

**Lincoln County Health Department
Clinic Fee Schedule Effective July 1, 2021**

Service Type	CPT	Current Fee
INJ MEDROXYPROGESTERNE ACETATE 1 MG	J1050UD	COST
CONTRACEPTIVE PILLS BIRTH CONTROL	S4993	COST
ROUTINE VENIPUNCTURE	36415	\$17.00
OFFICE/OUTPATIENT VISIT EST	99213	\$168.00
TB INTRADERMAL TEST	86580	\$23.00
OFFICE/OUTPATIENT VISIT EST	99211	\$63.00
SMEAR WET MOUNT SALINE/INK	87210	\$21.00
AMINES VAGINAL FLUID QUAL	82120	\$12.00
OFFICE/OUTPATIENT VISIT EST	99212	\$117.00
LIPID PANEL	80061	\$38.00
ASSAY GLUCOSE BLOOD QUANT	82947	\$15.00
OFFICE/OUTPATIENT VISIT NEW	99203	\$267.00
GLYCOSYLATED HEMOGLOBIN TEST	83036	\$21.00
IIV4 VACC NO PRSV 3 YRS+ IM	90686	\$29.00
RN SERVICES UP TO 15 MINUTES	T1002	\$51.00
CULTURE SCREEN ONLY	87081	\$19.00
URINALYSIS AUTO W/O SCOPE	81003	\$8.00
HEMATOCRIT	85014	\$6.00
HEMOGLOBIN	85018	\$10.00
PREV VISIT EST AGE 18-39	99395	\$245.00
URINE PREGNANCY TEST	81025	\$22.00
IMMUNIZATION ADMIN EACH ADD	90472	\$27.00
IMMUNIZATION ADMIN	90471	\$27.00
ASSAY BLD/SERUM CHOLESTEROL	82465	\$12.00
PREV VISIT NEW AGE 18-39	99385	\$267.00
TDAP VACCINE 7 YRS/> IM	90715	\$52.00
HEP A/HEP B VACC ADULT IM	90636	\$129.00
PREV VISIT EST AGE 40-64	99396	\$319.00
ADMINISTRATION INFLUENZA VIRUS VACC	G0008	\$30.00
IIV NO PRSV INCREASED AG IM	90662	\$58.00
INJ METHYLPRDNISOLONE ACTAT 80 MG	J1040	\$17.00
OFFICE/OUTPATIENT VISIT NEW	99204	\$391.00
OFFICE/OUTPATIENT VISIT EST	99214	\$252.00
INJ CEFTRIAZONE SODIUM PER 250 MG	J0696	\$21.00
TD VACC NO PRESV 7 YRS+ IM	90714	\$41.00
HEPB VACCINE 3 DOSE ADULT IM	90746	\$81.00
HEP A VACCINE ADULT IM	90632	\$82.00
PROTHROMBIN TIME	85610	\$26.00
INJ KETOROLAC TROMETHAMINE 15 MG	J1885	\$6.00
DEVELOPMENTAL SCREEN W/SCORE	96110	\$18.00
PREV VISIT NEW AGE 12-17	99384	\$279.00
PREV VISIT NEW AGE 40-64	99386	\$376.00

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PREV VISIT NEW AGE 5-11	99383	\$320.00
COLOREC CA SCR; FOB TST IMMUNO 1-3	G0328	\$23.00
MMR VACCINE SC	90707	\$93.00
IMMUNOTHERAPY INJECTIONS	95117	\$23.00
ETONOGESTREL IMPL SYS INCL IMPL&SPL	J7307UD	COST
INSERT DRUG IMPLANT DEVICE	11981	\$218.00
MENACWY VACCINE IM	90734	\$151.00
BREATHING CAPACITY TEST	94010	\$70.00
VAR VACCINE LIVE SUBQ	90716	\$162.00
PREV VISIT EST AGE 12-17	99394	\$250.00
NEUTRALIZATION TEST VIRAL	86382	\$122.00
OFFICE/OUTPATIENT VISIT NEW	99201	\$124.00
REMOVE INTRAUTERINE DEVICE	58301	\$196.00
CNTRACEPTVE SPL HORMONE VAG RING EA	J7303	\$23.00
PREV VISIT EST AGE 5-11	99393	\$252.00
REMOVE DRUG IMPLANT DEVICE	11982	\$250.00
DRAIN/INJ JOINT/BURSA W/O US	20610	\$70.00
OFFICE/OUTPATIENT VISIT NEW	99202	\$190.00
CONTRACEPTIVE SPL HORMONE PATCH EA	J7304	\$81.00
INIT PM E/M NEW PAT 1-4 YRS	99382	\$258.00
INJ VIT B-12 CYNOCOBLMN TO 1000 MCG	J3420	\$9.00
INJ METHYLPRDNISLN SODIM TO 125 MG	J2930	\$7.00
OCCULT BLOOD FECES	82270	\$10.00
INSERT INTRAUTERINE DEVICE	58300	\$161.00
ELECTROCARDIOGRAM COMPLETE	93000	\$41.00
INJ METHYLPRDNISOLONE ACTAT 40 MG	J1030	\$12.00
