

EXHIBIT A
San Mateo County Public Health, Policy and Planning Fee Schedule

I. Health Clinics Fees[1]

Item	Fee FY 23/24	Fee FY 24/25	Change
Clinic Visits			
Adult Immunization Administration	\$26.00	\$26.00	\$ -
Adult Blood Draw	\$35.00	\$35.00	\$ -
Clinic visit with a nurse practitioner, registered nurse, or doctor at Edison Clinic	\$25.00	\$25.00	\$ -
Clinic visit with a nurse practitioner, registered nurse, or doctor at Mobile Clinic[2]	\$25.00	\$25.00	\$ -
Physical Exam at Mobile Clinic	\$60.00	\$60.00	\$ -
Adult Vaccines			
Combined Hepatitis A/B (Twinrix) – per dose - series of 3-4	\$50.00	\$50.00	\$ -
Hepatitis A – per dose - series of 2	\$28.00	\$28.00	\$ -
Hepatitis B – per dose – series of 3	\$68.00	\$68.00	\$ -
Hepatitis B - ENGERIX-B – per dose - series of 3	\$34.00	\$34.00	\$ -
Meningococcal Meningitis – series of 2	\$106.00	\$106.00	\$ -
Mumps, Measles, Rubella – series of 2	\$57.00	\$57.00	\$ -
Polio	\$37.00	\$37.00	\$ -
Pneumococcal pneumonia	\$46.00	\$46.00	\$ -
Tetanus: Tdap	\$46.00	\$46.00	\$ -
Tetanus: Td	\$27.00	\$27.00	\$ -
Varicella – 2 dose series	\$88.00	\$88.00	\$ -
Blood Draws and Laboratory			
Gonorrhea & Chlamydia NAAT (TMA)	\$35.09	\$35.09	\$ -
Herpes Simplex Virus 1 & 2 NAAT	\$35.09	\$35.09	\$ -
Herpes virus Type 1 and 2 (Serology)	\$28.00	\$28.00	\$ -
Hepatitis B Surface Antibody - HBsAb	\$25.00	\$25.00	\$ -
Hepatitis B Core Antigen – HBcAg	\$12.05	\$12.05	\$ -
Hepatitis B Core Antibody – HBcAb	\$16.00	\$16.00	\$ -
Hepatitis B Surface Antigen - HBsAg	\$11.77	\$11.77	\$ -
Hepatitis C Screening	\$60.00	\$60.00	\$ -
HIV Insti Test	\$14.00	\$14.00	\$ -
HIV-1 RNA Quantitative - Viral Load	\$85.10	\$85.10	\$ -
HIV-1/HIV-2 Diagnostic Supplemental Test	\$8.89	\$8.89	\$ -
HIV-1/ HIV-2 Antibody by EIA	\$19.57	\$19.57	\$ -
Measles (only) immunity	\$14.00	\$14.00	\$ -
Mumps (only) immunity	\$12.00	\$12.00	\$ -
Mumps, Measles, Rubella immunity panel	\$50.00	\$50.00	\$ -
Quantiferon	\$61.98	\$61.98	\$ -
Rapid Hepatitis C (Fingerstick)	\$19.00	\$19.00	\$ -
Rubella (only) immunity	\$32.00	\$32.00	\$ -
Syphilis EIA	\$13.24	\$13.24	\$ -
Trichomonas NAAT (TMA)	\$35.09	\$35.09	\$ -
Varicella Zoster Virus (VZV) Serology	\$12.88	\$12.88	\$ -

Skin Tests	Per dose Fee FY 23/24	Per dose Fee FY 24/25	Change
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1-Step Tuberculosis skin testing	\$35.00	\$35.00	\$ -
2-Step Tuberculosis skin testing (plus administration fee)	\$24.00	\$24.00	\$ -
Adults receiving either 1 Step or 2 Step Tuberculosis skin testing will also pay the addition of an immunization administration fee listed as "Adult Immunization Administration" under Clinic Visits.			

