

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

Children's Vaccines		
90633	Hep A (2 shot series: 0 and 6 months)	\$29
90744	Hep B (3 shot series: 0,1 and 6 months)	\$19
90680	Rotavirus (babies under 15 weeks 3 dose series:2, 4, and 6 months)	\$89
90648	Hib (ACTHIB) (haemophilus influenza Type B; 4 shot series)	\$12
90715	Tdap (tetanus, diphtheria and pertussis - 1 time booster 7 years+)	\$42
90700	Dtap (Diphtheria, tetanus, pertussis- children under 6)	\$23
90651	HPV9 (human papillomavirus - 2 shot series: 0 and 6 months (9 - 14 yrs) OTHERWISE - 3 shot series: 0, 2 and 6 months (15 through 45 yrs)	\$294
90723	Pediarix (polio, Dtap, Hep B for ages 6 weeks through 6 years)	\$74
90696	Kinrix (Dtap, polio for ages 4 yrs through 6 yrs)	\$67
90734	MCV4 (meningococcal A, C, W, Y: required for 7th grade)	\$137
90713	IPV (polio; 4 shot series)	\$29
90670	PCV13 (pneumonia)	\$272
90698	Pentacel (polio, Hib, Dtap; for ages 6 weeks through 4 years)	\$81
90716	Varicella (chickenpox - 2 shot series)	\$171
90707	MMR (measles, mumps, rubella - 2 shot series)	\$97
90710	MMRV (MMR & Varicella)	\$282
90714	Td (tetanus and diphtheria - booster every 10 yrs) Only if you had Tdap	\$40
90620	MEN B (2 shot series: 0 and 1 month - 16 yrs - 26 yrs) Baxero	\$213
90620	MEN B (2 shot series: 0 and 1 month - 16 yrs - 26 yrs) Trumenba	\$189

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

Adult and Travel Vaccines		
90732	Pneumovax23 (pneumonia) 2 shot series-PCV13 @ 0 months; PPSV23 at 12 months	\$136
90746	Hep B (Energix B) 3 shots series: 0,1 and 6 months (Heplisav B) 2 shot series: 0,1 months (18+ yrs)	\$56 \$134
90632	Hep A (Havrix) - 2 shot series: 0 and 6 months)	\$78
90636	Twinrix (Hep A & B - 3 shot series: (0, 1, and 6 months)	\$116
90717	Yellow Fever (at least 10 days prior to travel)	\$201
90750	Shingrix (Zoster-Shingles) (50+ years 2 shot series: 0, 2-6 months)	\$206
90738	Japanese Encephalitis (2 shot series: 0 to 28 days-complete at least 1 wk prior to travel Must pay for 1st shot to order and 2nd shot at 1st visit)	\$341
90691	Typhoid (1 shot every 2 years at one week prior to travel)	\$137
90675	Rabies (pre-exposure: 3 shot series (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)	\$546

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 Reg Dose	\$4
G0008	Medicare Patients - Influenza High Dose	\$7
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 Fee & Includes Admin Fee		
90686	Fluzone Reg Dose Flu (6 months+) \$21/\$4	\$25
90662	Fluzone High Dose Flu (65+ years) \$69/\$7	\$76

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

Date Fees Updated: 15-Sept-22

Date BOH Approved: 09-Sept-22