LNG-RELEASING IUC SYS 52MG 5 YR DUR	J7298	COST
REMOVE/INSERT DRUG IMPLANT	11983	\$389.00
GTT-ADDED SAMPLES	82952	\$12.00
IMMUNE ADMIN ORAL/NASAL ADDL	90474	\$23.00
GARDISIL 9 (HPV)	90651	\$272.00
PREV VISIT EST AGE 1-4	99392	\$244.00
DESTRUCT B9 LESION 1-14	17110	\$116.00
GLUCOSE TEST	82950	\$17.00
SMEAR GRAM STAIN	87205	\$13.00
MMRV VACCINE SC	90710	\$280.00
PPSV23 VACC 2 YRS+ SUBQ/IM	90732	\$126.00
INIT PM E/M NEW PAT INFANT	99381	\$258.00
DRAINAGE OF SKIN ABSCESS	10060	\$262.00
DESTRUCT PREMALG LESION	17000	\$74.00
DESTRUCT PREMALG LES 2-14	17003	\$12.00
INJ TRIGGER POINT 1/2 MUSCL	20552	\$58.00

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IIV4 VACC NO PRSV 6-35 M IM	90685	\$29.00
AIRWAY INHALATION TREATMENT	94640	\$17.00
THER/PROPH/DIAG INJ SC/IM	96372	\$0.00
INJ TESTOSTERONE CYPIONATE 1 MG	J1071	\$8.00
INTRAUTERINE COPPER CONTRACEPTIVE	J7300UD	COST
LEVONORGESTREL-REL IUD 13.5 MG	J7301UD	COST
WOUND CARE	11042	\$52.00
EXCISION OF SKIN TAG	11200	\$173.00
AVULSION OF NAIL PLATE	11730	\$87.00
MALE WART TREATMENT	54050	\$186.00
FEMALE WART TREATMENT	56501	\$218.00
MATERNITY GLOBAL BILLING (4-7 VISITS)	59425	\$1,046.00
MATERNITY GLOBAL BILLING (7+ VISITS)	59426	\$1,926.00
EAR IRRIGATION	69210	\$112.00
URINALYSIS WITH MICROSCOPE	81001	\$20.00
MSAFP, QUAD	82105	\$149.00
GTT-GLUCOSE TOLERANCE	82951	\$28.00
HCG BETA QN	84702	\$13.00
INFLUENZA A & B	87804	\$42.00
STREP TEST	87880	\$33.00
IMADM INTRANSL/ORAL 1 VACCINE	90473	\$23.00
HEP A PED <19	90633	\$39.00
HEMOPHILUS INFLUENZA B VACCINE PRP-OMP 3 DOSE IM	90647	\$31.00
4VHPV VACCINE 3 DOSE IM	90649	\$0.00
PNEUMOCOCCAL CONJUGATE VACCINE, 13 VALENT, FOR INTRAMUSCULAR USE	90670	\$255.00
RABIES	90675	\$360.00
ROTAVIRUS VACCINE, PENTAVALENT, 3 DOSE SCHEDULE, LIVE, FOR ORAL USE	90680	\$114.00
ROTARIX	90681	\$159.00
KINRIX	90696	\$63.00
PENTACEL	90698	\$112.00
DTaP IMMUNIZATION	90700	\$31.00
VACCINATION, DIPHTHERIA AND TETANUS	90702	\$58.00
INACTIVATED POLIOVIRUS (IPV) VACCINATION	90713	\$42.00
DTaP-HepB-IPV VACCINE INTRAMUSCULAR	90723	\$84.00
MENINGOCOCCAL POLYSACCHARIDE, VACCINE (ANY GROUP(S)), FOR SUBCUTANEOUS USE	90733	\$140.00
ZOSTAVAX 60+	90736	\$262.00
HEPATITIS B IMMUNIZ, PEDS/ADOLESC	90744	\$24.00
HEARING SCREENING	92551	\$19.00
IMMUNOTHERAPY INJECTIONS	95115	\$19.00
HEALTH A RISK/MCHAT	96160	\$13.00
HANDLING OF LAB SPECIMEN	99000	\$23.00
VISION TESTING	99173	\$15.00

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Service Type	CPT	Current Fee
OFFICE/OUTPATIENT VISIT NEW	99205	\$488.00
OFFICE/OUTPATIENT VISIT EST	99215	\$357.00
PREV VISIT EST AGE < 1 YR	99391	\$244.00
INTERMEDIATE SMOKING AND TOBACCO USE CESSATION COUNSELING VISIT	99406	\$27.00
INTENSIVE SMOKING AND TOBACCO USE CESSATION COUNSELING VISIT	99407	\$51.00
ALCOHOL/SUBSTANCE SCREEN & INTERVENTION 15-30 MIN	99408	\$69.00
ALCOHOL/SUBSTANCE SCREEN & INTERVENTION > 30 MIN	99409	\$159.00
ANNUAL WELLNESS INITIAL (MEDICARE)	G0438	\$291.00
