



Fees for Services Effective Date of September 1, 2025

Fees for Copies of Public Records

• Copies of public records which may be disclosed shall be furnished at a charge of \$1.50 minimum (2 pages) and \$1.00 each additional page. Copies will be furnished on 8 ½" x 11" paper. Copies of documents produced on larger paper may be furnished at actual cost, which includes, but is not limited to, materials, operator's time, and transportation and delivery charges. Copying fees may be required to be paid for before issuance of the copies

Credit Card Charges

• Credit Card usage is for the convenience of our customers. Any additional charges related to that usage will be applied to the customer. Rates and fees may vary.

Clinical Services

Breast and Cervical Cancer Screening Program Fees

- For eligible patients, fees will be charged according to the rate adopted by West Virginia Department of Health and Human Services, Office of Maternal, Child and Family Health/Breast and Cervical Cancer Screening Program for the applicable services, and revisions will be implemented as received.
- Patients with insurance, will be billed at the maximum allowable insurance rate.
- Patients without insurance and that do not qualify will be billed on the current national sliding fee scale.

Family Planning Program Fees

- Patient fees will be charged according to the rate adopted by West Virginia Department of Health and Human Services, Office of Maternal, Child and Family Health/Family Planning Program for the applicable services and revisions will be implemented as received.
- Patients with insurance, will be billed at the maximum allowable insurance rate.
- Patients without insurance and that do not qualify will be billed on the current national sliding fee scale.

Pediatric Program Fees

- Medicaid/WVCHIP Healthcare coverage is based on family size and gross income (before taxes).
- Patients with insurance, will be billed at the maximum allowable insurance rate.
- Patients without insurance and that do not qualify will be billed on the current national sliding fee scale.

Address: 541 Harley O Staggers Dr STE 1, Keyser, WV 26726-8203 Telephone: 304-788-1321 • Fax: 304-788-6023 • Email: minerallhd@wv.gov

www.mineralcountyhealthdepartment.com





Fees for Services Effective Date of September 1, 2025

Immunizations

- VFC eligible patients will be billed at the allowable rate (see Superbill)
- Patients with insurance, will be billed at the maximum allowable insurance rate which includes administration fee, cost of vaccine and 20% handling charge.

Additional Clinical Services

 Additional Clinical Services not listed will be billed at the maximum allowable insurance rate

In no case will an individual be refused services due to an inability to pay

See Attached Superbill - Preventive Exams (New/Established Patients) See Attached Superbill - General Health/Education/Office Visit

> Address: 541 Harley O Staggers Dr STE 1, Keyser, WV 26726-8203 Telephone: 304-788-1321 • Fax: 304-788-6023 • Email: minerallhd@wv.gov

> > www.mineralcountyhealthdepartment.com





Fees for Services Effective Date of September 1, 2025

Superbill

MINERAL COUNTY HEALTH DEPARTMENT -541 Harley O Staggers Dr STE 1, Keyser, WV	26726
Phone: (304) 788-1321 * Fax: (304) 788-6023 * FEIN: 55-6011147	
The state of the s	

