

ATTACHMENT 4
Fee Schedule

Prices subject to change without notice.

Some items may be covered by or can be billed to your insurance by the laboratory, imaging center, or pharmacy. Let us know if you desire that option. Due to variability of insurance plans we are unable to provide those cost estimates to you.

Laboratory

	Member
B12 / Folate	\$20
BMP	Included
CBC	Included
CMP	Included
COVID	Included
ESR	Included
Estradiol	\$15
FSH/LH	\$20
GC / Chlamydia	\$35
Hepatitis	\$40
Hgb A1c	Included
HIV	\$20
Influenza	\$55
Iron panel	\$10
LDL, direct	\$15
Lipid	Included (2 annually)
Lithium	\$20
Magnesium	\$10
PAP w/ HPV	\$125
Phosphorus	\$5
Prolactin	\$15
PSA	Included (1 annually)
PT / INR	\$10
Strep	Included (2 annually)
Testosterone	\$25
Thyroid T3 / T4	\$25
TSH	Included
UA	Included
Vitamin D	\$40

Radiology*

X-Ray	\$60
CT	\$350
Ultrasound	\$150
MRI	\$500
Screening mammogram	\$150
DEXA	\$90

* cash pay price listed by and payable to imaging center.

Procedures

	Non-Member	Member
Vasectomy	\$600	\$300
IUD insertion	\$200 + device cost*	Device cost*
IUD removal	\$100	Included
Implant birth control	\$100 + device cost*	Device cost*
In-grown toe nail	N/A	Included
Laceration repair	N/A	Included
Skin biopsy/excision	N/A	\$0 + pathology cost
Joint/trigger point injections	N/A	Included
IV hydration	N/A	Included

* covered by most health insurance, billed through pharmacy

Visits

	Guest Membership	Member
Clinic appointment	\$80/visit	Unlimited
Telemedicine	N/A	Unlimited