II. Laboratory Fees[4]

Item

Respiratory Disease Tests	Fee FY 23/24	Fee FY 24/25	Change
Acid Fast Smear	\$5.39	\$5.39	\$ -
Accu-Probe for M. Avium	\$20.05	\$48.24	\$ 28.19
Accu-Probe for M. Gordonae	\$20.05	\$48.24	\$ 28.19
Accu-Probe for M. Kansasii	\$20.05	\$48.24	\$ 28.19
Accu-Probe for M. Tuberculosis	\$20.05	\$42.84	\$ 22.79
AFB Culture (only)	\$6.68	\$10.80	\$ 4.12
Bordetella Pertussis NAAT (LAMP)	\$35.09	\$35.09	\$ -
FilmArray Respiratory PCR Panel	\$275.35	\$416.78	\$ 141.43
Identification Culture – Fungus/Mold/Yeast		\$10.32	\$ 10.32
Identification Culture – Mycobacteria		\$8.62	\$ 8.62
Identification Mass Spectrometry- Fungus/Yeast/Mold		\$24.11	\$ 24.11
Identification Mass Spectrometry- Mycobacteria		\$24.11	\$ 24.11
Influenza A/B Typing only	\$35.09	\$95.80	\$ 60.71
Influenza RT - PCR Subtyping (diagnostic)	\$35.09	\$95.80	\$ 60.71
SARS-CoV-2 PCR/TMA		\$51.31	\$ 51.31
SARS-CoV-2/Flu/RSV	\$142.63	\$142.63	\$ -
TB Drug Susceptibility Test, Primary	\$10.80	\$6.64	\$ (4.16)
TB GeneXpert PCR		\$41.68	\$ 41.68
TB Quantiferon		\$61.98	\$ 61.98
Varicella Zoster Virus (VZV) IgG EIA	\$12.88	\$12.88	\$ -

Sexually Transmitted Disease Tests	Fee FY 23/24	Fee FY 24/25	Change
Chlamydia by NAAT	\$35.09	\$35.09	\$ -
Gonorrhea & Chlamydia, NAAT	\$35.09	\$70.18	\$ 35.09
Gonorrhea, NAAT	\$35.09	\$35.09	\$ -
Gonorrhea Culture	\$6.63	\$8.62	\$ 1.99
Herpes Simplex Virus 1 and 2, NAAT	\$35.09	\$35.09	\$ -
HIV-1/2 Antigen/Antibody Combo, CMIA	\$24.08	\$24.08	\$ -
HIV-1/ HIV -2 Geenius Supplemental Test	\$8.89	\$13.71	\$ 4.82
HIV-1 RNA Quantitative, NAAT (TMA)	\$85.10	\$85.10	\$ -
Mpox NAAT		\$51.31	\$ 51.31
Mycoplasma Genitalium, NAAT (TMA)	\$35.09	\$35.09	\$ -
RPR, with reflex to Titer	\$4.40	\$18.64	\$ 14.24

Syphilis (TP), CMIA	\$13.24	\$13.24	\$ -
Syphilis Particle Agglutination TP-PA Syphilis Confirmation	\$18.63	\$13.24	\$ (5.39)
Trichomonas, NAAT (TMA)	\$35.09	\$35.09	\$ -

Enteric Disease Tests

	Fee FY 23/24	Fee FY 24/25	Change
Cryptosporidium/Giardia Antigen Rapid	\$13.82	\$13.82	\$ -
FilmArray Gastrointestinal PCR	\$262.99	\$416.78	\$ 153.79
Identification Mass Spec- Bacterial		\$24.11	\$ 24.11
Norovirus RT-PCR	\$35.09	\$35.09	\$ -
Shigatoxin EIA		\$11.98	\$ 11.98
Stool Culture (Aerobic)		\$9.44	\$ 9.44

Bloodborne Diseases Hepatitis and Encephalitis Tests

	Fee FY 23/24	Fee FY 24/25	Change
Hepatitis A Virus IgG Antibody, CMIA	\$12.39	\$12.39	\$ -
Hepatitis A Virus IgM Antibody, CMIA	\$11.26	\$11.26	\$ -
Hepatitis B Virus Core Total Antibody, CMIA	\$12.05	\$12.05	\$ -
Hepatitis B Surface Antibody Total		\$10.74	\$ 10.74
Hepatitis B Virus Surface Antigen, Quantitative CMIA	\$11.77	\$11.77	\$ -
Hepatitis B Virus Surface Antigen, Qualitative CMIA	\$10.33	\$10.33	\$ -
Hepatitis C Viral RNA Quantitative	\$42.84	\$42.84	\$ -
Hepatitis C Antibody, CMIA	\$14.27	\$14.27	\$ -
FilmArray Meningitis/Encephalitis PCR	\$416.78	\$416.78	\$ -

