



Youth Health Clinic

UNIVERSITY OF COLORADO

SHERIDAN CAMPUS

Sheridan Youth Health Clinic CPT Pricing

CPT Code	CPT Description	Standard Fee
99213	OFFICE/OUTPATIENT VISIT EST	\$165.00
90460	IM ADMIN 1ST/ONLY COMPONENT	\$48.00
G8780	COUNSEL DIET PHYS ACTIVITY	\$0.00
D0190	DENTAL SCREENING OF A PATIENT	\$36.00
99173	VISUAL ACUITY SCREEN	\$0.00
90688	FLU VACC 4 VAL 3 YRS PLUS IM	\$25.00
90461	IM ADMIN EACH ADDL COMPONENT	\$15.00
G8510	PT INELIG NEG SCRN DEPRES	\$0.00
90853	GROUP PSYCHOTHERAPY	\$26.00
96110	DEVELOPMENTAL SCREEN W/SCORE	\$39.00
92552	PURE TONE AUDIOMETRY AIR	\$0.00
92551	PURE TONE HEARING TEST AIR	\$23.00
90837	PSYTX PT&/FAMILY 60 MINUTES	\$227.00
36415	ROUTINE VENIPUNCTURE	\$0.00
99212	OFFICE/OUTPATIENT VISIT EST	\$99.00