



# South Central Public Health District

Prevent. Promote. Protect.

## IMMUNIZATION FEE SCHEDULE

### CHILDHOOD IMMUNIZATIONS

State funded vaccines from the Vaccines For Children\* (VFC) Program will be used for patients age 18 years and younger, when appropriate regardless of insurance coverage. Families are responsible for administration fees.

#### ADMINISTRATION FEES

VFC ELIGIBLE\* PATIENT -

\$20 PER IMMUNIZATION up to 3 immunizations

NON VFC ELIGIBLE\* PATIENT -

\$20 PER IMMUNIZATION

DTAP	HEPATITIS A	HEPATITIS B
HIB	HPV	POLIO
KINRIX	MENINGITIS	MENINGITIS B
MMR	MMRV	PEDIARIX
PENTACIL	PREVNAR 13	ROTAVIRUS
TDAP	VARICELLA	FLU

\*VFC ELIGIBLE PATIENT defined as Native American, Alaska native, children with no insurance, or who are underinsured

<b>LEAD SCREENING</b>	<b>\$55</b>
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We are happy to bill your insurance for services, but this does not guarantee payment. Your insurance may or may not cover charges for immunizations. Please check with your insurance to find out what your specific plan covers. You may be required to pay at time of appointment for some services

Updated: July 1, 2018

### ADULT IMMUNIZATIONS

HEPATITIS A—series of 2	\$60 per dose
HEPATITIS B -series of 3	\$68 per dose
HEP A/B COMBO -series of 3	\$106 per dose
HIB	\$32
HPV—series of 3	\$236 per dose
POLIO	\$54
MENINGITIS	\$143
MENINGITIS B—series of 2	\$151 per dose
MMR	\$98
Pneumococcal 23	\$122
PREVNAR 13	\$206
TDAP	\$59
VARICELLA—series of 2	\$154 per dose
SHINGRIX—series of 2	\$173 per dose
ZOSTAVAX	\$250
TYPHOID-ORAL	\$75
TYPHOID-INJECTIBLE	\$94
TUBERCULOSIS TESTING	\$30
OVERSEAS EVALUATION	\$30 (per household)

\*Pricing subject to change, Pricing per dose