

FLORIDA DEPARTMENT OF HEALTH IN LAKE COUNTY
FEE SCHEDULE FOR CONTRACT YEAR 2016 - 2017

Description	2016-2017 DOH Lake Fee Schedule
Clinical Fees are based on Medicare rates and/or Medicaid rates at 125% of rate	
Dental Fees are based on Medicaid rate at 125% of rate.	
The following services do not appear in either Medicaid or Medicare rate schedule	
Rates are rounded off to the nearest dollar	
PRIMARY CARE OFFICE VISIT - NEW CLIENT	
Quick Care Visit / Sick Visit	\$50.00
Quick Care Follow Up Visit	\$25.00
PREVENTIVE HEALTH VISIT - NEW CLIENT	
School Physical Form Completion (without Visit)	\$35.00
Adult Physical Form Completion	\$35.00
PREVENTATIVE SERVICES OTHER	
Initial Nutrition Consultation/Counseling	\$60.00
Nutrition Consultation/Counseling - per 15 min	\$15.00
General Health Education	\$30/Session/Person
Smoking Cessation (Group, 1-6 sessions)	\$30/person
School Health Team Half Day Screening / Auditing of Records for Charter / Private Schools	\$500.00
School Health Team Full Day Screening / Auditing of Records for Charter / Private Schools	\$1,000.00
School Health In-Service by Registered Nurse for Charter / Private Schools	\$50/hour
School Health Screening by LPN / RN for Charter / Private Schools	\$100/hour
Administration Fee for College and FMLS forms	\$20.00
FAMILY PLANNING	
Pregnancy Test	\$25.00
Emergency Contraceptive Pills (Charged as Level 1 Office Visit)	\$20.00
Replacement Pills (Charged as Level 1 Office Visit + \$3.00 per pack up to 3 packs)	\$20.00 - \$29.00
Depo-Provera Injection (Medicaid Rate)	\$88.50
Intrauterine Device (cost of device)	At Cost
STI VISITS	
Screening	\$40.00
VACCINES	
Injection - Administrative Fee	\$30.00
Administrative Fee for Blue Card - Form 680	\$10.00
* No charge for Blue Card given to clients at time of vaccination	
Administrative Fee for Religious Exemption - Form 681	\$20.00
Rabies, Initial Visit	\$45.00
Rabies, 2-5 follow Up Visits	\$20.00
Rabies, Titer	\$80.00
Adult Vaccines	\$30.00 + Vaccine***
Travel Clinic Physician Consultation	\$40.00
Travel Clinic Physician Consultation - Increased consultative time (30+ minutes)	\$60.00
* Except when there is an allowable Medicaid charge.	
****Vaccine" is defined as the vaccine cost on the last received invoice by Lake County Health Department.	

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LAB/EKG Established Clients - Clarification for Category	
Urine Strip	\$8.00
Glucose Finger Stick / Urine Check	\$8.00
Hemoglobin Finger Stick	\$8.00
DH 2114 Form	\$20.00
HIV Test	\$10.00
KOH Smear	\$8.00
EKG (Electrocardiogram)	\$25.00
Albuterol Nebulizer Treatment	\$18.00
OTHER PROCEDURES - Clarification for Category	
Injection - Administrative Fee	\$30.00
Respiratory Fit Testing	\$25.00
PPD (Placement and Flow Up/Reading	\$25.00
Quanta Feron TB Testing	\$45.00
Chest X-ray	\$85.00
MATERNITY CARE	
Maternity Care - Visit	\$120.00
Miscellaneous Medical Procedures	Medicaid Rate + 50%
Maternity Package	\$950.00
VITAL STATISTICS	
Birth Certificate:	
1. Initial Certificate	\$15.00
2. Additional Certificate (at time of initial purchase)	\$10.00
3. Vinyl Sleeves	\$5.00
Death Certificate:	
1. In-County Certificate	\$12.00
2. Replacement of Incorrectly Filed Certificate Not Filed With The State Registrar	\$1.00
Notary Public Fee	\$10.00