ANNUAL WELLNESS SUBSEQUENT (MEDICARE)	G0439	\$262.00
INJ METHYLPRDNISOLONE ACTAT 20 MG	J1020	\$6.00
INJ MEDROXYPROGESTERNE ACETATE 1 MG	J1050	\$81.00
LASIX INJECTION	J1940	\$6.00
INTRAUTERINE COPPER CONTRACEPTIVE	J7300	\$1,090.00
ETONOGESTREL IMPL SYS INCL IMPL&SPL	J7307	\$1,097.00
SUTURE REMOVAL	S0630	\$12.00

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Service Type	CPT	Current Fee
DESTRUCTION BY ANY METHOD OF FLAT WARTS,	17111	\$91.22
destruction of lesion(s), anus (eg, condyloma, papilloma,	46900	\$160.97
destruction of lesion(s), penis (eg, condyloma, papilloma, molluscum	54065	\$168.63
examination of vagina	57452	\$85.22
fetal biophysical profile; without non-stress testing	76819	\$75.32
Limited or follow-up (eg. for follicles)	76857	\$77.65
urinalysis, by dip stick or tablet reagent for bilirubin, glucose, hemoglobin,	81000FP	\$4.03
urinalysis, by dip stick or tablet reagent for bilirubin, glucose, hemoglobin,	81000	\$4.03
urinalysis routine without microscopy	81002FP	\$3.25
urinalysis routine without microscopy	81002	\$3.25
estriol	82677	\$30.75
fetal fibronectin, cervicovaginal secretions, semi-quantitative	82731	\$81.89
glucose blood stick test	82948	\$4.03
ph body fluid except blood	83986	\$4.55
blood count; spun microhematocrit	85013FP	\$3.01
blood count; spun microhematocrit	85013	\$3.01
antibody; chlamydia	86631FP	\$15.03
antibody; chlamydia	86631	\$15.03
antibody; chlamydia, igm	86632FP	\$16.14
antibody; chlamydia, igm	86632	\$16.14
antibody; herpes simplex, non-specific type test	86694FP	\$18.27
antibody; herpes simplex, non-specific type test	86694	\$18.27
antibody; herpes simplex. type i	86695FP	\$16.77
antibody; herpes simplex. type i	86695	\$16.77
antibody; herpes simplex, type 2	86696FP	\$24.62
antibody; herpes simplex, type 2	86696	\$24.62
antibody; hiv-1	86701FP	\$11.29
antibody; hiv-1	86701	\$11.29
antibody; hiv-2	86702FP	\$14.95
antibody; hiv-2	86702	\$14.95
treponema pallidum	86780	\$17.26
culture, bacterial; aerobic isolate, additional methods required for definitive	87077	\$10.27
culture, chlamydia, any source	87110FP	\$24.91
culture, chlamydia, any source	87110	\$24.91
smear, primary source with interpretation; special stain for inclusion bodies	87207FP	\$15.48
smear, primary source with interpretation; special stain for inclusion bodies	87207FP	\$7.62
smear, primary source with interpretation; special stain for inclusion bodies	87207	\$7.62
infectious agent antigen detection by direct fluorescent antibody technique;	87270FP	\$14.57
infectious agent antigen detection by direct fluorescent antibody technique;	87270	\$14.57
infectious agent antigen detection by immunofluorescent technique; herpes	87273FP	\$14.57
infectious agent antigen detection by immunofluorescent technique; herpes	87273	\$14.57
infectious agent antigen detection by immunofluorescent technique; herpes	87274FP	\$14.57

