

# Fees for Basic Services

These fees are for Talbert's basic health care services. Fees may change. Your actual out-of-pocket costs may be less, depending on your insurance coverage.

## PEDIATRIC WELLNESS CARE (through age 17)

AGE	SERVICE	TMG FEE	AGE	SERVICE	TMG FEE
<b>&lt; 1 year</b>	Well Child Exam	\$ 120.00	<b>1-4 Years</b>	Well Child Exam	\$ 120.00
	Hepatitis B Vaccine	\$ 27.00		DTP- HIB Combo (Trihibit) Vaccine	\$ 55.00
	Hep-HIB combo (Comvax) Vaccine	\$ 55.00		IPV Vaccine	\$ 40.00
	DtaP Vaccine	\$ 32.00		Prevnar Vaccine	\$ 144.00
	IPV Vaccine	\$ 40.00		PPD (TB Test)	\$ 25.00
	Rotateq Vaccine	\$ 95.00		Hepatitis A Vaccine	\$ 73.00
	Prevnar Vaccine	\$ 144.00		MMR Vaccine	\$ 55.00
	Flu Vaccine	\$ 25.00		Varivax Vaccine	\$ 187.00
<b>5-11 Years</b>	Well Child Exam	\$ 120.00	<b>12-17 Years</b>	Well Child Exam	\$ 120.00
	DtaP Vaccine	\$ 32.00		Menactra Vaccine	\$ 160.00
	IPV Vaccine	\$ 40.00		Gardasil Vaccine	\$ 240.00
	PPD (TB Test)	\$ 25.00		Adacel Vaccine	\$ 67.00
	MMR Vaccine	\$ 55.00			
	Varivax Vaccine	\$ 187.00			
	Gardasil Vaccine	\$ 240.00			

## ADULT (FEMALE) WELLNESS CARE

AGE	SERVICE	TMG FEE
<b>18-39 Years</b>	Physical Exam	\$ 140.00
	Gardasil Vaccine	\$ 240.00
<b>40-64 Years</b>	Physical Exam	\$ 160.00
	Mammogram	\$ 70.00
	Colonoscopy (facility fee additional)	\$ 400.00
	Chest X-ray	\$ 60.00
	EKG	\$ 45.00
	Adacel Vaccine	\$ 67.00
	Flu Vaccine	\$ 25.00
<b>65+ Years</b>	Physical Exam	\$ 160.00
	Chest X-ray	\$ 60.00
	EKG	\$ 45.00
	Flu Vaccine	\$ 25.00

## ADULT (MALE) WELLNESS CARE

AGE	SERVICE	TMG FEE
<b>18-39 Years</b>	Physical Exam	\$ 140.00
<b>40-64 Years</b>	Physical Exam	\$ 160.00
	Colonoscopy (facility fee additional)	\$ 400.00
	Chest X-ray	\$ 60.00
	EKG	\$ 45.00
	Adacel Vaccine	\$ 67.00
	Flu Vaccine	\$ 25.00
<b>65+ Years</b>	Physical Exam	\$ 160.00
	Chest X-ray	\$ 60.00
	EKG	\$ 45.00
	Flu Vaccine	\$ 25.00

## OBSTETRICAL CARE

AGE	SERVICE	TMG FEE
<b>All</b>	Vaginal Delivery (does not include Hospital fee) includes labs and 1 ultrasound	\$ 2,000.00
	C-Section Delivery (does not include Hospital fee) includes labs and 1 ultrasound	\$ 2,500.00
<b>Newborn</b>	Circumcision performed at Hospital	\$ 150.00
	Circumcision performed in Office	\$ 300.00

## SPECIAL PHYSICALS

AGE	SERVICE	TMG FEE
<b>All Adults</b>	Sports Physical	\$ 50.00
	DMV Physical	\$ 85.00

## PERSONAL ILLNESS AND INJURY VISITS

AGE	SERVICE	TMG FEE
<b>New Patient</b>	Office Visit (fee depends on complexity)	\$45 - \$200
<b>Established Patient</b>	Office Visit (fee depends on complexity)	\$30 - \$180

## MISCELLANEOUS SERVICES

AGE	SERVICE	TMG FEE
<b>All Ages</b>	Venipuncture (blood collection)	\$ 6.00
	Laboratory handling fee	\$ 14.00
	Completions of Patient Supplied Forms	\$ 10 - 85
	Copying of Medical Records	.25 per page

Fees for administration of vaccination apply: \$27.00 for any number of vaccines administered.

Please note that the health care costs and fees listed for an office visit are for the visit only. Your doctor may order procedures or lab tests that are required for the diagnosis or treatment of medical conditions. The prices for these procedures or tests will be in addition to those prices listed above and may be quoted by the front office staff at each center either over the phone or in person.