



## 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 requires payment in full at the time of service.

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.*

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	<u>CPT</u>	<u>COST</u>
YELLOW FEVER	90717	\$550.00
TYPHOID	90691	\$347.00
RABIES (2 SERIES)	90675	\$731.00x2 (\$1462.00)
JAPANESE ENCEPHALITIS (2 SERIES)	90738	\$633.00x2 (\$1,266.00)
FIRST IMMUNIZATION ADMIN FEE	90471	\$80.00
EACH ADDITIONAL IMMUNIZATION	90472	\$57.00

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*Note: You have a CHOICE about receiving lab work, procedures, tests, and/or vaccines. Healthcare coverage are rapidly changing and you the consumer need to be aware that your insurance may not cover the above recommended services. The possibility that your insurance may not cover these services does not mean that you should not receive them or that it is not in your best interest. Feel free to call your insurance to verify coverage of services.*

Please sign below indicating you have read, understand, and agree to the above information regarding possible noncoverage of Travel Consult & Immunizations and the associated Immunization Administration fees:

\_\_\_\_\_  
Signature of Patient or Person acting on patient's behalf

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Patient (Print)

\_\_\_\_\_  
Date of Birth