RESOLUTION NO.	
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BOARD OF SUPERVISORS, COUNTY OF SAN MATEO, STATE OF CALIFORNIA

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RESOLUTION AMENDING THE PUBLIC HEALTH, POLICY AND PLANNING FEE

SCHEDULE EFFECTIVE OCTOBER 1, 2014

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 amending 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 October 1, 2014.

BE IT FURTHER RESOLVED that the Chief of the Health System 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<sup>1</sup>

ltem	Fee
Clinic Visits	
Clinic visit with a nurse practitioner, registered nurse, or doctor at Edison Clinic	\$25.00
Clinic visit with a nurse practitioner, registered nurse, or doctor at Mobile Clinic <sup>2</sup>	\$25.00
Physical Exam at Mobile Clinic	\$60.00
Adult and Children's Immunization Administration (under age 18) <sup>3</sup>	\$10.00
Adult Vaccines	
Hepatitis A	\$28.00
Hepatitis B	\$68.00
Hepatitis B - Engerix-B	\$34.00
Combined Hepatitis A/B (Twinrix)	\$50.00
Influenza	\$35.00
HPV Vaccine	\$137.00
price per one dose	,
(treatment includes 3 doses)	
Meningococcal Meningitis	\$106.00
Mumps, Measles, Rubella	\$57.00
Polio	\$37.00
Pneumococcal pneumonia	\$46.00
Tetanus: Tdap	\$46.00
Tetanus: Td	\$27.00
Varicella	\$88.00
Shingles (Zostavax)	\$164.00
Blood Draws and Laboratory <sup>4</sup>	
Mumps, Measles, Rubella immunity panel	\$50.00
Measles (only) immunity	\$24.00
Mumps (only) immunity	\$23.00
Rubella (only) immunity	\$25.00
Hepatitis B Infection Panel (HBsAg, HBsAb, HBcAB)	\$85.00

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<sup>&</sup>lt;sup>1</sup> 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 to others.

<sup>&</sup>lt;sup>2</sup> A variety of preventive health screenings may be provided for free.

<sup>&</sup>lt;sup>3</sup> Vaccines are provided free to children but an administration fee applies.

<sup>&</sup>lt;sup>4</sup> Any corresponding Health Clinics Fees for tests done by the PHL have also been updated.

Hepatitis B Immunity (HBsAb only)	\$25.00
Varicella Zoster Serology	\$26.00
Quantiferon	\$71.00
Syphilis EIA	\$38.00
Hepatitis C Antibody by EIA	\$25.00
HCV (Rapid Antibody)	\$19.00
Herpes Simplex PCR	\$111.00
Herpes virus Type 1 and 2 (serology)	\$28.00
HIV-1 RNA Quantitative - Viral Load	\$105.00
HIV (Rapid Antibody)	\$11.00
HIV Multi-Spot Supplemental Test	\$96.00
HIV-1/ HIV-2 Antibody by EIA	\$33.00
Gonorrhea & Chlamydia by NAAT	\$22.00
Trichomonas Molecular Test	\$18.00
Skin Tests	Per dose
Tuberculosis skin testing (children receiving this test and	
immunization(s) during the same visit will pay one administrative fee).	\$10.00
2-Step Tuberculosis skin testing	\$24.00

## II. Laboratory Fees<sup>5</sup>

ltem	Fee
Respiratory Disease Tests	
Acid Fast Smear	\$30.00
Accu-Probe for M. Avium	\$57.00
Accu-Probe for M. Gordonae	\$57.00
Accu-Probe for M. Kansasii	\$57.00
Accu-Probe for TB	\$57.00
TB Culture (only)	\$100.00
TB Smear & Culture	\$100.00
Culture For Identification - Mycobacteria	\$75.00
GeneXpert TB Identification	\$86.00
TB Susceptibility Test	\$100.00
Influenza RT - PCR	\$111.00
Influenza RT - PCR Subtyping	\$111.00
Film Array Respiratory Panel	\$168.00
Bordetella pertussis PCR	\$100.00
Bordetella pertussis Culture	\$100.00
Quantiferon	\$71.00
Varicella Zoster Serology	\$26.00

## **Sexually Transmitted Disease Tests**

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<sup>&</sup>lt;sup>5</sup> 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.

