THE FOLLOWING FEES WILL BE EFFECTIVE ON 9/24/2018

UCI STUDENT HEALTH CENTER
MEDICAL AND MENTAL HEALTH CLINICS
FEE SCHEDULE FOR ACADEMIC YEAR 2018-2019
REGISTERED UC IRVINE STUDENTS

MEDICAL CLINICS
Office Visits
- Primary Care/Specialties $56 - $288
- Nutrition therapy (initial 15 min): $40
- Nurse Visit: $15 - $56
- Record review: $56

Physical Exam
- Basic PE Preventive Office Visit
  - Est. PT $131 - $219
  - New PT $157 - $261

Additional tests if indicated or requested:
- PPD $22
- Labs:
  - Blood Type $23
  - CBC w/Diff $41
  - CMP $63
  - Glucose $26
  - HBsAb/HBsAg $10
  - Lipid Scn, Basic $84
  - U/A Complete $41
- Drawing Fee $31

X-ray/Exams:
- CXR (1V) $93
- CXR (2V) $120
- Audiogram $51
- Spirometry $131

Vaccines:
- Td/tdap $27/$45
- MMR $66 each
- Polio (IPV) $31
- Hep A $36 each
- Hep B $46 each
- Twinrix $66 each
- Varicella $115
- J Encephalitis $287 each

Women’s Health Exam [Established Patient: Age 18-39 yrs]
- Routine PAP: $294 - includes exam $177, PAP thin layer $45, Chlamydia/N.Gonorrhoeae $41, drawing fee $31. Additional test if indicated: wet mount $28

Women’s Health Exam [New Patient: Age 18-39 yrs]
- Routine PAP: $329 - includes exam $212, PAP thin layer $45, Chlamydia/N.Gonorrhoeae $41, drawing fee $31. Additional test if indicated: wet mount $28

ONLINE BIRTH CONTROL EVAL
Medical Evaluation: $28 - $31

MENTAL HEALTH CLINIC
Psychiatric Record Review: $128
Psychiatric E/M Office Visits: $92 - $288/visit
Psychotherapy Visits: $120 - $183/visit

A fee is charged for “no show” or “late cancellation” if you do not cancel your appointment prior to the scheduled appointment date and/or if you do not arrive within five minutes of the scheduled time. Medical fee: $50.00; Mental Health fee: $60.00
# PE AND WOMEN’S HEALTH EXAM FEES

FEE SCHEDULE FOR ACADEMIC YEAR 2018-2019
REGISTERED UC IRVINE STUDENTS
Effective 9/24/2018

## ROUTINE PAP

<table>
<thead>
<tr>
<th>CPT</th>
<th>$ 248 - 378</th>
</tr>
</thead>
<tbody>
<tr>
<td>Includes Preventive Office Visit for Exam:</td>
<td></td>
</tr>
<tr>
<td>• New</td>
<td>99384 thru 99387 .......... $ 157 - $261</td>
</tr>
<tr>
<td>• Established</td>
<td>99394 thru 99397 .......... $ 131 - $219</td>
</tr>
<tr>
<td>Plus:</td>
<td></td>
</tr>
<tr>
<td>• PAP Thin Layer</td>
<td>88142 ......................... $ 45</td>
</tr>
<tr>
<td>• Chlamydia/N. Gonorrhoeae</td>
<td>87491/87591...................... $ 41</td>
</tr>
<tr>
<td>• Drawing Fee</td>
<td>99000 ......................... $ 31</td>
</tr>
</tbody>
</table>

WET MOUNT (87210, $28) AND ADDITIONAL TESTS AS INDICATED OR REQUESTED AT ADDITIONAL CHARGES.

## PE/PAP

<table>
<thead>
<tr>
<th>CPT</th>
<th>$ 358 - 488</th>
</tr>
</thead>
<tbody>
<tr>
<td>Includes Preventive Office Visit for Exam:</td>
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</table>

Plus (if necessary):

<table>
<thead>
<tr>
<th>CPT</th>
<th>$ 358 - 488</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Glucose Random</td>
<td>82947 ......................... $ 26</td>
</tr>
<tr>
<td>• Lipid Screen, Basic</td>
<td>80061 ......................... $ 84</td>
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PPD (86580, $22), WET MOUNT (87210, $28) AND ADDITIONAL TESTS AS INDICATED OR REQUESTED AT ADDITIONAL CHARGES.

## ONLINE BIRTH CONTROL EVAL

Medical Evaluation: $ 28 - $ 31

The information printed herein is accurate as of the date of publication. UC Irvine Student Health Center reserves the right to make required changes to this information during the academic year without prior notification.

09/24/2018