Vector-borne Diseases Tests

	Fee FY 23/24	Fee FY 24/25	Change
Animal Brain Removal (all animals minus bat)		\$45.00	\$ 45.00
Blood Smear for Parasites	\$5.99	\$5.99	\$ -
Ova and Parasite	\$8.90	\$8.90	\$ -
Pinworm Examination	\$4.27	\$4.27	\$ -
Rabies Direct Fluorescent Antibody	\$12.05	\$12.05	\$ -
Zika/Dengue/Chikungunya NAAT	\$16.85	\$35.09	\$ 18.24

Chronic Disease Tests

	Fee FY 23/24	Fee FY 24/25	Change
Lead Screen	\$12.11	\$12.11	\$ -

Environmental Tests (Microbiology)

	Routine Testing	Fee FY 23/24	Fee FY 24/25	Change
-Weekday				
AB 1876 (EH Only)		\$45.00	\$45.00	\$ -
AB 411 (EH Only)		\$45.00	\$45.00	\$ -
Colilert 18 Test (Enumeration - Quantiray)		\$32.00	\$32.00	\$ -
Colilert 18 Test (Enumeration - Quantiray) >30 spec/run (Bulk)		\$25.00	\$25.00	\$ -
Colilert 18 Test (Presence/Absence)		\$22.00	\$22.00	\$ -
Colilert 18 Test (Presence/Absence) >30 spec./run (Bulk)		\$15.00	\$15.00	\$ -
Drinking/Source Water (EH only)		\$32.00	\$32.00	\$ -
Enterolert Test		\$27.00	\$27.00	\$ -
Fecal Coliform Test		\$32.00	\$32.00	\$ -
Heterotrophic Plate Count		\$25.00	\$25.00	\$ -

Environmental Tests (Microbiology)	Routine Testing	Fee FY 23/24	Fee FY 24/25	Change
-Weekend				
AB 1876 (EH Only)		N/A		
AB 411 (EH Only)		N/A		
Colilert 18 Test (Enumeration - Quantiray)		\$62.00	\$62.00	\$ -
Colilert- 18 Test (Presence/Absence)		\$42.00	\$42.00	\$ -
Drinking/Source Water		\$62.00	\$62.00	\$ -
Enterolert Test (ENTERO)		\$54.00	\$54.00	\$ -
Fecal Coliform Test		\$62.00	\$62.00	\$ -
Heterotrophic Plate Count		\$60.00	\$60.00	\$ -

Environmental Tests (Chemical and Physical)	Routine Testing	Fee FY 23/24	Fee FY 24/25	Change
-Weekday				
Physical Properties I		\$30.00	\$30.00	\$ -
Color		\$15.00	\$15.00	\$ -
Odor		\$15.00	\$15.00	\$ -
Turbidity		\$15.00	\$15.00	\$ -

Environmental Tests (Chemical and Physical)	Routine Testing	Fee FY 23/24	Fee FY 24/25	Change
-Weekend				
Physical Properties I		\$60.00	\$60.00	\$ -
Color		\$30.00	\$30.00	\$ -
Odor		\$30.00	\$30.00	\$ -
Turbidity		\$30.00	\$30.00	\$ -

Other Services	Fee FY 23/24	Fee FY 24/25	Change
Non-Diagnostic Health Assessment Registration Fee	\$100.00	\$100.00	\$ -
Courier Fees (<i>based on courier rates at time of shipping</i>)			

III. Vital Statistics	Fee FY 23/24	Fee FY 24/25	Change
Item			
Birth Certificate	\$34.00	\$34.00	\$ -
Birth Certificate to a government agency	\$32.00	\$32.00	\$ -
Death Certificate	\$26.00	\$26.00	\$ -
Burial Permit	\$12.00	\$12.00	\$ -
After Hours Burial Permit	\$15.00	\$15.00	\$ -
Letters of Non-Contagious Disease (Transit Letter)	\$15.00	\$15.00	\$ -
Medical Marijuana ID Card for patient or caregiver	\$100.00	\$100.00	\$ -
Medical Marijuana ID Card for Medi-Cal patient or Caregiver of Medi-Cal patient	\$50.00	\$50.00	\$ -

[1] ACE/MCE Program members only pay program co-pay. Fees may be waived for any person who meets the eligibility criteria under the Federal Health Care for the Homeless Program and/or for persons clinically determined to be at risk for transmitting an STD/CD to others.

[2] A variety of preventive health screenings may be provided for free.

[3] Vaccines are provided free to children but an administration fee applies.

[4] The County Health Officer may waive fees for tests that are in the best interest of the public's health, for example, in outbreak situations, or in communicable disease investigations.