



### **Self Pay Pricing Guidelines**

Central Coast Pediatrics is committed to providing our patients with the utmost transparency when it comes to prices that may be incurred during a visit. Please use the guidelines below as a starting point; and if you have any additional questions, please contact our billing department at 805-549-0888 ext. 8.

### **How much will my well visit cost?**

The cost of your visit can vary based on several factors:

- New Patient or Established Patient
- Patient Age
- Immunizations

### **New Patient Well Care**

|                   | Price    | SP Price |                     | Price    | SP Price |
|-------------------|----------|----------|---------------------|----------|----------|
| Infant Under 1 Yr | \$330.56 | \$264.45 | Adolescent 12-17 Yr | \$440.75 | \$352.60 |
| Childhood 1-4 Yr  | \$330.56 | \$264.45 | Adult Over 18 Yr    | \$477.48 | \$381.98 |
| Childhood 5-11 Yr | \$367.29 | \$293.83 |                     |          |          |

### **Established Patient Well Care**

|                   | Price    | SP Price  |                     | Price    | SP Price |
|-------------------|----------|-----------|---------------------|----------|----------|
| Infant Under 1 Yr | \$301.18 | \$240.94  | Adolescent 12-17 Yr | \$367.29 | \$293.83 |
| Childhood 1-4 Yr  | \$293.83 | \$235.07  | Adult Over 18 Yr    | \$440.75 | \$352.60 |
| Childhood 5-11 Yr | \$330.56 | \$264.458 |                     |          |          |

### **Immunizations**

If you are a Self Pay (SP) Patient at the time of your visit, you may be eligible for the Vaccines for Children (VFC) Program. The VFC program subsidizes the cost of all immunizations to the price of **\$26 per vaccine**.

You are not eligible for the VFC program if your visit was initially billed to insurance and subsequently denied, OR you use a cost sharing plan in lieu of insurance (i.e Medi-Share or

Christian Healthcare Ministries). If you are not eligible for VFC, you will be charged full price for each vaccine. Full Price for vaccines are below:

|                 |          |                |          |
|-----------------|----------|----------------|----------|
| Adacel/Boostrix | \$120.47 | IPV            | \$154.26 |
| Beyfortus       | \$841.41 | Menquadfi/MCV4 | \$356.16 |
| Covid 6m-4yrs   | \$75.00  | MMR            | \$205.68 |
| DAPT            | \$113.13 | Trumenba       | \$323.22 |
| Parent Flu      | \$26.00  | Prevnar 20     | \$440.75 |
| Flu over 3      | \$26.00  | Proquad        | \$484.82 |
| Flu under 3     | \$26.00  | Rotavirus      | \$293.83 |
| HPV/Gardasil    | \$462.79 | Varivax        | \$367.29 |
| Hep A           | \$129.29 | Pentacel       | \$226.25 |
| Hep B           | \$201.27 | Quadricel      | \$88.15  |
| Hib             | \$105.78 |                |          |

### **Vaccines drawn but not given**

If a previously agreed upon vaccination is drawn up and then it is refused by the patient/parent, you will be charged full price for the vaccine. Prices for vaccines can be referred to in the chart below:

|                 |          |            |          |
|-----------------|----------|------------|----------|
| Adacel/Boostrix | \$39.00  | IPV        | \$29.00  |
| Beyfortus       | \$460.00 | MenQuadfi  | \$122.00 |
| Covid 6m-4yrs   | \$156.00 | MMR        | \$110.00 |
| DAPT            | \$23.00  | Trumenba   | \$155.00 |
| Parent Flu      | \$26.00  | Prevnar 20 | \$240.00 |
| Flu over 3      | \$26.00  | Proquad    | \$250.00 |
| Flu under 3     | \$26.00  | Rotavirus  | \$86.00  |
| HPV/Gardasil    | \$280.00 | Varivax    | \$166.00 |
| Hep A           | \$29.00  | Pentacel   | \$75.00  |
| Hep B           | \$21.00  | Quadracel  | \$48.00  |
| Hib             | \$12.00  |            |          |

### **How much will my Sick Visit cost?**

The cost of your visit can vary based on several factors:

- New Patient or Established Patient
- Complexity of examination
- Complexity of Visit
- Length of Visit

### **New Patient Sick Visit**

Cost Range: \$98.73 - \$351.42\*\*

### **Established Patient Sick Visit**

Cost Range: \$97.55 - \$312.64

**Stand Alone Procedures**

|                          | Price    | SP Price  |                       | Price    | SP Price    |
|--------------------------|----------|-----------|-----------------------|----------|-------------|
| Burn Treatment/ Dressing | \$223.31 | \$178.65  | Pulse Oximetry        | \$22.04  | ***         |
| Wart Removal 1-14        | \$305.59 | \$244.47  | Spirometry            | \$94.03  | ***         |
| Nebulizer Therapy        | \$49.95  | No Charge | Audiometry            | \$35.26  | ***         |
| Cerumen Removal          | \$44.07/ |           |                       |          |             |
|                          | \$152.79 | No Charge | Visual Acuity         | \$36.73  | ***         |
| Ace Bandage              | \$25.44  | \$20.35   | Ocular Photoscreening | \$51.42  | ***         |
| Short Arm Splint         | \$161.61 | \$129.29  | Ear Piercing          | \$50.00  | No discount |
| Finger Splint            | \$110.19 | \$88.15   | Circumcision          | \$450.00 | \$425.00    |
| Strapping of Shoulder    | \$83.74  | \$66.99   | Frenulectomy          | \$462.79 | No discount |

Note: Items marked with \*\*\* are included as part of the well exam charge. They are not available as stand alone services.

**Laboratory Tests**

|                    | Price   | SP Price |                      | Price   | SP Price |
|--------------------|---------|----------|----------------------|---------|----------|
| Hemoglobin         | \$24.98 | \$19.98  | Rapid Strep          | \$61.70 | \$49.36  |
| UA w/o Micro       | \$17.63 | \$14.10  | Rapid Influenza      | \$42.61 | \$34.08  |
| Rapid Covid        | \$63.60 | \$25.50  | Rapid RSV            | \$33.79 | \$27.03  |
| Urine HCG          | \$22.04 | \$17.63  | Lead Screen          | \$39.67 | \$31.73  |
| PPD/TB Test        | \$27.56 | \$22.05  | Blood Sugar          | \$7.35  | \$5.88   |
| Stool Occult Blood | \$11.75 | \$9.40   | Blood Draw Capillary | \$36.73 | \$29.38  |