

Travel Immunization Notice

Due to insurance companies limited benefits on Travel Consults and Travel Immunizations as some insurance companies consider them elective and not a covered benefit, Hillside Family Medicine, LLC <u>requires payment in full at the time of service</u>.

As a courtesy, Hillside Family Medicine, LLC will bill most U.S. health plans. Any payment received from the health plan billed for Travel Consults and Travel Immunization services rendered will be reimbursed directly to the credit card used for payment at the time of service or via check that will be mailed to the address on file.

In addition to immunization charges listed below, there will be an immunization administration fee for EACH vaccine given.

	<u>CPT</u>	COST
YELLOW FEVER	90717	\$330.00
TYPHOID	90691	\$214.00
RABIES (2 SERIES)	90675	\$604.00X2(\$1,208.00)
JAPANESE ENCEPHALITIS (2 SERIES)	90738	\$462.00X2(\$924.00)
FIRST IMMUNIZATION ADMIN FEE	90471	\$60.00
EACH ADDITIONAL IMMUNIZATION	90472	\$54.00
changing and you the consumer need to be av	ware that yo ver these ser	edures, tests, and/or vaccines. Healthcare coverage are rapidle our insurance may not cover the above recommended services avices does not mean that you should not receive them or that it to verify coverage of services.
		nd, and agree to the above information regarding possibles sociated Immunization Administration fees:

Date

Date of Birth

Signature of Patient or Person acting on patient's behalf

Name of Patient (Print)