

## **Medical Center**

## Health Care Pricing Schedule

Procedure Code	Procedure Description	Healthcare Price
99215	Established patient - High complexity up to 5 conditions	\$160
99214	Established patient - Moderate complexity 3-4 conditions	\$110
99213	Established patient - Low complexity up to 2 conditions	\$75
99212	Established patient - Simple Follow-up	\$40
99205	New patient - High complexity up to 5 conditions	\$200
99204	New patient - Moderate complexity 3-4 conditions	\$150
99203	New patient - Low complexity up to 2 conditions	\$95
99395	Preventative Treatment/Wellness Physical AGE 18-39	\$95
99396	Preventative Treatment/Wellness Physical AGE 40-64	\$105
90658	Influenza Vaccine	\$25
86580	TB Test	\$15
99391	New patient - Well Child Check - Infant	\$75
99392	New patient - Well Child Check - Age 1 - 4	\$85
99393	New patient - Well Child Check - Age 5-11	\$85
99384	New patient - Well Child Check - Age 12-17	\$110

The health care price listed above for any given health care service is an estimate.

The health care price listed above for any given health care service is an estimate. Actual charges for the health care service are dependent on the circumstances at the time the service is rendered. 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 health care service provided by health care provider at this office. If you are not covered by health insurance, you are strongly encouraged to contact our billing office at 719-545-2746 to discuss payment options prior to receiving health care service from a health care provider at this office since posted health care priced might not reflect the actual amount of your financial responsibility.