AVAILABLE TRAVEL VACCINES
Call 406 582-3100 to schedule appointment

*TRAVEL FEE of $20.00 for 1st person/$10.00 per additional person

*CHOLERA (ORAL) CPT CODE: 90625 $296.00
*JAPANESE ENCEPHALITIS CPT CODE: 90738 $373.00 EA (2 SHOT SERIES)
*RABIES CPT CODE: 90675 $371.00 EA (3 SHOT SERIES)

Payment due at time of service for the above * vaccines/service
(If your insurance pays for the vaccine we will reimburse you. We recommend that you contact your insurance company prior to appointment to see if coverage is available for the above and all other vaccines.)

TYPHOID
ORAL (GOOD FOR 5 YRS) CPT CODE: 90690 $86.00
SHOT (GOOD FOR 2 YRS) CPT CODE: 90691 $106.00

YELLOW FEVER (LIFETIME)
Note: RX required if 60 or over
CPT CODE: 90717 $191.00

(CURRENTLY UNAVAILABLE IN GALLATIN COUNTY)
Contact: Riverstone Health in Billings, MT 406-247-3382

We Bill Insurance
Those with Medicare Part D prescription plans will be asked to pay the patient portion not covered at time of service

We offer the Vaccine For Children (VFC) Program for routine vaccines to qualified children 0 through 18. Administration Fee: $21.00/per shot plus sliding fee scale offered. Call 406 582-3100 to see if your child qualifies.

We offer 317 Vaccines for adults 19 and older with no insurance or whose insurance companies do not pay for the following vaccines: MMR, HEPA, HEPB, TWINRIX, FLU, TDAP, HPV. Administration Fee: $21.00/per shot (no additional slide offered.)

Accepted forms of payment include cash, check and credit or debit cards listed below.

AVAILABLE ROUTINE VACCINES
Call 406 582-3100 to schedule appointment

DTaP children under 7
CPT CODE: 90700 $54.00

HEP A (2 SHOT SERIES)
ADULTS CPT CODE: 90632 $81.00 EA
CHILDREN CPT CODE: 90633 $69.00 EA

HEP B (3 SHOT SERIES)
ADULTS CPT CODE: 90746 $94.00 EA
CHILDREN CPT CODE: 90744 $51.00 EA

HIB CPT CODE: 90647 $57.00

HPV CPT CODE: 90651 $287.00 EA
14YRS AND YOUNGER (2 SHOT SERIES)
15YRS+ (3 SHOT SERIES)

INFLUENZA FLU SHOT CPT CODE: 90686 $42.00
Hi-Dose for 65 years and older CPT CODE: 90662 $81.00

IPV CPT CODE: 90713 $59.00

MENINGOCOCCOL MENINGITIS
2-55 YRS CPT CODE: 90734 $153.00

MENINGOCOCCOL B (Bexzero)
10-25 YRS CPT CODE: 90620 (2 SHOT SERIES) $249.00 EA

MMR CPT CODE: 90707 $118.00

MMR/V CPT CODE: 90710 $299.00

PEDIARIX (DTAP-HEP B-IPV)
CPT CODE: 90723 $109.00

PNEUMONIA (PNEUMOVAX 23)
CPT CODE: 90732 $139.00

PREVNAR 13 CPT CODE: 90670 $253.00

ROTAVIRUS CPT CODE: 90680 $128.00

SHINGRIX New Shingles Vaccine (AGE 50+)
CPT CODE: 90750 $196.00 EA (2 SHOT SERIES)

TB TEST CPT CODE: 86580 $20.00

TDAP persons 7 and older
CPT CODE: 90715 $68.00

TWINRIX (COMBO HEP A/B - 3 SHOT SERIES)
CPT CODE: 90636 $145.00 EA

VARICELLA (2 SHOT SERIES)
CPT CODE: 90716 $181.00 EA

Accepted forms of payment include cash, check and credit or debit cards listed below.