



TRANSPARENCY IN HEALTH CARE PRICES

If you have health insurance coverage, we encourage you to consult with your health insurance carrier to determine accurate information about your financial responsibility for a particular health care service provided by a health care provider.

If you do not have health insurance coverage, we encouraged you to contact our Billing Department at (970) 242-6600, option 6, then option 1 to discuss payment options prior to receiving a health care service from a health care provider in this office/facility since posted health care prices may not reflect the actual amount of your financial responsibility.

Actual services provided during a procedure may vary from the scheduled procedure and price quote, based on individual circumstances for each patient case.

The following is a list of the most commonly provided services:

CPT	Description	Avg. Price*
43235	EGD	\$1,620
43239	EGD with Biopsy	\$2,310
43248	EGD with Insertion Guide Wire for Dilation	\$2,068
45378	Colonoscopy	\$1,923
45380	Colon w/Bx	\$2,206
45385	Colon w/Polyp Removal, Snare	\$2,240

*Avg. Price includes: Facility, Anesthesia and Professional Fee. Prices do not include pathology.

CPT	Description	Avg. Price
91110	Capsule Endoscopy	\$1,992
99203	New Patient Office Visit, Level 3	\$289
99204	New Patient Office Visit, Level 4	\$428
99213	Established Pt Office Visit, Level 3	\$233
99214	Established Pt Office Visit, Level 4	\$329