

## **Colorado Springs - Common Charges**

Code	Description	Fee
36415	Collection of Venous Blood	\$25.00
80051	Electrolyte Panel	\$128.00
80053	Comprehensive Metabolic Panel	\$1,429.00
81003	Urinalysis Automated W/O Microscopy	\$129.00
81025	Urine Pregnancy Test	\$395.00
82565	Assay Creatinine Blood	\$503.00
82947	Assay Blood Glucose Quant	\$165.00
84520	Assay Urea Nitrogen	\$101.00
85025	Complete CBC W/Auto Diff WBC	\$306.00
87804	Influenza Types A and B Each	\$209.00
93000	Electrocardiogram Complete	\$329.00
96372	Administration SC IM Injection	\$247.00
96374	IV Push Single Initial	\$386.00
96375	IV Push Each Additional Single New Drug	\$535.00
99282	ER Facility Fee Level 2	\$1,124.00
99283	ER Facility Fee Level 3	\$2,116.00
99284	ER Facility Fee Level 4	\$4,028.00
99285	ER Facility Fee Level 5	\$5,262.00
J0696	Injection Ceftriaxone Sodium 250 MG	\$6.00
J1100	Injection Dexamethasone	\$10.00
J1885	Injection Ketorolac	\$65.00
J2405	Infusion Ondansetron	\$87.00
J7030	Infusion Normal Saline Solution 1000 cc	\$32.00
J7512	Oral Prednisone 1MG	\$0.25
J8540	Oral Dexamethasone	\$15.00
Q9967	Low Osmolar Contrast 1MG	\$1.24

**Colorado SB 65 and 18-146 Disclosure**: Common charges are estimates. The actual charges for healthcare 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 service provided by this facility. If you are not covered by health insurance, you are strongly encouraged to contact our billing office at 817-527- 3403 to discuss payment options, discounts, and financial assistance programs prior to receiving care since posted common prices may not reflect the total or actual amount of your financial responsibility.

All patients are encouraged to receive a no charge medical screening evaluation.