

PRICES for Immunizations

Effective **7-1-20** and subject to change without notice

About prices:

- These prices are considered preliminary, because patients' insurance (if any) may affect cost.
- Insurance determines covered benefits.
- These prices do not reflect deductibles, co-pay or co-insurance that patients are responsible for paying.

IMMUNIZATIONS:	Procedure code for insurance	# of doses	Cost including injection fees		Covered by this insurance? Yes or No For other insurance, contact your insurance company			
			Per dose	Per series	BCN U-M Student Health Plans	BCN/ GradCare*	Medicare	BCBS U-M PPO & Traditional
Cholera	90625	1	\$395	NA	Υ	Y	N	Υ
Hepatitis A – adult age ≥19	90632	2	\$119	\$238	Y	Y	N	Y
Hepatitis A – pediatric age ≤18	90633	2	\$89	\$178	Υ	Y	N	Y
Hepatitis B - adult age ≥19	90746	3	\$131	\$393	Υ	Υ	N	Y
Hepatitis B - pediatric age ≤18	90744	3	\$95	\$285	Υ	Υ	N	Υ
Hepatitis A and B (Twinrix) age ≥18	90636	3	\$192	\$576	Υ	Υ	N	Υ
HPV-9	90651	3	\$313	\$939	Y age 9-45	Y age 9-45	N	Y age 9-45
Influenza, preservative-free	90686	1	\$40	NA	Υ	Y	Y	Y
Japanese encephalitis	90738	2	\$410	\$820	Y	Y	N	Contact insurance
Measles/Mumps/Rubella (MMR)	90707	2	\$131	\$262	Υ	Υ	N	Υ
Meningitis - Menactra	90734	1	\$210	NA	Υ	Y	N	Υ
Meningitis B - Bexsero	90620	2	\$308	\$616	Y age <10-25	Contact insurance	N	Y
Meningitis – Trumenba	90621	2 or 3	\$222	Varies	Υ	Y	N	Υ
Pneumonia 13-valent - Prevnar	90670	1	\$314	NA	If at risk	Y age >65, ≥1 year apart	Y	Contact insurance
Pneumonia 23-valent - Pneumovax	90732	1	\$168	NA	If at risk	Y age >65, ≥1 year apart	Y	Contact insurance
Polio (inactivated)	90713	Varies	\$95	Varies	Υ	Y	N	Υ
Rabies immune globulin, per CC, depending on patient's weight	90375	Expect 5 CCs	\$546 /CC	\$2730	Y	Y	N	Contact insurance
Rabies (pre-exposure)	90675	3	\$531	\$1593	Υ	Υ	N	Υ
Shingles (Shingrix)	90750	2	\$279	\$558	Y age ≥50	Y age ≥50	N	Y age ≥50
Td Tetanus & diphtheria	90714	1	\$90	NA	Υ	Y	N	Y
Tdap Tetanus, diphtheria & pertussis	90715	1	\$100	NA	Υ	Υ	N	Υ
Typhoid	90691	1	\$179	NA	Y	Y	N	Y
Varicella chicken pox	90716	2	\$174	\$348	Υ	Υ	N	Υ
Yellow Fever	90717	1	\$192	NA	Υ	Υ	N	Υ
Travel Health Clinic visit	99211	NA	\$52	NA	Y^	Y	N	Y for BCBS & U-M PPO, No for Traditional

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For patients with BCN U-M Student Insurance Plans (domestic and international):

Your insurance covers a Travel Health Clinic Visit after the \$100 annual deductible is met, and with a \$20 copay.

* For patients with U-M Premier Care or GradCare:

For currently enrolled U-M students (Ann Arbor campus) with U-M Premier Care or GradCare: For insurance to cover services at UHS, your primary care provider (PCP) must be at UHS or U-M Michigan Medicine.

For other patients with U-M Premier Care or GradCare: In order for you to visit the UHS Travel Clinic, your primary care physician (PCP) must be at UHS. If you would like to change your PCP to UHS, you may call your insurance, BCN, at 800-658-8878 to request this change.

For more information:

- See www.uhs.umich.edu/immunizations
- Contact UHS at ContactUHS@umich.edu or 734-764-8320
- For costs and billing at UHS, contact Business Office at <u>uhs-busbill@med.umich.edu</u> or 734-764-7380
- For understanding insurance, contact Managed Care/Student Insurance Office at <u>UHS-mancare-stuins@med.umich.edu</u> or 866-368-0002

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