

BEFORE THE BOARD OF NORTHEAST TRI COUNTY HEALTH DISTRICT

IN THE MATTER OF UPDATING THE ) RESOLUTION 03-2010  
NORTHEAST TRI COUNTY HEALTH )  
DISTRICT FEE SCHEDULE FOR ) UPDATING FEE SCHEDULE FOR  
REPRODUCTIVE HEALTH SERVICES ) NORTHEAST TRI COUNTY HEALTH  
DISTRICT REPRODUCTIVE HEALTH  
SERVICES

WHEREAS, the Northeast Tri County Health District Board of Health is authorized under RCW 70.05.060 and RCW 70.45.060 to establish fee schedules for services; **AND**

WHEREAS, the Northeast Tri County Health District Board of Health previously adopted a fee schedule for Reproductive Health activities; **AND**

WHEREAS, the schedule needs to be updated.

NOW, THEREFORE:

IT IS HEREBY RESOLVED by the Northeast Tri County Health District Board of Health that the attached fee schedule be established.

Done this 3<sup>rd</sup> day of February, 2010 in Colville, Washington and effective February 8, 2010 upon signatures as of this date.

\_\_\_\_\_  
Board Member, City of Republic

*Bruce Miller*  
\_\_\_\_\_  
Board Member, Ferry County

*H. Clarence Berman*  
\_\_\_\_\_  
Board Member, City of Chewelah

*Robert L. Smith*  
\_\_\_\_\_  
Board Member, Ferry County

*Shirley Sands*  
\_\_\_\_\_  
Board Member, Town of Newport

*John Hankey*  
\_\_\_\_\_  
Board Member, Pend Oreille County

*Ann Kelly M.D.*  
\_\_\_\_\_  
Health Officer

\_\_\_\_\_  
Board Member, Pend Oreille County

*[Signature]*  
\_\_\_\_\_  
Board Member, Stevens County

*Larry Kuenther*  
\_\_\_\_\_  
Board Member, Stevens County

**NORTHEAST TRI COUNTY HEALTH DISTRICT - EFFECTIVE FEBRUARY 8, 2010  
REPRODUCTIVE HEALTH CARE SERVICES**

		New Client		Established Client	
ARNP Office Visit	Minimum Exam	99202	\$68.00*	99212	\$40.00*
ARNP Office Visit	Expanded Exam	99203	\$97.00*	99213	\$66.00*
RN/LPN/HCA Office Visit		99201	\$39.00*	99211	\$19.00*
ARNP Preventive Visit	12-17	99384	\$102.00*	99394	\$90.00*
ARNP Preventive Visit	18-39	99385	\$102.00*	99395	\$90.00*
ARNP Preventive Visit	40-64	99386	\$119.00*	99396	\$98.00*

**Family Planning and Health Care Services - Office Visit + Listed Charge or Cost of Supplies or Lab Cost**

Pregnancy Test	\$10.00*
Pap or Repeat Pap	Lab Cost*
Hematocrit	\$ 5.00*
Urine Specimen Collection / Dipstick	Cost of Supplies*

**Birth Control**

Birth Control Method	Cost of Supplies*
IUD Contraceptive Method Insertion	\$87.00 + cost of IUD*
IUD Contraceptive Method Removal	\$62.00*
Implanon Contraceptive Method Insertion	\$75.00 + cost of hormone*
Implanon Contraceptive Method Removal	\$90.00*

**Other Supplies**

Personal Lubricant	\$ .25 / each
Terazol	Cost of Supplies
Nystatin Neomycin	Cost of Supplies

**Sexually Transmitted Disease Check / Treatment - Office Visit + Cost of Supplies / Medication or Test**

Sexually Transmitted Disease Test	Cost of Test
HIV/AIDS Testing / Counseling / Venipuncture	\$10.00*
Sexually Transmitted Disease Treatment	Cost of Medication
Generic Flagyl	Cost of Medication

**Other Services - Charged as Listed**

Photo Copies (including medical records)	\$ .15 / page
Research of Public Records (includes first 25 pages)	\$60.00 / hour
Per Hour Charge	\$60.00 / hour

\*A sliding fee scale may be used to determine a reduced fee. Medicaid coupons accepted for most services. Our credit card transaction fees will be charged for use of credit or debit card as posted.

**Northeast Tri County Health District reserves the right to reduce or waive fees.**