not covered by health insurance, we recommend that you contact our billing office at 303-659-7600 option 3 to discuss payment options prior to receiving a health care service. The posted health care prices may not reflect the actual amount of your financial responsibility.</p>		