

FY 2023-2024



**Approved by the
Jackson County Board of Health
& Board of County Commissioners**

Effective July 1, 2023

FY 2023-2024

ENVIRONMENTAL HEALTH

ONSITE WASTEWATER PERMITS

IMPROVEMENT PERMIT APPLICATION		
Single Family Dwelling Unit (One House Or Manufactured Home)	2 Bedrooms	\$240.00
	3 Bedrooms	\$360.00
	4 Bedrooms	\$480.00
	More than 4 Bedrooms	\$120.00 per Bedroom
Multi Family Dwelling Units/Commercial-Business Establishments (Apartments, Condos, Offices, Restaurants, etc.)	360 Gallons or Less Daily Sewage Flow	\$240.00
	Each Additional 10 Gallons of Sewage Flow	\$20.00
Repair Permit for a Single Family Dwelling Unit	Repair of Malfunctioning System	\$0.00

CONSTRUCTION AUTHORIZATION/OPERATION PERMIT

For All Construction Authorization/Operation Permits	\$120.00
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OTHER FEES

Septic Tank Relocation, Tank Replacement	\$90.00
Change of Use of Facility Connected To A Septic System	\$60.00
Authorization to Reconnect To An Existing System	\$60.00
Large System Inspection/Operation Permit Renewal	\$360.00
Engineered Option Permit and AOWE (Paid at ATO request or prior)	30% of fee
Revisit Fee	\$60.00
Authorization to Connect: Mobile Home to an existing, properly functioning sewage disposal system in a MOBILE HOME PARK	\$60.00
Administrative Fee	\$60.00
Site Visit Fee	\$30.00

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DRILLED WELLS

WELL APPLICATION AND FEES	
Well Permit/Inspection	\$320.00
Consult with Downhole Camera Viewing	\$300.00
Well Repair Permit including Hydrofracture and Abandonment Permit	\$0
Well Relocation Permit (if on same PIN)	\$150.00

INDIVIDUAL WATER TESTING

WATER SAMPLE FEES		
Total Coliform/ <i>E. coli</i> , +/-	Presence/Absence testing using an enzymatic procedure	\$30.00
Total Coliform/ <i>E. coli</i> , =/- Rush Sample	Presence/Absence testing using an enzymatic procedure Results within 5 business days	\$60.00
Total Coliform/ <i>E. coli</i> , MPN	Enzymatic procedure using the Quantitray system.	\$35.00
Inorganic Panel without Nitrate/Nitrite	Alkalinity, Arsenic, Barium, Cadmium, Calcium, Chloride, Chromium, Copper, Fluoride, Hardness (Total), Iron, Lead, Manganese, Magnesium, Mercury, pH, Selenium, Silver, Sodium, Sulfate, Zinc	\$104.00
Full Panel (Bacteria, Inorganic, Nitrate)	Alkalinity, Arsenic, Barium, Cadmium, Calcium, Chloride, Chromium, Nitrate/Nitrite, Copper, Fluoride, Hardness (Total), Iron, Lead, Manganese, Magnesium, Mercury, pH, Selenium, Silver, Sodium, Sulfate, Zinc	\$170.00
Petroleum	Petroleum Analysis and VOC scan	\$104.00
Volatile Organic Compounds (VOC)	Volatile Organic Compounds	\$104.00
Nitrate/Nitrites Only	Nitrate, Nitrite	\$60.00
Pesticides	Chlorinated Pesticides; Nitrogen-Phosphorus Pesticides; EDB, DBCP & TCP	\$104.00
Herbicides	Glyphosate, Chlorinated Acid Herbicides	\$104.00
Fluoride (Requested by MD, Dentist)	Fluoride	\$0.00
Lead/Copper	Lead/Copper	\$102.00
Iron Bacteria	Centrifugation followed by a microscopic examination	\$64.00
Sulfur/Sulfate Bacteria	Presence/Absence testing for sulfur bacteria and for sulfur-reducing bacteria. This method requires a 30-day incubation period.	\$75.00
Hexavalent Chromium		\$90.00
<i>Other testing available through the SLPH</i>		Refer to Schedule

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FOOD AND LODGING SERVICES

PLAN REVIEW

Restaurants	\$250.00
Food Stands	\$250.00
Mobile Food Units/Push Carts	\$250.00
Child Care Facility	\$150.00
Lodging	\$200.00
Change of Ownership	\$60.00

OTHER FEES

Temporary Food Stands (Festivals/Events) per event	\$75.00
Mass Gatherings (concerts, etc.)	\$250.00