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Description	2016-2017 DOH Lake Fee Schedule
ENVIRONMENTAL HEALTH	
Public Drinking Water Samples	\$20.00/bottle
Private Drinking Water Samples	\$20.00/bottle
Chemical Sampling	\$30.00/bottle
Bathing Places Water Samples	\$30.00/bottle
Public Well Construction (DEP 62-555)	\$300.00
Public Well Construction (DOH Limited Use 64E-8)	\$200.00
Private Residential Potable Well Construction	\$100.00
Irrigation Well Construction	\$75.00
Monitoring Well Construction (5 min & 8 max p/site)	\$40.00 ea or \$200.00/site
Abandonment (permit required)	\$50.00
Re-Inspection of Wells	\$50.00
Late or No Application	\$300.00
Variance Processing Fee	\$100.00
Well Site Evaluation	\$100.00
Dept. Pesticide/Agricultural Chemical Sampling	\$50.00
Dept. Bacteriological Sampling	\$50.00
Late/Chemical Bacteriological Sampling/Limited Use Wells	\$50.00
*Note: All Well Construction Fees are for wells less than 6 inches.	
Well Construction and Annual Operating Permit	\$30.00
Swimming Pool Annual Operating Permit up to and including 25,000 gallons	\$50.00
Swimming Pool Annual Operating Permit more than 25,000 gallons	\$100.00
Swimming Pool late fee on annual permits	\$50.00
Swimming Pool First Re-Inspection	\$50.00
Swimming Pool Exempt Condo	\$50.00
Development Review Fees:	
Mining Site Plan	\$125.00
Major Site Plan	\$175.00
Subdivision Plan Review	\$150.00
Major Site Plan Amendment	\$175.00
Minor Site Plan Amendment	\$125.00
Inspection Fee for Site Plan Review for Potential Septic System Impact	\$35.00
DRS Presubmittal Fee	\$125.00
Preliminary Plat	\$150.00
PUD Preliminary Plat	\$175.00
Plan Revision Fee	\$50.00
PUD Plan Revision Fee	\$75.00
General Site Plan Reviews	\$125.00
Right of Way Vacation/Abandonment	\$50.00
Zoning Map Amendment	\$75.00
Lot Split	\$50.00

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Description	2016-2017 DOH Lake Fee Schedule
Lot Line Adjustment	\$50.00
Public Works Final Plat	\$75.00
Public Works Construction Plans	\$75.00
Green Swamp Mandatory Maintenance of Onsite Treatment System Admin Fee	\$75.00
OSTDS (Septic Tanks) Voluntary On Time Inspection	\$75.00
OSTDS (Septic Tanks) Re-Inspection Fee	\$25.00
OSTDS New System	\$75.00
OSTDS Modification	\$70.00
OSTDS Repair	\$50.00
OSTDS Abandonment	\$50.00
OSTDS Variance	\$75.00
Aerobic Treatment Unit Maintenance Permit	\$50.00
Performance Based System Operating Permit	\$100.00
Re-Inspection Public Pools (Spas, Bathing Areas)	\$30.00
Re-Inspection MHP / RV Parks	\$30.00
Re-Inspections Food Services	\$30.00
Late Renewal of All Permits	\$50.00
Alcoholic Beverage Establishment Inspection	\$50.00
Tattoo Establishment	\$50.00
Body Art Re-Inspection Fee	\$50.00
Civic/Fraternal Food Service	\$100.00
Food Service Plan Review	\$30.00
Group Care Inspection	\$100.00
Group Care w/ Food Service Inspection	\$80.00
Re-Inspection of Group Care	\$50.00
Site visit to inspect sanitary facilities for temporary events to exceed 500 people	\$100.00
Re-inspection of temporary event sanitary facilities	\$75.00
Annual fee for Foster Home Inspections (collected through DCF or their licensing agency)	\$80.00
Collection and disposal of sharps containers	\$15.00
Indoor Air Screening	\$25.00 fee + \$50.00 p/hr
School Facilities Inspections	\$100.00
MISCELLANEOUS FEES	
Return Check Service Charge - up to \$300	\$25.00
Return Check Service Charge - \$301 and larger	10% of face value of check
Refund Request	\$25.00
Special Reports (Physician's narrative, insurance forms, or review of medical records by physician.	\$25.00
Nominal Fee	\$15.00
Routine Copy of a public record	\$0.15 per page
Certified Copy of a public record	\$1.00 per page
Extraordinary public records requested, as defined by FRS	\$0.15/page + labor cost

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