Chlamydia by NAAT Gonorrhea & Chlamydia by NAAT Gonorrhea by NAAT Herpes Simplex PCR HIV-1/ HIV-2 Antibody by EIA HIV Multi-Spot Supplemental Test HIV-1 RNA Quantitative - Viral Load Syphilis EIA RPR, Quantitative Trichomonas Molecular Test TPPA Syphilis Confirmation	\$22.00 \$22.00 \$22.00 \$111.00 \$33.00 \$96.00 \$105.00 \$38.00 \$22.00 \$18.00 \$29.00
Enteric Disease Tests	
Campylobacter Culture	\$64.00
Cryptosporidium/Giardia Antigen	\$11.80
E Histolytica Antigen	\$35.55
Norovirus RT-PCR	\$100.00
Salmonella	\$247.00
Shigella	\$119.00
STEC (E.Coli 0157:H7)	\$179.00
Stool Culture Aerobic	\$90.00
Vibrio Culture	\$95.52
Bloodborne Diseases	
Hepatitis C Antibody by EIA	\$25.00
Hepatitis C PCR Quantitative	\$105.00
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Vectorborne Diseases	
Blood Smear for Parasites	\$247.00
Arthropod/Insect Identification (Insect ID)	\$25.00
Other Communicable Bioces Tests	
Other Communicable Disease Tests	¢111 00
Molecular test for infectious agent, qualitative Molecular Test for infectious agent, quantitative	\$111.00 \$111.00
Enzyme Immunoassay Test	\$30.00
Microscopic examinations	\$15.00
Rabies (mammals)	\$0.00
MRSA PCR	\$68.00
C. difficile toxin PCR Confirmation	\$64.00
C. difficile Screen	\$38.00
Chronic Disease Tests	
Lead Retest	\$26.00
Lead Screen	\$26.00

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Bacteria Culture Definitive	\$199.00
Bacterial Culture For ID	\$127.00
Culture For Identification - Fungus	\$438.00
Culture For Identification - Yeast	\$374.00
Fungus Culture (Yeast or Mold)	\$374.00
Legionella Culture	\$103.00
Film Array Intestinal Pathogens	\$200.00
Ova and Parasite	\$273.00
Pinworm Exam	\$127.00
Parasite Identification	\$151.00
E. histolytica antigen EIA	\$36.00
Giardia/Cryptosporidium Rapid EIA	\$12.00

Environmental Tests (Microbiology)	Routine Testing (Received by 3 pm weekdays)	Received after 3 pm /Weekends /Holidays
AB 1876 (EH Only)	\$35.00	N/A
AB 411 (EH Only)	\$35.00	N/A
Colilert Test (Colilert)	\$30.00	\$60.00
Colilert Test (Presence/Absence)	\$20.00	\$40.00
Colilert Test (Presence/Absence) >30 spec./run	\$15.00	\$30.00
Drinking/Source Water (EH only)	\$30.00	\$60.00
Enterolert Test (ENTERO)	\$25.00	\$50.00
Fecal Coliform Test	\$30.00	\$60.00
Heterotropic Plate Count	\$25.00	\$50.00
Legionella Culture (Legion cult)	\$55.00	\$110.00
Membrane Filter Test (Coliforms) (MFT)	\$18.00	\$36.00
Membrane Filter Test - Enterococci	\$25.00	\$50.00
Multiple Tube Fermentation, Presumptive	\$35.00	\$70.00
Pool-Hot Tub-Bath (POOL)	\$50.00	\$100.00
Microscopic examinations	\$25.00	\$50.00
Gram stain	\$25.00	\$50.00
Lactophenol Cotton Blue stain	\$25.00	\$50.00

	Received after
Routine Testing	3 pm
(Received by 3 pm	/Weekends
weekdays)	/Holidays
\$175.00	\$350.00
\$35.00	\$70.00
\$35.00	\$70.00
\$35.00	\$70.00
\$35.00	\$70.00
\$35.00	\$70.00
\$60.00	\$120.00
	(Received by 3 pm weekdays) \$175.00 \$35.00 \$35.00 \$35.00 \$35.00 \$35.00

Phosphate	\$35.00	\$70.00
Sulfate Sulfate	\$35.00	\$70.00
Physical Properties I	\$30.00	\$60.00
Physical Properties II	\$30.00	\$60.00
Color	\$15.00	\$30.00
Odor	\$15.00	\$30.00
Turbidity	\$15.00	\$30.00
Total Dissolved Solids	\$15.00	\$30.00
рН	\$15.00	\$30.00
NaCl	\$15.00	\$30.00
Conductivity	\$15.00	\$30.00
Chlorine	\$15.00	\$30.00

### **Other Services**

Non-Diagnostic Health Assessment Registration	\$100.00
Fee	φ100.00
Courier Fee (weekdays)	\$40.00
Courier Fee (weekends & holidays)	\$100.00
Courier Fee (2 hrs.)	\$60.00
Courier Fee (Immediate)	\$100.00

### **III. Vital Statistics**

ltem	Fee
Birth Certificate	\$30.00
Birth certificate to a government agency	\$28.00
Death certificate	\$23.00
Fetal death certificate	\$23.00
Still birth certificate	\$23.00
Burial permit	\$12.00
After hours burial permit	\$12.00
Cross file of a burial permit	\$16.00
Medical Marijuana ID Card for patient or	\$154.00
caregiver	
Medical Marijuana ID Card for Medi-Cal patient	\$77.00
or caregiver of Medi-Cal patient	