

COLORADO SENATE BILL 17-065
Transparency in Direct Pay Healthcare Prices

| DESCRIPTION | CPT CODE | COST |
|---|-----------------|-------------|
| AMH | 83516 | \$153 |
| Antisperm Antibodies | 89325 | \$117 |
| Estradiol | 82670 | \$127 |
| FSH | 83001 | \$127 |
| Hepatitis B | 87340 | \$76 |
| Hep B Core | 86704 | \$80 |
| Hepatitis C | 86803 | \$133 |
| HIV 1 – HIV 2 Plus | 86703 | \$70 |
| LH – Blood | 83002 | \$127 |
| Pregnancy Test – Blood Beta | 84702 | \$84 |
| Progesterone | 84144 | \$127 |
| RPR | 86780 | \$40 |
| Venipuncture | 36415 | \$21 |
| Pure Sperm Wash – Fresh Sample | 89261 | \$289 |
| Semen Analysis | 89322 | \$127 |
| Sperm Freeze Back-up With Wash | 89259/89261 | \$414 |
| Gyn Visit/OB Visit | 99203 | \$210 |
| Phone Consult | 99204 | \$375 |
| Office Consult | 99204 | \$325 |
| Regroup | 99214 | \$147 |
| Hysteroscopy | 58555 | \$740 |
| HSG | 58340 | \$1,500 |
| Insemination Only | 58322 | \$199 |
| Echography/Preg. Uterus, Limited, B-Scan | 76815 | \$186 |
| Echography, Pelvic Complete, Non-OB, B-Scan | 76830 | \$275 |
| Echography, Pelvic complete, Non-OB, B-Scan, 3D | 76376 | \$132 |
| Echography, Pelvic Repeat, Non-OB, B-Scan | 76857 | \$200 |
| Echography for Cyst Aspiration | 76942 | \$200 |
| Limited Doppler | 93976 | \$300 |
| CCRM Physician Surgery Fee | | \$2,300 |
| CCRM Surgery Center Facility Fee (Out-of-Network) | | \$5,300 |

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 at this health care facility. If you are not covered by health insurance, you are strongly encouraged to contact our Patient Financial Services department at 303-781-1085 to discuss payment options prior to receiving a health care service from this health care facility since posted health care prices may not reflect the actual amount of your financial responsibility.