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infectious agent antigen detection by immunofluorescent technique; herpes	87274	\$14.57
infectious agent antigen detection by direct fluorescent antibody technique;	87285FP	\$14.57
infectious agent antigen detection by direct fluorescent antibody technique;	87285	\$14.57
infectious agent antigen detection by enzyme immunoassay technique, qualitative	87320FP	\$14.57
infectious agent antigen detection by enzyme immunoassay technique, qualitative	87320	\$14.57
infectious agent antigen detection by enzyme immunoassay technique, qualitative	87390FP	\$22.43
infectious agent antigen detection by enzyme immunoassay technique, qualitative	87390	\$22.43
infectious agent antigen detection by enzyme immunoassay technique, qualitative	87391FP	\$22.43
infectious agent antigen detection by enzyme immunoassay technique, qualitative	87391	\$22.43
infectious agent detection by nucleic acid (dna or rna); chlamydia trachomatis,	87490FP	\$25.50
infectious agent detection by nucleic acid (dna or rna); chlamydia trachomatis,	87490	\$25.50
infectious agent detection by nucleic acid (dna or rna); chlamydia trachomatis,	87492FP	\$41.41
infectious agent detection by nucleic acid (dna or rna); chlamydia trachomatis,	87492	\$41.41
infectious agent detection by nucleic acid (dna or rna); gardnerella vaginalis,	87510	\$25.50
infectious agent detection by nucleic acid (dna or rna); herpes simplex virus,	87528FP	\$25.50
infectious agent detection by nucleic acid (dna or rna); herpes simplex virus,	87528	\$25.50
infectious agent detection by nucleic acid (dna or rna); herpes simplex virus,	87529FP	\$31.18
infectious agent detection by nucleic acid (dna or rna); herpes simplex virus,	87529	\$31.18
infectious agent detection by nucleic acid (dna or rna); herpes simplex virus,	87530FP	\$41.41
infectious agent detection by nucleic acid (dna or rna); herpes simplex virus,	87530	\$41.41
infectious agent detection by nucleic acid (dna or rna); hiv-1, direct probe	87534FP	\$25.50
infectious agent detection by nucleic acid (dna or rna); hiv-1, direct probe	87534	\$25.50
infectious agent detection by nucleic acid (dna or rna); hiv-1, quantification	87536FP	\$67.59
infectious agent detection by nucleic acid (dna or rna); hiv-1, quantification	87536	\$67.59
infectious agent detection by nucleic acid (dna or rna); hiv-2, direct probe	87537FP	\$25.50
infectious agent detection by nucleic acid (dna or rna); hiv-2, direct probe	87537	\$25.50
infectious agent detection by nucleic acid (dna or rna); hiv-2, amplified probe	87538FP	\$31.18
infectious agent detection by nucleic acid (dna or rna); hiv-2, amplified probe	87538	\$31.18
infectious agent detection by nucleic acid (dna or rna); hiv-2, quantification	87539FP	\$41.41
infectious agent detection by nucleic acid (dna or rna); hiv-2, quantification	87539	\$41.41
infectious agent detection by nucleic acid (dna or rna); neisseria gonorrhoeae,	87590FP	\$25.50
