Davie Health Department Fee Schedule

#*Year 2016

Serial Number	CPTCode	CPTTitle	ChargeAmount	AllowedChargeAmount
1	82951	1 hour glucose tolerance test	$ 130.00	$ 130.00
2	90696	Administration of diphtheria, tetanus, acellular pe	$ 60.00	$ 60.00
3	90698	Administration of diphtheria, tetanus, acellular pe	$ 100.00	$ 100.00
4	90723	Administration of diphtheria, tetanus, acellular pe	$ 85.00	$ 85.00
5	90700	Administration of diphtheria, tetanus, and acellula	$ 50.00	$ 50.00
6	90744	Administration of hepatitis B vaccine, pediatric/ad	$ 40.00	$ 40.00
7	90713	Administration of inactivated poliovirus vaccine	$ 45.00	$ 45.00
8	90707	Administration of live measles, mumps, and rubell	$ 75.00	$ 75.00
9	90716	Administration of live varicella vaccine	$ 125.00	$ 125.00
10	90710	Administration of measles, mumps, rubella, and va	$ 200.00	$ 200.00
11	90714	Administration of tetanus and diphtheria toxoids (	$ 45.00	$ 45.00
12	90715	Administration of tetanus, diphtheria, and acellula	$ 60.00	$ 60.00
13	99420	Admn & interpj health risk assessment instrument	$ 35.00	$ 35.00
14	J7613	Albuterol non-comp unit	$ -	$ -
15	99394	Annual examination of established patient 12 to 1	$ 300.00	$ 300.00
16	59425	Antepartum care only 4-6 visits	$ 1,555.00	$ 1,555.00
17	59426	Antepartum care only 7 or more visits	$ 2,750.00	$ 2,750.00
18	86703	Antibody; HIV-1 and HIV-2, single result	$ -	$ -
19	97005	Athletic training evaluation	$ 75.00	$ 75.00
20	81003	Automated dipstick urinalysis without microscopy	$ 28.00	$ 28.00
21	85018	Blood count; hemoglobin (Hgb)	$ 15.00	$ 15.00
22	99201	Brief evaluation and management of new patient	$ 155.00	$ 155.00
23	36416	CAPILLARY BLOOD DRAW	$ 20.00	$ 20.00
24	82962	Capillary blood glucose measurement by glucomet	$ 30.00	$ 30.00
25	59430	CARE AFTER DELIVERY	$ 150.00	$ 150.00
26	87621	Cervical human papillomavirus (HPV) 16+18+31+3	$ 40.30	$ 40.30
27	S9442	CHILDBIRTH EDUCATION CLASS	$ 25.00	$ 25.00
28	99214	Clinic visit for established patient for 25 minutes	$ 330.00	$ 330.00
29	99215	Clinic visit for established patient for 40 minutes	$ 345.00	$ 345.00
30	99205	Complex new patient outpatient visit	$ 485.00	$ 485.00
31	S4993	CONTRACEPTIVE PILLS FOR BC	$ 30.00	$ 30.00
32	87086	Culture, bacterial; quantitative colony count, urine	$ -	$ -
33	87081	Culture, presumptive, pathogenic organisms, scree	$ -	$ -
34	88142	Cytp cerv/vag auto thin layer prep mnl screen	$ 20.70	$ 20.70
35	J1055	DEPO	$ 75.00	$ 75.00
36	17110	DESTROY BENIGN LESION, 1-14	$ 255.00	$ 255.00
37	17111	DESTRUCTION LESION, 15 OR MORE	$ 300.00	$ 300.00
38	56515	Destruction, lesion, vulva, extensive	$ 171.94	$ 171.94
39	56501	Destruction, lesion, vulva, simple	$ 100.34	$ 100.34
40	96110	Developmental screening w/interp&reprt std for	$ 40.00	$ 40.00
41	G0109	Diab manage trn ind/group	$ 25.00	$ 25.00
42	G0108	Diab manage trn per indiv	$ 60.00	$ 60.00
43	3510F	Docj TB screen performed & results interpret	$ -	$ -
44	10060	DRAIN SKIN ABSCESS	$ 224.00	$ 224.00
45	G0434	Drug screen multi drug class	$ -	$ -
46	54065	Dstrj lesion penis extensive	$ 168.63	$ 168.63
47	54050	Dstrj lesion penis simple chemical	$ 98.84	$ 98.84

