

***MAHONING COUNTY
PUBLIC HEALTH***

Nursing Division

FEE SCHEDULE

2024

Mahoning County Public Health is an insurance provider for most major medical insurances. Please check with your insurance carrier to confirm we are a contracted provider and your coverage level for preventative vaccines.

Adult Immunization Fees for Private Insurance**Price Per Dose**

COVID-19 (12 years and up)	135.00
COVID-19 (12 years and up)	150.00
Hepatitis A	95.00
Hepatitis B	80.00
Hepatitis B (Hepelisav)	165.00
Hepatitis A & B combined (Twinrix)	145.00
Hib	36.00
HPV9 (Gardasil) (ages 19-26)	345.00
IPV	50.00
Japanese Encephalitis (Ixiaro)	330.00
Meningococcal ACWY-TT (MenQuadfi)	205.00
Meningococcal B-4C (Bexsero)	250.00
Meningococcal B-FHbp (Trumenba)	215.00
MMR	115.00
Pneumococcal 13 (Prevnar 13)	275.00
Pneumococcal 15 (Vaxneuvance)	275.00
Pneumococcal 20 (Prevnar 20)	400.00
Pneumococcal 23 (Pneumovax 23)	160.00
Pre-exposure Rabies Vaccine	460.00
Recombinant Zoster (Shingrix)	210.00
RSV - Respiratory Syncytial Virus (Abrysvo - Bivalent)	355.00
Tdap	60.00
Tick Borne Encephalitis (Ticovac)	340.00
Typhim Vi (Ages 2 and up)	160.00
Varicella (Chickenpox)	210.00
Yellow Fever	235.00
Counseling/Administration Fee for Immunizations	25.00
Counseling/Administration Fee for COVID Bivalent Booster	40.00
Home Visit Administration Fee for COVID Bivalent Booster	65.00
Counseling/Administration Fee for COVID-19	25.00

Adult Immunization Fees for Uninsured, Underinsured**Price Per Dose**

Flu	21.25
Hepatitis A	21.25
Hepatitis B	21.25
Hepatitis A & B Combined (Twinrix)	21.25
HPV9 (Gardasil) (ages 19-26)	21.25
MMR	21.25
Meningococcal ACWY-TT (MenQuadfi)	21.25
Pneumococcal 13 (Prevnar 13)	21.25
Pneumococcal 15 (Vaxneuvance)	21.25
Pneumococcal 20 (Prevnar 20)	21.25
Pneumococcal 23 (Pneumovax 23)	21.25
Recombinant Zoster (Shingrix)	21.25
Td	21.25
Tdap	21.25
Varicella (Chickenpox)	21.25

Flu Shots (Price includes Administration Fee)

Flu Shots (Ages 6 mo. and up)	50.00
Flu Shots (High Dose for 65+)	105.00
FluMist (Ages 2-49)	60.00
Flublok - Eggfree (Ages 18 yrs. and up)	105.00
Flucelvax – Eggfree (Ages 6 mo. and up)	60.00

Child Immunization Fees for Private Insurance**Price Per Dose****(birth thru 18 yrs. unless noted)**

COVID-19 (6 months – 4 years old)	70.00
COVID-19 (5 years – 11 years old)	90.00
COVID-19 (12 years and up)	135.00
COVID-19 (6 months – 11 years old)	150.00
COVID-19 (12 years and up)	150.00
DTaP	40.00
DTaP/IPV (Kinrix/Quadracel)	70.00
DTap/IPV/Hib (Pentacel)	160.00
DTaP/IPV/Hib/Hep B (Vaxelis)	185.00
Hepatitis A	50.00
Hepatitis B	35.00
Hib	36.00
HPV9 (Gardasil) (9-18 yr.)	345.00
IPV	50.00
Japanese Encephalitis (Ixiaro)	330.00
Meningococcal ACWY-TT (MenQuadfi)	205.00
Meningococcal B-4C (Bexsero)	250.00
Meningococcal B-FHbp (Trumenba)	215.00
MMR	115.00
Pneumococcal 13 (Prevnar 13)	275.00
Pneumococcal 15 (Vaxneuvance)	275.00
Pneumococcal 20 (Prevnar 20)	400.00
Pneumococcal 23 (Pneumovax 23)	160.00
Rotavirus (Rotateq)	115.00
RSV Monoclonal Antibodies(nirsevimab/Beyfortus)	594.00
Tdap	60.00
Td	40.00
Tick Borne Encephalitis (Ticovac)	340.00
Varicella (Chickenpox)	210.00
Counseling/Administration Fee for Immunizations	25.00
Counseling/Administration Fee for COVID Bivalent Booster	40.00
Home Visit Administration Fee for COVID Bivalent Booster	65.00
Counseling/Administration Fee for Beyfortus	25.00
Counseling/Administration Fee for COVID-19	25.00

Child Immunization Fees for Medicaid, Uninsured, Underinsured**Price per dose****(birth thru 18 yrs. unless noted)**

COVID-19 (6 months – 4 years old)	21.25
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COVID-19 (5 years – 11 years old)	21.25
COVID-19 (12 years and up)	21.25
DTaP	21.25
DTaP/IPV (Kinrix/Quadracel)	21.25
DTaP/IPV/Hib (Pentacel)	21.25
DTaP/IPV/Hib/Hep B (Vaxelis)	21.25
Flu	21.25
Hepatitis A	21.25
Hepatitis B (up thru 19 yr.)	21.25
Hib	21.25
HPV9 (Gardasil) (9-18 yr.)	21.25
IPV	21.25
Meningococcal ACWY-TT (MenQuadfi)	21.25
Meningococcal B-4C (Bexsero)	21.25
Meningococcal B-FHbp (Trumenba)	21.25
MMR	21.25
Pneumococcal 13 (Prevnar 13)	21.25
Pneumococcal 15 (Vaxneuvance)	21.25
Pneumococcal 20 (Prevnar 20)	21.25
Pneumococcal 23 (Pneumovax 23)	21.25
Rotavirus (Rotateq)	21.25
RSV Monoclonal Antibodies(nirsevimab/Beyfortus)	21.25
Tdap	21.25
Td	21.25
Varicella (Chickenpox)	21.25
Enabling services	20.00

Other Fees

Health Concerns in International Travel Booklet	3.00
Health Handbook for International Travel Booklet	1.00
Public Health Nurse Services	65.00/hr.

Medication Education Training

One session	125.00 + 1.00 per attendee
Two sessions	225.00 + 2.00 per attendee
Three sessions	275.00 + 3.00 per attendee

Tuberculosis Clinic Fees

Chest X-Rays (Non-TB clinic clients)	75.00
T-Spot TB Test	99.25
Out of County Resident Mantoux Skin Test	20.00
Out of County Resident Two-Step Mantoux Skin Test	35.00
TB Clinic Off-Site Mantoux Testing Fee	50.00+
	3.00 per person tested