## VACCINES/ADMINISTRATION FEES Approved by the Jefferson County Board of Health

	Children's Vaccines	
90633	Hep A (2 shot series:	\$29
	0 and 6 months)	
90744	Hep B (3 shot series:	\$19
	0,1 and 6 months)	
90680	Rotavirus (babies under 15 weeks	\$89
	3 dose series:2, 4, and 6 months)	GIVEN ORALLY
90648	Hib (ACTHIB) (haemophilus influenza	\$12
	Type B; 4 shot series)	
90715	Tdap (tetanus, diphtheria and	\$42
	pertussis - 1 time booster 7 years+)	
90700	Dtap (Diptheria, tetnus, pertussis-	\$23
	children under 6)	
90651	HPV9 (human papillomavirus - 2	\$294
	shot series: 0 and 6 months (9 - 14 yrs)	
	OTHERWISE -	
	3 shot series: 0, 2 and 6 months	
-	(15 through 45 yrs)	
90723	Pediarix (polio, Dtap, Hep B for ages	\$74
	6 weeks through 6 years	
90696	Kinrix (Dtap, polio for ages 4 yrs	\$67
	through 6 yrs)	
90734	MCV4 (meningococcal A, C, W, Y:	\$137
	required for 7th grade)	
90713	IPV (polio; 4 shot series)	\$29
90670	PCV13 (pneumonia)	\$284
90698	Pentacel (polio, Hib, Dtap; for ages	\$81
	6 weeks through 4 years)	
90716	Varicella (chickenpox - 2 shot	\$171
	series)	
90707	MMR (measles, mumps, rubella -	\$97
	2 shot series)	
90710	MMRV (MMR & Varicella)	\$282
90714	Td (tetanus and diphtheria -	\$40
	booster evey 10 yrs) Only if you had Tdap	
90620	MEN B (2 shot series: 0 and 1 month	\$213
	- 16 yrs - 26 yrs) Baxero	
90620	MEN B (2 shot series: 0 and 1 month	\$189
50020	- 16 yrs - 26 yrs) Trumenba	, 105

Harm Reduction		
96372	Injection - Prophylactic/	\$33
	diagnostic/therapeutic	
80203	Opiates - Urine Drug Screen	\$17

Date Fees Updated:

23-Aug-22

Adult and Travel Vaccines		
90732	Pneumovax23 (pneumonia)	\$136
	2 shot series-PCV13 @ 0 months;	φ±00
	PPSV23 at 12 months	
90746		\$54
50740	<b>Hep B</b> (Energix B) 3 shots series: 0,1 and 6 months	\$134
00000	(Heplisav B) 2 shot series: 0,1 months (18+ yrs)	
90632	Hep A (Havrix) - 2 shot series: 0 and	\$78
	6 months)	
90636	Twinrix (Hep A & B - 3 shot series:	\$116
	(0, 1, and 6 months)	
90717	Yellow Fever (at least 10 days prior	\$199
	to travel)	
90750	Shingrix (Zoster-Shingles) (50+ years	\$206
	2 shot series: 0, 2-6 months)	
90738	Japanese Encephalitis (2 shot series:	\$341
	0 to 28 days-complete at least 1 wk prior to travel	
	Must pay for 1st shot to order and 2nd shot at 1st vis	sit
90691	Typhoid (1 shot every 2 years at	\$135
	one week prior to travel)	
90675	Rabies (pre-exposure: 3 shot series	\$546
	(0, 7 and 21-28 days:post-exposure; days 0,3,7,14)	
	Must pay for 2 shots before ordering and 3rd shot at	2nd visit

Administration Fees		
90471	Adults over 18 - first shot of visit	\$33
90472	Adults - each additional shot	\$17
90460	Children - first shot of visit	\$33
90461	Children - each additional shot	\$17
G0008	Medicare Patients - Influenza	\$33
G0009	Medicare Patients - Pneumonia	\$33
G0010	Medicare Patients - Hep B	\$33
90471	VFC or Adult State Supply (No Ins or underinsured)	\$19.85
Flu Shots Include Admin Fee		
90686	Fluarix Flu (6 months or older) \$6/\$19	\$25
90662	High Dose Flu (65+ years) \$10/\$45	\$55
90756	Fluzone Flu (6 months and older) \$6/\$19	\$25
COVID Administration Fees		

Other		
86580	TB Skin Test (PPD) (2 visit)	\$33
86481	TB Blood Test (T-Spot)	\$70
87591	STI	\$10

Date BOH Approved: 31-Jan-20