



Family Health Clinic

UNIVERSITY OF COLORADO

SHERIDAN CAMPUS

Sheridan Family Health Clinic CPT Pricing

CPT Code	CPT Description	Standard Fee
99213	OFFICE/OUTPATIENT VISIT EST	\$165.00
83036	GLYCOSYLATED HEMOGLOBIN TEST (IN HOUSE)	\$16.00
99214	OFFICE/OUTPATIENT VISIT EST	\$243.00
90837	PSYTX PT&/FAMILY 60 MINUTES	\$227.00
80053	COMPREHEN METABOLIC PANEL	\$15.00
85025	COMPLETE CBC W/AUTO DIFF WBC	\$15.00
36415	ROUTINE VENIPUNCTURE	\$0.00
80061	LIPID PANEL	\$15.00
99212	OFFICE/OUTPATIENT VISIT EST	\$99.00
90688	FLU VACC 4 VAL 3 YRS PLUS IM	\$25.00
90853	GROUP PSYCHOTHERAPY	\$26.00
99203	OFFICE/OUTPATIENT VISIT NEW	\$244.00
84443	ASSAY THYROID STIM HORMONE	\$16.00
81002	URINALYSIS NONAUTO W/O SCOPE (IN HOUSE)	\$15.00
T1017	TARGETED CASE MANAGEMENT	\$10.00