Street			DOB:			Group:		
			SSN:			ID:		
City, State			Phone:					
P	REVENTIVE EXAMS	FEE	FAMIL	Y PLANNING CLINIC (cont)	FEE		IMMUNIZATIONS	FEE
New Patie	nts:		FPPRO	Problem	Allowable	90460	Admin. Fee 1 Shot (Peds)	\$ 19.85
99381	Initial Exam, 0-1 Years	Allowable	FPIC	IC - Interim Continuing	Allowable	90461	Admin. Fee 2+ Shots (Peds)	\$ 19.85
99382	Initial Exam, 1-4 Years	Allowable		LABORATORY SERVICES		90471	Admin. Fee 1 Shot (Adult)	Allowable
99383	Initial Exam, 5-11 Years	Allowable	80053	C-14 comp. Metabolic*	Cost	90472	Admin. Fee 2+ Shots (Adult)	Allowable
99384	Initial Exam, 12-17 Years	Allowable	85025	CBC/Comp. Blood Ct. wDif*	Cost	90473	Admin, Oral/Intranasal	Allowable
99385	Initial Exam, 18-39 Years	Allowable	82550	CPK*	Cost	90474	Admin. Oral/Intranasal 2+	Allowable
99386	Initial Exam, 40-64 Years	Allowable	Multiple	Executive Profile*	Cost	90700	DTAP (90702 DT)* **	Cost
99387	Initial Exam, 65+ Years	Allowable	82270	Fecal Blood/Colon Occult*	Cost	90632	Hep A - Adult* **	Cost
50610	Initial Pap Exam	Allowable	82947	Glucose Screening (82962)*	Cost	90633	Hep A - 2 Dose Ped/Adol* **	Cost
	d Patients:		83036	HBAIC*	Cost	90634	Hep A - 3 Dose Ped/Adol* **	Cost
99391	Est. Exam, 0-1 Years	Allowable	86706	Hep. B Surf. Anti Post*	Cost	90744	Hep B (0-18 Years)***	Cost
99392	Est. Exam, 1-4 Years	Allowable	87621	HPV DNA Pap Probe*	Cost	90746	Hep B (19+ Years)***	Cost
99393	Est. Exam, 5-11 Years	Allowable	83655	Lead Screening*	Cost	90636	Hep A & B - Adult* **	Cost
99394	Est. Exam, 12-17 Years	Allowable	80061	Lipid Panel (w/chol/hdl rat.)*	Cost	90648	HIB* **	Cost
99395	Est. Exam, 18-39 Years	Allowable	80076	Liver Profile*	Cost	90647	HIB - 3 dose/Pedvax* **	Cost
99395	Est. Exam, 40-64 Years	-	88150	Pap Smear*	_	90649	HPV - Human Pap.* **	_
		Allowable			Cost			Cost
99397	Est. Exam, 65+ Years	Allowable	81025	Pregnancy Test, Urine*	Cost	90658	Influenza (3+ Years)***	Cost
S0612	Est. Pap Exam	Allowable	84153	PSA*	Cost	90657	Influenza (6-35 Mo.)* **	Cost
G0101	Medicare Annual	Allowable	86762	Rubella Titer*	Cost	90660	Influenza Mist* **	Cost
Q0091	Obtaining Medicare Pap	Allowable	84450	SGOT - AST*	Cost	90696	Kinrix (DTaP/IPV)* **	Cost
	ITIVE MEDC., INDIVIDUAL C		84460	SGPT - ALT*	Cost	90734	Meningococcal* **	Cost
99401	15 Min. Preventive Medc.	Allowable	88142	Thin Prep Pap (G0123 Medic.)*	Cost	90707	MMR* **	Cost
99402	30 Min. Preventive Medc.	Allowable	84436	Thyroid Pan (84443, 84479)*	Cost	90710	MMR/Varicella* **	Cost
99403	45 Min. Preventive Medc.	Allowable	82465	Total Cholesterol*	Cost	90723	Pediarix (DTaP/IP/HBV)* **	Cost
99404	60 Min. Preventive Medc.	Allowable	84478	Triglyceride*	Cost	90698	Pentacel (DTaP/IP/Hib)* **	Cost
PREV	ENTIVE MEDC., GROUP COL	UNSELING	81002	Urine Dipstick w/o Micro*	Cost	90670	Prevnar (PCV13)* **	Cost
99411	30 Min. Tobacco	Allowable	36415	Venipucture (G0001 Medicare)	Cost	90732	Pneumococcal* **	Cost
99412	60 Min. Tobacco	Allowable	BRE	AST AND CERVICAL CANCER (CLINIC	90713	Polio (IPV Inj.)* **	Cost
OFFI	CE VISIT/Outpatient/Probl	em Visits	99204	Initial	Allowable	90680	Rotavirus - 3 Dose* **	Cost
99211	Office/Outpatient Visit	Allowable	99213	Annual	Allowable	90681	Rotarix - 2 Dose* **	Cost
99212	Office/Outpatient Visit	Allowable	99212	Annual Breast or Cervical	Allowable	90375	Rabies Globulin* **	Cost
T1015	516 Medicald Encounter	Allowable	99211	Repeat Pap	Allowable	90736	Shingles/Zostavax* **	Cost
99080	Comp. Abstract (.25min)	Allowable	99211	Re-screen Breast	Allowable	90718	TD (Adult)* **	Cost
	ASSESSMENT		N/A	Initial Referral	Allowable	90715	TDaP (Tet/Dip/Pert)* **	Cost
96110	Developmental Exam	Allowable	N/A	Referral Partial - Mam/Col	Allowable	90691	Typhoid Vaccine* **	Cost
92551	Hearing Test	Allowable	N/A	Medicine Dispensed	Allowable	90716	Varicella - Chicken Pox* **	Cost
92567	Hearing - Tympanogram	Allowable	11/11	TUBERCULOSIS CLINIC	THIO WHO IS	Q0091	Obtaining Medicare Pap	Cost
92081	Vision Screening	Allowable	TBDC	Diagnostic Clinic	T	99000	Spec Handling-Lab tranf	Cost
32001	vision screening	Allowable	TBFU	Follow-Up	Basic	G0008	Adm. Medicare Flu	Set
N/A	Fluoride Lig/Tablets	Basic	THE	-	Public	G0009	Adm. Medicare Pneu.	Rate
	and the same of th	-	9 00000	X-ray		34.00.0		Mate
89235	Water Test Kit	PH	47399	Liver Profile	Health	G0010	Adm. Medicare Hep B	
	FAMILY PLANNING CLIN		QTF	QuantiFERON TB Gold test			COMMENTS	
FPINT	Initial	Allawable	86580	PPD Testing (Non-Epi)* **	Cost	Diag.		
FPANN	Annual	Allowable						
				County Health Department.				
release	any information required a	ind/or reques	ted by my i	nsurance company/Medicaid	/Medicare in	regard to	payment.	
Respons	ible Party's Signature						Previous Balance	
							Total Fee	
Method	of Payment				_		Patient Fee	\$ -
							Program Charges	
*Actual (Cost plus 20% **Varies wit	h vendor price					Amount Due	\$.