SWIMMING POOLS AND TATTOO

Swimming Pool Plan Review	\$270.00
<i>Each additional feature for pool review</i>	\$60.00
Swimming Pool Annual Permit	\$90.00
<i>Additional Pool at same facility permitted during the same appointment</i>	\$60.00
Swimming Pool Rush Permit with less than 15 days from application	\$30.00
Tattoo Artist Annual Permit and Event Permit	\$100.00

SERVSAFE

SERVSAFE FEES

Class, Book & Test	\$125.00
Test and Book	\$110.00
Test and Class	\$75.00
Test Only	\$60.00

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ANIMAL CONTROL

ANIMAL SHELTER FEES		
Rabies Vaccination		\$10.00
Redemption of Dog or Cat	Owner redemption 2 nd offense, additional	\$25.00
	Owner redemption 3 rd offense, additional	\$50.00
	Boarding Fee	\$10.00 per day
	Processing Fee	\$15.00
Adoption of Dog	Rabies Vaccination	\$10.00
	Processing Fee	\$15.00
	Spaying/Neutering	\$50.00
	TOTAL	\$75.00
Adoption of Cat	Rabies Vaccination	\$10.00
	Processing Fee	\$15.00
	Spaying/Neutering	\$35.00
	TOTAL	\$60.00

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CLINICAL FEES						
COMMUNICABLE DISEASE FEES						
Registered Nurse (Medicaid and Private Insurance ONLY)				\$53.36		
Venereal Warts Treatment				\$25.00		
GENERAL VISIT CODES						
CPT	Level I	Level II	Level III	Level IV	Level V	
99201-99205	\$106.96	\$185.44	\$268.69	\$417.40	525.34	New Patient
99211-99215	\$52.36	\$106.96	\$181.06	\$271.66		Established Patient
FAMILY PLANNING-SLIDING FEE SCALE						
Preventive Medicine	Age 9-11	Age 12-17	Age 18-39	Age 40-64	Age 65+	
99383-99387		\$293.23	\$296.23	\$346.50		New Patient
99393-99397		\$257.59	\$258.57	\$282.55		Established Patient
FAMILY PLANNING CONTRACEPTIVES-SLIDING FEE SCALE (SFS)						
Depo Provera				\$36.00		
Condoms				N/C		
Mirena IUD				\$377.00	Device	
Kyleena IUD				\$633.00	Device	
Plan B				\$56.00		
IUD Insertion				\$220.00		
IUD Removal				\$220.00		
Nexplanon				\$443.00	Device	
Nexplanon Insertion				\$220.00		
Nexplanon Removal				\$220.00		
Birth Control Pill				\$5.50	SFS	
MATERNAL HEALTH						
Postpartum Home Visit				\$150.00		
Newborn Home Visit				\$150.00		
Pregnancy Risk Screening				\$50.00		
Antepartum 4-6 weeks				\$350.00		
Antepartum 7 or more visits				\$611.00		
Smoking and Tobacco Counseling				\$10.66	<10 minutes	
Smoking and Tobacco Cessation Counseling				\$22.10	> 10 minutes	
Non Stress Test Fetal Monitoring				\$73.00		
Health and Behavior Assessment				\$40.00		

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ADULT HEALTH-DUE AT TIME OF SERVICE		
Colposcopy without Biopsy	\$250.00	Not a billable service to Insurance
Colposcopy with Biopsy	\$250.00	Plus Additional Biopsies
CDL Physical	\$100.00	Not a billable service to Insurance
BLET Physical	\$100.00	Not a billable service to Insurance
Wellness with Physical	\$130.00	Not a billable service to Insurance
Wellness ONLY	\$65.00	Not a billable service to Insurance
Wellness with PSA	\$81.00	Not a billable service to Insurance
Physical	\$65.00	Not a billable service to Insurance
Limited Physical	\$55.00	Not a billable service to Insurance
Chest X-Ray	\$90.00	Not a billable service to Insurance
Blood Pressure Check	N/C	
OTHER SERVICES-DUE AT TIME OF SERVICE		
Sports Exams	\$55.00	Not a billable service to Insurance
School Health Exam	\$55.00	Not a billable service to Insurance
Car Seat	N/C	Education required
Car Seat Diversion	N/C	
NUTRITION FEES		
Referrals by Primary Physician		
Medical Nutrition Therapy	\$44.00	Individual
Diabetes Self-Management	\$53.00	Individual
Eat Right Now	N/C	Group
Lipid Management	N/C	Group
Diabetes Prevention	N/C	Group
Minorities Diabetes Prevention Program	\$125.00	Group Year Long (Self referred)

