

**RESOLUTION NO. .**

**BOARD OF SUPERVISORS, COUNTY OF SAN MATEO, STATE OF CALIFORNIA**

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**RESOLUTION UPDATING THE PUBLIC HEALTH, POLICY AND PLANNING (PHPP)  
FEE SCHEDULE EFFECTIVE JULY 1, 2026**

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**RESOLVED**, by the Board of Supervisors of the County of San Mateo, State of California, that

**WHEREAS**, the Board of Supervisors of the County of San Mateo, State of California, has authority to establish and amend certain fees or service charges subject to legal requirements; and

**WHEREAS**, Section 101325 of the Health and Safety Code authorizes the County to charge fees to pay the reasonable expenses of the Health Officer in enforcing state laws, regulations, and orders relating to public health; and

**WHEREAS**, this Board has determined to exercise this authority by updating the fees that are set forth in Exhibit A, attached hereto and incorporated herein by this reference as the San Mateo County Public Health, Policy and Planning Fee Schedule; and

**WHEREAS**, the Board of Supervisors finds that the fees set forth in Exhibit A do not exceed the cost of providing the product or service or enforcing the regulation for which the fees are levied.

**NOW, THEREFORE, IT IS HEREBY DETERMINED AND ORDERED** by the Board of Supervisors of the County of San Mateo that based on the above Recitals, the Board hereby adopts the San Mateo County Public Health, Policy and Planning Fee Schedule, attached hereto as Exhibit A, effective July 1, 2026.

**BE IT FURTHER RESOLVED** that the Chief of San Mateo County Health or designee is authorized to make changes to the Public Health, Policy and Planning Fee Schedule to replace tests for diseases already included on the approved fee schedule with an equivalent test, as long as the new test fee is no more than 10% above the current test and to add tests which provide a greater level of clinical information than current tests, as long as these fees are not greater than 10% above the highest fee in that category.

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**EXHIBIT A**

**San Mateo County Public Health, Policy and Planning Fee Schedule**

**I. Health Clinics Fees[1]**

<b>Item</b>	<b>Fee FY 25/26</b>	<b>Fee FY 26/27</b>	<b>Change</b>
<b>Clinic Visits</b>			
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	\$40.00	\$ 15.00
Clinic visit with a nurse practitioner, registered nurse, or doctor at Mobile Clinic[2]	\$25.00	\$40.00	\$ 15.00
Physical Exam at Mobile Clinic	\$60.00	\$60.00	\$ -
PrEP consultation/quarterly visits		\$200	\$ 200.00
PrEP quarterly lab panel initial [5]		\$400	\$ 400.00
PrEP quarterly medication [5]		\$100	\$ 100.00
<b>Adult Vaccines [3]</b>			
Combined Hepatitis A/B (Twinrix) – per dose - series of 3-4	\$105.00	\$105.00	\$ -
Hepatitis A – per dose - series of 2 (Twinrix)	\$70.00	\$70.00	\$ -
Hepatitis B – per dose – series of 3	\$68.00	\$68.00	\$ -
Hepatitis B - ENGERIX-B – per dose - series of 3	\$34.00	\$34.00	\$ -
Hepatitis B - (Heplisav)	\$130.00	\$130.00	
Meningococcal Meningitis – series of 2 (Menveo)	\$122.00	\$122.00	\$ -
Mumps, Measles, Rubella – series of 2 (Priorix)	\$85.00	\$85.00	\$ -
Polio	\$37.00	\$37.00	\$ -
Pneumococcal pneumonia	\$46.00	\$46.00	\$ -
Pneumococcal pneumonia (pneumovax 23)	\$110.00	\$110.00	
Pneumococcal pneumonia (Pevnar 20)	\$235.00	\$235.00	
Tetanus: Tdap (Boostrix)	\$40.00	\$40.00	\$ -
Tetanus: Td (Tenivac)	\$35.00	\$35.00	\$ -
Varicella – 2 dose series (Varivax)	\$18.00	\$18.00	\$ -
Flu (Fluarix)	\$20.00	\$20.00	
Flu 65+ (Flublok)	\$65.00	\$65.00	
Covid	\$130.00	\$130.00	
Monkeypox (Jynneos)	\$265.00	\$265.00	
Human Papilloma Virus (Gardasil 9)	\$290.00	\$290.00	
Zoster (Shingrix)	\$185.00	\$185.00	

**Blood Draws and Laboratory**

<b>Item</b>	<b>Fee FY 25/26</b>	<b>Fee FY 26/27</b>	<b>Change</b>
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	\$	-

<b>Skin Tests</b>	<b>Per dose Fee FY 25/26</b>	<b>Per dose Fee FY 26/27</b>	<b>Change</b>
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]

<b>Item</b>	<b>Fee FY 25/26</b>	<b>Fee FY 26/27</b>	<b>Change</b>
<b>Respiratory Disease Tests</b>			
Acid Fast Smear	\$5.39	\$5.39	\$ -
AFB Culture (only)	\$10.80	\$10.80	\$ -
Bordetella Pertussis NAAT (LAMP)	\$35.09	\$35.09	\$ -
FilmArray Respiratory PCR Panel	\$416.78	\$416.78	\$ -
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	\$95.80	\$95.80	\$ -
Influenza RT - PCR Subtyping (diagnostic)	\$95.80	\$95.80	\$ -
SARS-CoV-2/FluA/B/RSV (4 Plex)	\$142.63	\$142.63	\$ -
TB Drug Susceptibility Test, Primary	\$6.64	\$10.80	\$ 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	\$ -

