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PO Box 97  
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HAWSEHEALTH.COM

## E. A. HAWSE HEALTH CENTER FEE SCHEDULE 2024

A “prompt-pay” 10% discount will be applied to the TOTAL of charges for “self-pay” patients that pay in full at the time of service for the procedures listed below.

### New Patient

99202 - \$138.00  
99203 - \$207.00  
99204 - \$313.00  
99205 - \$418.00

### Established Patient

99211 - \$45.00  
99212 - \$84.00  
99213 - \$133.00  
99214 - \$198.00  
99215 - \$297.00

### Preventive New Patient

99381 - age <1yr \$190.00  
99382 - age 1-4 \$191.00  
99383 - age 5-11 \$197.00  
99384 - age 12-17 \$222.00  
99385 - age 18-39 \$253.00  
99386 - age 40-64 \$279.00  
99387 - age 65+ \$294.00

### Preventive Established Patient

99391 - age <1yr \$162.00  
99392 - age 1-4 \$171.00  
99393 - age 5-11 \$172.00  
99394 - age 12-17 \$190.00  
99395 - age 18-39 \$219.00  
99396 - age 40-64 \$231.00  
99397 - age 65+ \$245.00

### Additional Service Charges

S0610 – Annual GYN Exam (NEW) - 308.00  
S0612 – Annual GYN Exam (EST) - \$231.00  
S0613 – Annual Clinical Breast Exam - \$114.00  
90460 – Immunization for children ages 0-17 \$19.85  
90461- Immunization for children ages 0-17 (each additional) \$19.85  
90471- Immunization for adults ages 18 and over \$19.85  
90472 Immunization for adults ages 18 and over (each additional) \$19.85  
Miscellaneous Form Fee (e.g. FMLA) - \$35.00  
COVID-19 Test - \$100.00  
95115 – Allergy Injection (Single) \$23.00  
95117 – Allergy Injection (Multiple) \$30.00  
96372 – Therapeutic Injection \$46.00

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### Prompt pay discount does not apply to the following services – Price listed reflects a discount.

DOT Physical - \$150.00  
Boy Scout Physical - \$0.00  
Headstart Physical - \$50.00  
Sports Physical - \$0.00  
College Physical - \$50.00

For unlisted service charges, please contact the billing office at 304-897-5915 extension 99690.

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