infectious agent detection by nucleic acid (dna or rna); neisseria gonorrhoeae,	87590	\$25.50
infectious agent detection by nucleic acid (dna or rna); neisseria gonorrhoeae,	87592FP	\$41.41

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infectious agent detection by nucleic acid (dna or rna); neisseria gonorrhoeae,	87592	\$41.41
detection test for human papillomavirus (HPV)	87623	\$31.18
detection test for human papillomavirus (HPV)	87624	\$31.18
infectious agent detection by nucleic acid (dna or rna); trichomonas vaginalis,	87660	\$25.50
infectious agent detection by immunoassay with direct optical observation;	87810FP	\$14.57
infectious agent detection by immunoassay with direct optical observation;	87810	\$14.57
infectious agent detection by immunoassay with direct optical observation;	87850FP	\$14.57
infectious agent detection by immunoassay with direct optical observation;	87850	\$14.57
hepatitis B immune globulin (HBIG), human, IM.	90371	\$114.50
rabies immune globulin (RIG), 2ML, human, for intramuscular A/OR subcutaneous use	90375	\$64.74
rabies immune globulin, heat-treated (RIG-HT), 2ML, human, intramuscular and/or	90376	\$74.52
Tetanus Immune Globulin (Tlg), Human, for Intramuscular use, 250 U/1 ml (BayTet)	90389	\$133.57
varicella-zoster immune globulin, human, for intramuscular use (125 units)	90396	\$105.38
Bacillus Calmette-Guerin vaccine (BCG) for tuberculosis, live, for percutaneous use	90585	
Haemophilus influenzae type b vaccine (Hib), PRP-T conjugate, 4 dose schedule, for intramuscular use	90648	
Influenza vaccine, inactivated (IIV), subunit, adjuvanted, for intramuscular use	90653	
Influenza virus vaccine, trivalent (IIV3), subunit, adjuvanted, for intramuscular use	90654	
Influenza virus vaccine, trivalent (IIV3), split virus, preservative free, 0.25 mL dosage, for intramuscular use	90655	
Influenza virus vaccine, trivalent (IIV3), split virus, preservative free, 0.5 mL dosage, for intramuscular use	90656	
Influenza virus vaccine, trivalent, live (LAIV3), split virus, 0.5 mL dosage, for intramuscular use	90660	
Influenza virus vaccine, trivalent (ccIIV3) derived from cell cultures, subunit, preservative and antibiotic free, 0.5 mL dosage, for intramuscular use.	90661	
Influenza virus vaccine, live (LAIV), pandemic formulation, for intranasal use	90664	
Influenza virus vaccine, quadrivalent (IIV4), split virus, 0.25 mL dosage, for intramuscular use	90687	
Influenza virus vaccine, quadrivalent (IIV4), split virus, 0.5 mL dosage, for intramuscular use	90688	
Yellow fever vaccine, live, for subcutaneous use	90717	
Japanese encephalitis virus vaccine, inactivated, for intramuscular use	90738	
Hepatitis B vaccine (HepB), adult dosage, 2 dose schedule, for intramuscular use	90739	
Hepatitis B vaccine (HepB), dialysis or immunosuppressed patient dosage, 3 dose schedule, for intramuscular use	90740	