Measles RT-PCR

\$35.09

**Sexually Transmitted Disease Tests**

	<b>Fee FY 25/26</b>	<b>Fee FY 26/27</b>	<b>Change</b>
Gonorrhea & Chlamydia, NAAT	\$35.09	\$35.09	\$ -
Gonorrhea Culture	\$8.62	\$8.62	\$ -
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	\$8.89	\$ -
HIV-1 RNA Quantitative, NAAT (TMA)	\$85.10	\$85.10	\$ -
Mpox <b>Virus DNA</b> , NAAT	\$51.31	\$51.31	\$ -
Mycoplasma Genitalium, NAAT (TMA)	\$35.09	\$35.09	\$ -
RPR, with reflex to Titer	\$4.40	\$4.40	\$ -
Syphilis <b>Immunoassay</b> (TP), CMIA	\$13.24	\$13.24	\$ -
Syphilis Particle Agglutination TP-PA Syphilis Confirmation	\$13.24	\$13.24	\$ -
Trichomonas <b>Vaginalis</b> , NAAT (TMA)	\$35.09	\$35.09	\$ -

**Enteric Disease Tests**

	<b>Fee FY 25/26</b>	<b>Fee FY 26/27</b>	<b>Change</b>
Cryptosporidium/Giardia Antigen Rapid	\$13.82	\$13.82	\$ -
FilmArray Gastrointestinal PCR <b>Panel</b>	\$416.78	\$416.78	\$ -
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**

	<b>Fee FY 25/26</b>	<b>Fee FY 26/27</b>	<b>Change</b>
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	\$10.33	\$ (1.44)
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 <b>Panel</b>	\$416.78	\$416.78	\$ -

**Vector-borne Diseases Tests**

	<b>Fee FY 25/26</b>	<b>Fee FY 26/27</b>	<b>Change</b>
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	\$35.09	\$35.09	\$ -

<b>Chronic Disease Tests</b>		<b>Fee FY 25/26</b>	<b>Fee FY 26/27</b>	<b>Change</b>
Lead Screen		\$12.11	\$12.11	\$ -
<b>Environmental Tests (Microbiology)</b>				
<b>-Weekday</b>	<b>Routine Testing</b>	<b>Fee FY 25/26</b>	<b>Fee FY 26/27</b>	<b>Change</b>
AB 1876 (EH Only)		\$45.00	\$46.35	\$ 1.35
AB 411 (EH Only)		\$45.00	\$46.35	\$ 1.35
Colilert 18 Test (Enumeration - Quantiray)		\$32.00	\$32.96	\$ 0.96
Colilert 18 Test (Enumeration - Quantiray) >30 spec/run (Bulk)		\$25.00	\$25.75	\$ 0.75
Colilert 18 Test (Presence/Absence)		\$22.00	\$22.66	\$ 0.66
Colilert 18 Test (Presence/Absence) >30 spec./run (Bulk)		\$15.00	\$15.45	\$ 0.45
Drinking/Source Water (EH only)		\$32.00	\$32.96	\$ 0.96
Enterolert Test		\$27.00	\$27.81	\$ 0.81
Fecal Coliform Test		\$32.00	\$32.96	\$ 0.96
<b>Environmental Tests (Microbiology)</b>				
<b>-Weekend</b>	<b>Routine Testing</b>	<b>Fee FY 25/26</b>	<b>Fee FY 26/27</b>	<b>Change</b>
AB 1876 (EH Only)			N/A	
AB 411 (EH Only)			N/A	
Colilert 18 Test (Enumeration - Quantiray)		\$62.00	\$63.86	\$ 1.86
Colilert- 18 Test (Presence/Absence)		\$42.00	\$43.26	\$ 1.26
Drinking/Source Water		\$62.00	\$63.86	\$ 1.86
Enterolert Test (ENTERO)		\$54.00	\$55.62	\$ 1.62
Fecal Coliform Test		\$62.00	\$63.86	\$ 1.86
<b>Environmental Tests (Chemical and Physical)</b>				
<b>-Weekday</b>	<b>Routine Testing</b>	<b>Fee FY 25/26</b>	<b>Fee FY 26/27</b>	<b>Change</b>
Physical Properties I		\$30.00	\$30.90	\$ 0.90
Color		\$15.00	\$15.45	\$ 0.45
Odor		\$15.00	\$15.45	\$ 0.45
Turbidity		\$15.00	\$15.45	\$ 0.45
<b>Environmental Tests (Chemical and Physical)</b>				
<b>-Weekend</b>	<b>Routine Testing</b>	<b>Fee FY 25/26</b>	<b>Fee FY 26/27</b>	<b>Change</b>
Physical Properties I		\$60.00	\$61.80	\$ 1.80
Color		\$30.00	\$30.90	\$ 0.90
Odor		\$30.00	\$30.90	\$ 0.90
Turbidity		\$30.00	\$30.90	\$ 0.90
<b>Other Services</b>		<b>Fee FY 25/26</b>	<b>Fee FY 26/27</b>	<b>Change</b>
Non-Diagnostic Health Assessment Registration Fee		\$100.00	\$300.00	\$ 200.00
Courier Fees ( <i>based on courier rates at time of shipping</i> )			\$30.00-\$100.00	
<b>III. Vital Statistics</b>		<b>Fee FY 25/26</b>	<b>Fee FY 26/27</b>	<b>Change</b>
<b>Item</b>				

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.

[5] Fees for PrEP lab panels and medications may be covered by certain CA or other incentivized programs pending assistance requests and consultation.