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COMPANY CONTRACTS		
CDL	\$100.00	Billed to Company
Wellness	\$65.00	Billed to Company
Pre-Employment Physical	\$65.00	Billed to Company
Urine Drug Screen	\$75.00	Billed to Company *Pre-Employment, Random, Post Accident
PPD Skin Test	\$32.00	Billed to Company
Fit Test	N/C	Billed to Company
Breath Alcohol Test Screen	\$45.00	Billed to Company
Breath Alcohol Test Confirmation	\$45.00	Billed to Company
IMMUNIZATION FEES		
Billed to Private Insurance, Medicaid & Medicare (Part D) and will not be on a sliding fee scale		
Immunization Injection Fee	\$25.00	
Immunization Injection Fee (Subsequent Vaccine (s) per injection)	\$25.00	
Oral/Nasal Vaccine	\$25.00	
Oral/Nasal Vaccine (subsequent Vaccine (s) per vaccine)	\$25.00	
Dtap	\$76.00	
Hep A, 18 & up	\$98.00	
Hep B, 18 & up	\$41.00	
Hib (Achib)	\$34.00	
HPV 9	\$282.00	
Influenza 6months and Older		Based on current fiscal year cost
Influenza 65 years and Older		Based on current fiscal year cost
IPV (Polio)	\$62.00	
Mantoux placement	\$34.00	
Meningococcal (Meningitis B)	\$168.00	
MMR	\$111.00	
Pneumococcal 23	137.00	
Pneumoconjugate	\$261.00	
Rotavirus (Oral)	\$114.00	
TD	\$34.00	
Tdap (Adacel)	\$49.00	
Varicella Zoster	\$189.00	
Zostervax (Shingles)	\$189.00	
State-Provided Immunizations		No out of pocket expense for Vaccine For Children (VFC) to eligible clients
Immunization Injection Fee (1 st Vaccine)	\$25.00	

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Immunization Injection Fee (Subsequent Vaccine (s) per injection)	\$25.00	
Oral/Nasal Vaccine	\$25.00	
Oral/Nasal Vaccine (Subsequent Vaccine (s) per vaccine)	\$25.00	
DtaP	VFC	
Tdap (Children 10-18, 1 st time college student any age, and postpartum women up to 12 months postpartum)	VFC	
Flu	VFC	
Hepatitis A, 2-17	VFC	
Hepatitis B Peds/Adolscent	VFC	
Hib (Achib)	VFC	
Menactra	VFC	
MMR (,19 and others)	VFC	
Twinrix	VFC	
LABORATORY FEES		
Lab fees are in addition to Office visits and Preventative Services **Not a comprehensive list of labs available; rather a list of the most frequently ordered services		
In house Lab		
CBCD/CBC	\$29.00	
Glucose	\$29.00	
Glucose (3 Hour GTT) 4 Specs	\$33.00	
Hemoglobin	\$28.00	
Microalbumin	\$30.00	
O'Sullivan	\$29.00	
Rapid Strep	\$25.00	
Sed Rate (ESR)	\$28.00	
UCG	\$33.00	
Urine Analysis	\$32.00	
Urine Culture and Sensitivity	\$33.00	
Urine Microscopic	\$29.00	
Wet Mount	N/C	

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STATE LAB		
Chlamydia	\$55.00	When State Lab is provided patients will not be charged for services
Hepatitis B Surface Antigen	\$26.00	
HIV Antibody	\$46.00	
OB Panel	\$42.00	
Parasitology	\$35.00	
Pinworm	\$29.00	
Lead Screening	\$39.00	
Sickle Cell Screening	\$31.00	
Syphilis RPR	\$30.00	
Outside Labs		
BMP (Basic Metabolic Panel)	\$14.00	Labcorp is designated outside lab; Harris Regional is secondary lab
CBCD	\$18.00	
CMP (Complete Metabolic Panel)	\$15.00	
Executive 1 Panel	\$65.00	
Executive 1 Male Panel (22143)	\$81.00	
Free T3	\$35.00	
Free T4	\$20.00	
Hemoglobin	\$11.00	
Hemoglobin A1C	\$25.00	
Hep C Quant PCR	\$139.00	
HIV Quant (Viral Load)	\$245.00	
Iron	\$18.00	
PSA Total & Free	\$140.00	
TSH (Thyroid)	\$20.00	
Urine Culture	\$20.00	
Titers		
Note: Required for School or Employment		
Hepatitis Bcore Ab Titer	\$32.00	
Hepatitis C Ab	\$32.00	
MMR Titer	\$41.00	
Polio Titer 123 Antibody	\$51.00	
Varicella Titer	\$32.00	