Hepatitis B vaccine (HepB), dialysis or immunosuppressed patient dosage, 4 dose schedule, for intramuscular use	90747	

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Service Type	CPT	Current Fee
PFIZER-BIONTECH COVID-19 VACCINE	91300	\$0.00
MODERNA COVID-19 VACCINE	91301	\$0.00
JANSSEN COVID-19 VACCINE	91303	\$0.00
hearing test	92552	\$16.65
brief emotional or behavioral assessment	96127	\$4.49
health and behavior assessment (eg, health-focused clinical interview,	96150	\$19.25
health and behavior assessment (eg, health-focused clinical interview,	96151	\$18.63
Health behavior assessment, or re-assessment (ie, health-focused clinical interview, behavioral observations, clinical decision making)	96156	
Special reports such as insurance forms, more than the information conveyed in the usual medical communications or standard reporting form	99080	
outpt. consult, minor- phys time approx 15 min.	99241FP	\$39.98
outpt. consult, minor- phys time approx 15 min.	99241	\$39.98
outpt. consult, moderate- phys time approx 30 min.	99242FP	\$74.90
outpt. consult, moderate- phys time approx 30 min.	99242	\$74.90
outpt. consult, severe- phys time approx 40 min.	99243FP	\$103.00
outpt. consult, severe- phys time approx 40 min.	99243	\$103.00
outpt. consult, severe- phys time approx 60 min.	99244FP	\$152.99
outpt. consult, severe- phys time approx 60 min.	99244	\$152.99
outpt. consult, severe- phys time approx 80 min.	99245FP	\$188.03
outpt. consult, severe- phys time approx 80 min.	99245	\$188.03
new pt physical exam: 65 years and over	99387	\$215.00
estab. pt physical exam: 65 years and older	99397	\$175.00
Preventive Medicine Counseling, Approximately 30 Minutes	99402	
Preventive Medicine Counseling, Approximately 60 Minutes	99404	
ONLINE DIGITAL EVALUATION AND MANAGEMENT SERVICE, FOR AN ESTABLISHED	99421	\$66.95
ONLINE DIGITAL EVALUATION AND MANAGEMENT SERVICE, FOR AN ESTABLISHED	99422	\$92.50
ONLINE DIGITAL EVALUATION AND MANAGEMENT SERVICE, FOR AN ESTABLISHED	99423	\$143.63
phone e/m phys/qhp 5-10 min	99441	\$11.80
phone e/m phys/qhp 11-20 min	99442	\$22.37
phone e/m phys/qhp 21-30 min	99443	\$33.02
TELEPHONE OR INTERNET ASSESSMENT AND MANAGEMENT SERVICE PROVIDED	99446	\$21.28
TELEPHONE OR INTERNET ASSESSMENT AND MANAGEMENT SERVICE PROVIDED	99447	\$42.97
TELEPHONE OR INTERNET ASSESSMENT AND MANAGEMENT SERVICE PROVIDED	99448	\$64.25
TELEPHONE OR INTERNET ASSESSMENT AND MANAGEMENT SERVICE PROVIDED	99449	\$85.61
HOME VISIT POSTNATAL ASSESSMENT & FOLLOW-UP CARE	99501	\$58.29
HOME VISIT FOR NEWBORN CARE & ASSESSMENT	99502	\$60.00
Injection, Immune Globulin (Privigen), Intravenous, Non-Lyophilized (E.G. Liquid), 500 Mg	J1459	
Gamma globulin, intramuscular, 1 cc, injection (Gamastan S/D)	J1460	\$11.02
Injection, Immune Globulin (Bivigam), 500 Mg	J1556	
Injection, Immune Globulin, (Gammaplex), Intravenous, Non-Lyophilized (E.G. Liquid), 500 Mg	J1557	
Injection, Immune Globulin (Hizentra), 100 Mg	J1559	