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48	54056	Dstrj lesion penis simple cryosurgery	$ 103.06	$ 103.06
49	99213	EPSDT office visit, expanded problem-focused, est	$ 270.00	$ 270.00
50	99395	EPSDT preventive office visit, established patient 1	$ 310.00	$ 310.00
51	99384	EPSDT preventive office visit, new patient 12-17 ye	$ 390.00	$ 390.00
52	99391	EST PREVENTIVE AGE 0-1	$ 300.00	$ 300.00
53	99392	EST PREVENTIVE AGE 1-4	$ 300.00	$ 300.00
54	99396	EST PREVENTIVE AGE 40-64	$ 335.00	$ 335.00
55	99393	EST PREVENTIVE AGE 5-11	$ 300.00	$ 300.00
56	92587	EVOKED AUDITORY TEST	$ 80.00	$ 80.00
57	82270	Fecal occult blood detection for colorectal cancer	$ 26.00	$ 26.00
58	D1206	FLOURIDE CHILD < AGE 21	$ 40.00	$ 40.00
59	90665	FLU VACCINE (PERSERV-FREE)	$ 25.00	$ 25.00
60	82950	Glucose level post glucose dose	$ 59.00	$ 59.00
61	87802	Group B Streptococcus antigen detection by immu	$ 14.57	$ 14.57
62	97150	GROUP THERAPEUTIC PROCEDURES	$ 59.99	$ 59.99
63	82952	GTT each additional specimen beyond 3 specimen	$ 35.00	$ 35.00
64	99000	Handlg&/or convey of spec for tr office to lab	$ 23.00	$ 23.00
65	83020	Hemoglobin fractj/quantj electrophoresis	$ -	$ -
66	90633	HEP A, VACC, PED/ADOL, 2DOSE	$ 70.00	$ 70.00
67	90636	Hepatitis A & B vaccine HepA-HepB adult IM	$ 100.00	$ 100.00
68	86706	Hepatitis B surface antibody (HBsAb)	$ 5.00	$ 5.00
69	90746	Hepatitis b vaccine, adult dosage (3 dose schedule	$ 75.00	$ 75.00
70	83021	Hgb Electrophresis	$ -	$ -
71	90648	HIB VACCINE, ACTHIB	$ 45.00	$ 45.00
72	90647	HIB VACCINE, PEDVAX	$ 45.00	$ 45.00
73	87389	HIV	$ -	$ -
74	87252	HSV Viral Culture	$ -	$ -
75	90649	Human papilloma virus vaccine quadriv 3 dose im	$ 180.00	$ 180.00
76	87880	Iaadiadoo streptococcus group A	$ 25.00	$ 25.00
77	87491	Iadna Chlamydia trachomatis amplified probe tq	$ -	$ -
78	90472	IM ADMIN	$ 50.00	$ 50.00
79	90471	IM ADMIN	$ 50.00	$ 50.00
80	95117	IMMUNOTHERAPY INJECTIONS	$ 22.00	$ 22.00
81	51701	In-and-out catheterization of bladder	$ 135.00	$ 135.00
82	99401	Individual preventive counseling for 15 minutes	$ 90.00	$ 90.00
83	99402	Individual preventive counseling for 30 minutes	$ 30.00	$ 30.00
84	90655	Influenza vacc trivalent prsrv free 6-35 mo IM	$ 25.00	$ 25.00
85	90656	Influenza virus vacc split prsrv free 3 yrs/> IM	$ 25.00	$ 25.00
86	90658	Influenza virus vaccine split virus 3/> yrs IM	$ 25.00	$ 25.00
87	90660	Influenza virus vaccine, trivalent, live, for intranasa	$ 60.00	$ 60.00
88	99386	Initial preventive medicine new patient 40-64yrs	$ 425.00	$ 425.00
89	99385	Initial preventive medicine new pt age 18-39yrs	$ 400.00	$ 400.00
90	J0696	Injection, ceftriaxone sodium, per 250 mg	$ 26.00	$ 26.00
91	J1050	Injection, medroxyprogesterone acetate, 1 mg	$ 0.18	$ 0.18
92	90632	Intramuscular administration of hepatitis A virus v	$ 54.00	$ 54.00
93	90685	Intramuscular administration of preservative free	$ 25.00	$ 25.00
94	90686	Intramuscular administration of preservative free	$ 25.00	$ 25.00
95	90675	Intramuscular administration of rabies vaccine	$ 275.00	$ 275.00
96	90672	Intranasal administration of live influenza vaccine	$ 25.00	$ 25.00

