

Travel Clinic Pricing

**As of June 1, 2020

Description	CPT Code	Price
Prevent Counsel, Indiv,15 Min	99401	\$128.00
Prevent Counsel, Indiv,30 Min	99402	\$209.00
Prevent Counsel, Indiv,45 Min	99403	\$289.00
Vaccine Administration, Initial	90471	\$25.00
Vaccine Administration, Each Additional	90472	\$25.00
Vaccine Administration, Nasal/Oral	90473	\$25.00
Vaccine Administration Mnvfc, Initial	90471.002	\$21.22
Vaccine Administration Mnvfc, Each Additional	90472.001	\$21.22

Description	# of Inj. Req'd	CPT Code	Price/Injection
Hep A Peds	2	90633	\$63.00
Hep A Adult	2	90632	\$115.00
TwinRix	3-4	90636	\$199.00
Hep B Peds	3	90744	\$52.00
Hep B Adult	3	90746	\$129.00
Japanese Encephalitis	2	90738	\$544.00
Polio Peds	4	90713	\$63.00
Polio Adult	Variable	90713	\$63.00
Rabies Post Exposure	4	90675	\$571.00
Rabies Preventative	3	90675	\$571.00
TDAP	1	90715	\$67.00
Typhoid	1	90691	\$158.00
Yellow Fever	1	90717	\$267.00
Meningitis	1-2	90733	\$291.00
Cholera	1 Oral Drink	90625	\$457.00

International Travel Clinic Name	Group NPI/UMPI Number
M Health Fairview Apple Valley Clinic:	18515833
M Health Fairview Uptown Clinic:	1447442132