

Senate Bill 65: Transparency in Health Care Prices

Please Note: The self-pay price for any given health care service is an estimate, and the actual charges 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 health care service provided by a health care provider at this office. If you are not covered by health insurance, you are strongly encouraged to contact our billing office at (719) 867-7346 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.

Top services provided at Colorado Springs Orthopaedic Group

Procedure Code	Description	Self-Pay Rate
97110	Therapeutic Exercises	\$ 75.00
97140	Manual Therapy	\$ 75.00
99213	Office Visit – _Established Patient (Level 3)	\$ 191.19
99214	Office Visit – _Established Patient (Level 4)	\$ 268.64
99203	Office Visit – _New Patient (Level 3)	\$ 233.71
97014	Electric Stimulation Therapy	\$ 75.00
J3301	Kenalog Injection 10ML	\$ 6.95
99212	Office Visit – _Established Patient (Level 2)	\$ 118.70
20610	Drain or Injection – _Joint/Bursa	\$ 135.79
E0673	Segmental Gradient Pressure Pneumatic Appliance – _half leg	\$ 49.00
72110	X-Ray Exam of Lower Spine	\$ 110.49
J1010	Injection – _Methylprednisolone Acetate, 80mg	\$ 6.72
73564	X-Ray Exam of Knee – _4 or more	\$ 100.59
J0702	Injection – _Betamethasone Acetate & Sodium Phosphate – _3mg	\$ 4.83
97161	Physical Therapy Evaluation – _Low Complexity	\$ 125.00