



Diplomates – The American Board of Allergy & Immunology

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In compliance with Colorado Revised Statute: 25-49-103 – Transparency in Health Care Prices Act, we are providing our top 15 most commonly provided services along with the corresponding CPT code (billing code). We have also included the service description and charge amount.

Please note that the charge amount we are providing as it relates to the service is prior to insurance. If you are not covered by health insurance, you are strongly encouraged to contact our billing office at 720-858-7550 to discuss payment options prior to receiving a health care service from a health care provider at this office since posted health care prices may not reflect the actual amount of your financial responsibility.

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 by a health care provider at this office.

CPT Code	Description	Charge
99202	Office or other outpatient visit for the evaluation and management of a <i>new patient</i> , which requires these 3 key components: an expanded problem focused history, an expanded problem focused examination, straightforward medical decision making . Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of this problem(s) and the patient’s and/or family’s needs. Usually, the presenting problem(s) are of low to moderate severity. Typically, 20 minutes are spent face-to-face with the patient and/or family.	\$122
99203	Office or other outpatient visit for the evaluation and management of a <i>new patient</i> , which requires these 3 key components: a detailed history, a detailed examination, medical decision making of low complexity . Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of this problem(s) and the patient’s and/or family’s needs. Usually, the presenting problem(s) are of moderate severity. Typically, 30 minutes are spent face-to-face with the patient and/or family.	\$175
99204	Office or other outpatient visit for the evaluation and management of a <i>new patient</i> , which requires these 3 key components: a comprehensive history, a comprehensive examination, medical decision making of moderate complexity . Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of this problem(s) and the patient’s and/or family’s needs. Usually, the presenting problem(s) are of moderate to high severity. Typically, 45 minutes are spent face-to-face with the patient and/or family.	\$268
99212	Office or other outpatient visit for the evaluation and management of the <i>established patient</i> , which requires at least 2 of these 3 key components: a problem focused history, a problem focused examination, straightforward medical decision making . Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of this problem(s) and the patient’s and/or family’s needs. Usually, the presenting problem(s) are self-limited to minor. Typically, 10 minutes are spent face-to-face with the patient and/or family.	\$72

CPT Code	Description	Charge
99213	Office or other outpatient visit for the evaluation and management of the <i>established patient</i> , which requires at least 2 of these 3 key components: an expanded problem focused history, an expanded problem focused examination, medical decision making of low complexity . Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of this problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of low to moderate severity. Typically, 15 minutes are spent face-to-face with the patient and/or family.	\$119
99214	Office or other outpatient visit for the evaluation and management of the <i>established patient</i> , which requires at least 2 of these 3 key components: a detailed history, a detailed examination, medical decision making of moderate complexity . Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of this problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Typically, 25 minutes are spent face-to-face with the patient and/or family.	\$175
95004	Percutaneous tests (scratch, puncture, prick) with allergenic extracts, immediate type reaction, including test interpretation and report, specify number of tests.	\$11/test
95024	Intracutaneous (intradermal) tests with allergenic extracts, immediate type reaction, including test interpretation and report, specify number of tests.	\$13/test
94010	Spirometry, including graphic record, total and timed vital capacity, expiratory flow rate measurement(s), with or without maximal voluntary ventilation.	\$63
94375	Respiratory flow volume loop.	\$68
95115	Professional services for allergen immunotherapy not including provision of allergenic extracts; single injection.	\$20
95117	Professional services for allergen immunotherapy not including provision of allergenic extracts; 2 or more injections.	\$25
95165	Professional services for the supervision of preparation and provision of antigens for allergen immunotherapy; single or multiple antigens (specify number of doses).	\$22
94060	Bronchodilation responsiveness, spirometry as in 9410, pre- and post-bronchodilator administration.	\$104
95044	Patch or application test(s). Specify number of texts.	\$11/test