Address: 541 Harley O Staggers Dr STE 1, Keyser, WV 26726-8203

Telephone: 304-788-1321 • Fax: 304-788-6023 • Email: minerallhd@wv.gov





Fees for Services Effective Date of September 1, 2025

Environmental Services

Program	Description	Service Fee
Site Evaluation - Sewage	Environmental Site Evaluation (No Charge if accompanied with a permit)	\$135.00
Site Evaluation - Establishment Plan Review	Environmental Site Evaluation (No Charge if accompanied with a permit)	\$100.00
Health Education	Training programs, requested visits, talks and promotions	\$35.00 per hour*
Home Loan Evaluations	Person requesting evaluations	\$100.00 for sewage and \$100.00 for water*
Food Service Worker Training	Person attending Food Service Worker Training	\$10.00 (1 year permit)
Food Service Worker Training - Statewide	Person attending Food Service Worker Training for statewide card	\$20.00 (1 year permit)
Food Service Worker Training (Online)	Individual logs onto https://www.statefoodsafety.com/food- handler/west-virginia/mineral-county	\$20.00 (\$10 to company/\$10 to LHD) (1 year permit)
Food Service Worker Training – Statewide (Online)	Individual logs onto https://www.statefoodsafety.com/food-handler/west-virginia/mineral-county2	\$30.00 (\$10 to company/\$20 to LHD) (1 year permit)
Food Manager Training & Certification (Online)	Individual logs onto https://www.statefoodsafety.com/food-safety-manager-certification/west-virginia/mineral-county	\$116.00 (\$86 to company/\$30 to LHD) (5 year permit) (additional online proctor fee may apply)
Animal Sample /Rabies Testing	Non exposure request	Cost for preparing specimen plus postage*
Re-inspection	This will apply on a per visit basis for anything requiring a permit	\$75.00*
Other	All other environmental re-inspections, including, but not limited to: Clean Indoor Air Regulations, etc.	\$75.00**
Subdivision	Consultation (No Charge if accompanied with a permit)	\$100.00 per hour*
Water - Community	Consultation (No Charge if accompanied with a permit)	\$100.00 per hour*
Water Sample Collection	Excludes required regulatory samples for public supplies	\$65.00 per hour* (WV Lab charges additional \$20.00 fee)
Homeowner Septic Exam	Applies to any individual requesting to take homeowners exam	\$50.00
Record Search	Applies to any environmental record search	\$25.00 per hour, minimum 1 hour

*plus mileage

Address: 541 Harley O Staggers Dr STE 1, Keyser, WV 26726-8203

Telephone: 304-788-1321 • Fax: 304-788-6023 • Email: minerallhd@wv.gov