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97	J7300	IUD DEVICE	$ 427.50	$ 427.50
98	58300	IUD INSERT	$ 220.00	$ 220.00
99	58301	IUD REMOVAL	$ 325.00	$ 325.00
100	83655	Lead	$ -	$ -
101	J7302	LEVONORGESTREL IU CONTRACEPTIVE	$ 477.20	$ 477.20
102	99204	Limited new patient visit for 31 to 40 minutes	$ 455.00	$ 455.00
103	80061	Lipid Panel	$ 17.87	$ 17.87
104	99212	Low level established patient office visit	$ 185.00	$ 185.00
105	99202	Low level new patient office visit	$ 295.00	$ 295.00
106	2000F	Measurement of blood pressure	$ 15.00	$ 15.00
107	90734	Meningococcal conj vaccine tetravalent im	$ 140.00	$ 140.00
108	99211	Minor level established patient office visit	$ 95.00	$ 95.00
109	99203	Moderate level new patient office visit	$ 425.00	$ 425.00
110	94640	NEBULIZER TREATMENT	$ 60.00	$ 60.00
111	87591	Neisseria gonorrhoeae detection by nucleic acid a	$ 40.30	$ 40.30
112	99383	NEW FP PREVENTIVE AGE 5-11	$ 390.00	$ 390.00
113	99381	NEW PREVENTIVE AGE 0-1	$ 390.00	$ 390.00
114	99384	NEW PREVENTIVE AGE 12-17	$ 375.00	$ 375.00
115	99382	NEW PREVENTIVE AGE 1-4	$ 390.00	$ 390.00
116	99385	NEW PREVENTIVE AGE 18-39	$ 205.00	$ 205.00
117	99502	NEWBORN HOME VISIT	$ 375.00	$ 375.00
118	S3620	Newborn metabolic screening	$ -	$ -
119	97802	NUTRITIONAL INITIAL	$ 35.00	$ 35.00
120	97803	NUTRITIONAL RETURN	$ 29.00	$ 29.00
121	90473	ORAL ADMIN	$ 35.00	$ 35.00
122	D0145	ORAL EVALUATION, PAT<3YRS	$ 50.00	$ 50.00
123	90474	ORAL/INTRANASAL	$ 30.00	$ 30.00
124	S0622	Phys exam for college	$ 120.00	$ 120.00
125	90732	PNEUMOCOCCAL	$ 75.00	$ 75.00
126	90670	PNEUMOCOCCAL VACC, 13 VAL IM	$ 175.00	$ 175.00
127	90669	PNEUMOCOCCAL VACC, 7 VAL IM	$ 60.00	$ 60.00
128	99501	POSTNATAL HOME VISIT	$ 375.00	$ 375.00
129	S0281	Postpartum Screening Form Completion	$ 200.00	$ 200.00
130	LU114	PPD WITH STATE-SUPPLIED VACCINE	$ -	$ -
131	81025	PREGNANCY TEST (URINE)	$ 25.00	$ 25.00
132	99429	Preventive service	$ 60.00	$ 60.00
133	99394	PREVENTIVE VISIT EST PAT, 12-17	$ 300.00	$ 300.00
134	99395	PREVENTIVE VISIT EST PAT, 18-39	$ 300.00	$ 300.00
135	95115	Prof svcs allg immntx x w/prv allgic xtrcs 1 njx	$ 22.00	$ 22.00
136	94760	PULSE OXIMETRY	$ 45.00	$ 45.00
137	92552	Pure tone audiometry	$ 45.00	$ 45.00
138	92551	Pure tone hearing screen	$ 60.00	$ 60.00
139	99173	Quantitative screening for visual acuity	$ 65.00	$ 65.00
140	87804	Rapid influenza A and B antigen detection	$ 16.50	$ 16.50
141	69210	REMOVE IMPACTED EAR WAX	$ 150.00	$ 150.00
142	86900	Rh+ABO+Ab Screen	$ 23.00	$ 23.00
143	J2790	RHO D IMMUNE GLOBULIN INJECT	$ 118.00	$ 118.00
144	S0280	Risk Screening Form Completion	$ 100.00	$ 100.00
145	T1002	RN SERVICES	$ 135.00	$ 135.00

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146	90680	Rotavirus vaccine, pentavalent, 3 dose schedule, li	$ 100.00	$ 100.00
147	36415	ROUTINE VENIPUNCTURE	$ 20.00	$ 20.00
148	86762	Rubella Titer	$ 54.00	$ 54.00
149	T1013	Sign language or oral interpretive services, per 15	$ -	$ -
150	87210	Smr prim src wet mount nfct agt	$ 27.00	$ 27.00
151	A4660	Sphygmomanometer/blood pressure apparatus w	$ 15.00	$ 15.00
152	0555F	Symptom management plan of care documented (	$ -	$ -
153	86592	Syphilis serology	$ -	$ -
154	86580	TB PPD	$ 20.00	$ 20.00
155	96372	THER/PROPHY/DIAG INJ, SC/IM	$ 50.00	$ 40.00
156	92567	Tympanometry (impedance testing)	$ 40.00	$ 40.00
157	J3490	Unclassified drugs	$ 19.20	$ 19.20