

Vaccine Price List

As of 10/10/14

CODES	DIAG	VACCINE DESCRIPTION	FEE	Other Info.
05-Travel		Travel and Health Education	35.00	Each person age 13+ (not billable to insurance)
05-90632	V05.3	Hepatitis A	49.78	Per Dose, 2 Dose series
05-90746	V05.3	Hepatitis B	54.74	Per Dose, 3 Dose series
05-90636	V06.8	Hepatitis A/Hepatitis B (Twinrix)	75.96	Per Dose, 3 Dose series
05-90647	V03.81	HIB	42.77	
05-90649	V04.89	HPV- Gardasil	155.76	Per Dose, 3 Dose series Ages 9-26
05-90738	V05.8	Japanese Encephalitis	256.35** Each	Per dose, 2 Dose series given 28 days apart. Prepayment of both doses required before ordering.
05-90734	V03.89	Menactra - Meningitis	124.91	Ages 9mo-55
05-90734	V03.89	Menveo- Meningitis	104.17	Ages 2-55
05-90733	V05.8	Menomune – Meningitis	133.84	Ages 56 +
05-90707	V06.4	MMR	76.09	Per Dose, 2 Dose series
05-90670	V03.82/ V06.6	Pneumococcal Conjugate (Prenar/PCV13)	155.80	Medicare B pays; (given 6-12 months before or 1 year after PPSV23; different time interval for high-risk)
05-90732	V03.82/ V06.6	Pneumococcal – Pneumovax (PPSV23)	86.99	Medicare B pays; coded differently if given with Flu vaccine (given 6-12 months after or 1 year before PCV13; different time interval for high-risk)
05-90713	V04.0	Polio	46.66	Per dose
IMMRX	(none)	RX for Travel	13.00	Each (not billable to insurance)
01-86580	(none)	TB- Symptom Assessment & Test	20.00	Not billable to insurance
05-90714	V06.5	Tetanus-Diphtheria (TD)	39.42	Good for 10 years
05-90715	V06.1	TDAP(Tetanus-Diphtheria-Pertussis)	54.13	Ages 7+
05-90690	V04.89	Typhoid (Oral)	33.28	No admin fee, Good for 5 years
05-90691	V02.1	Typhoid Injection	83.02	Good for 2 years
05-90716	V05.4	Varicella (Chicken Pox)	114.05	Per Dose, 2 Dose series
05-90717	V04.4	Yellow Fever with validation stamp	125.34	Per Dose, Good for 10 years (validation not billable to insurance)
05-VAL				
05-99401	V04.4	Yellow Fever Waiver	37.27	Not billable to insurance
05-VAL				
05-90736	V05.8	Zostavax – Shingles	193.80	Ages 50+
Rabies VACCINES				
05-90375	V01.5	Rabies Immune Globulin	228.95	1 st ml
05-90375	V01.5	Rabies Immune Globulin	208.95	Each mL thereafter (full 2mL vial(s) charged)
05-90675	V01.5	Rabies Rabavert Vaccine	219.07	Per Dose (Post: 4 Doses, Pre: 3 Doses)
05-90675	V01.5	Rabies Immovax	239.28	Per Dose (Post: 4 Doses, Pre: 3 Doses)
TITERS				
	V73.99	Mumps	24.05	
	V73.99	Rubeola (Measles)	24.05	
	V73.99	Rubella	10.90	
	V73.99	Varicella – Chicken Pox	16.00	
	V73.99	Hepatitis B	15.00	
	V73.99	Rabies Titer	65.00	+ \$10.00 Blood draw
Completion of Hand-written forms – Not billable to insurance				
FORMHP		½ sheet hand-written form	10.00	
FORMFP		Full sheet hand-written form	15.00	
FORMAP		Each additional page	5.00	
Influenza Vaccines 2014-15 Season (If given with pneumococcal vaccine coded as V06.6)				
05-90658	V04.81	Novartis Fluvirin (trivalent)	28.58	4+ years of age; Medicare code Q2037
05-90661	V04.81	Flucelvax (trivalent)	33.03	18+ years of age; Medicare pays
05-90686	V04.81	Sanofi PF (quadrivalent)	37.63	3+ years of age; Medicare pays
05-90662	V04.81	Sanofi High-Dose Flu (trivalent)	49.34	65+ years of age; Medicare pays
05-90672	V04.81	Flu-Mist- Intranasal (quadrivalent)	42.70	2-49 years of age