

Summary of Projected Direct-Payer (i.e. without insurance) Costs for Common Services at **Sowash Optometry Group P.C.**

Please note: The price for any given service is only an estimate and the actual charges are dependent on circumstances at the time a service is rendered.

- 1- Comprehensive Exam New Patient (Wellness); 92004
Price: \$70
- 2- Comprehensive Exam Established Patient (Wellness); 92014
Price: \$70
- 3- Contact Lens Fitting Spherical; Sku's 12346, 12348, 12350, 12352, 12359
Price: \$49
- 4- Contact Lens Fitting Toric; Sku 12394
Price: \$59
- 6- Contact Lens Fitting Multifocal; Sku 12395, 12358
Price: \$69
- 7- Contact Lens Fitting Gas Perm; Sku 12354
Price: \$59
- 8- Contact Lens Fitting Monovision (soft lenses); Sku 12362
Price: \$69
- 9- Routine Optos Wellness Retinal Scanning; Sku 60027
Price: \$35
- 10- Corneal Foreign Body removal; 65222
Price: \$70
- 11- Level 3 Treatment visit (New Patient); 99203
Price: \$69.98
- 12- Level 3 Treatment visit (Established Patient); 99213
Price: \$69.98
- 13- Level 2 Treatment visit (New Patient); 99202
Price: \$69.98
- 14- Level 2 Treatment visit (Established Patient); 99212
Price: \$69.98
- 15- Level 1 Treatment visit (New Patient); 99201
Price: \$69.98
- 16- Level 1 Treatment visit (Established Patient); 99211
Price: \$69.98

*Patients covered by health insurance, are strongly encouraged to consult with their health insurer to determine accurate information about their financial responsibility for any health care service provided by this office. If you are not covered by health insurance, you are strongly encouraged to contact our billing office at **(303) 429-1382** to discuss payment options prior to receiving service from a provider in this office since posted healthcare prices may not reflect the actual amount of your responsibility.*