**HANSEN FAMILY PRACTICE PRICING:**

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|  | **Self-Pay Pricing** | **Monthly Flat Fee Option** |
| New Patient Exam | $100.00 | FREE |
| Established Patient Exam | $80.00 | FREE |
| Urgent Care Visit | $80.00 | FREE |
| Female Physical | $125.00 (pathology for pap not included in price) | FREE (pathology for pap not included in price) |
| Male Physical | $125.00 | FREE |
| DOT Physical | $110.00 | $40.00 |
| Sports Physical | $25.00 | $10.00 |

**Additional cost for below items:**

 **Self-Pay Pricing Monthly Flat Fee Option**

|  |  |  |
| --- | --- | --- |
| Simple Skin Biopsy | $60.00 (pathology not included in price) | $30.00 (pathology not included in price) |
| Incision and Drainage of Superficial Abscess | $60.00 | $30.00 |
| ---------Subsequent follow up visits | $40.00 (only charge, there is no exam fee added on) | $10.00 |
|  |  |  |
| Wart Removal----------1 to 2 | $50.00 | $25.00 |
| ---------- | $20.00 (Price rate increases with each additional 2) | $20.00 (Price rate increases with each additional 2) |
| Mole Removal | $60.00 (pathology not included in price) | $30.00 (pathology not included in price) |
| Laceration Repair | $100.00 (only charge, there is no exam charge added on)  | $50.00 |
| Skin Tag Removal  | $50.00 | $25.00 |
| Cerumen (Ear Wax ) Removal | $30.00 | $10.00 |
| Nebulizer Treatment (Albuterol) | $20.00 | $10.00 |

**Injections: Self-Pay Pricing Monthly Flat Fee Option**

|  |  |  |
| --- | --- | --- |
| Benadryl | $25.00 | $10.00 |
| Solu-Medrol | $30.00 | $20.00 |
| Toradol | $30.00 | $10.00 |
| Rocephin | $20.00 | $10.00 |
| Promethazine | $25.00 | $10.00 |
| B12 | $25.00 | $10.00 |
| Kenolog | $40.00 | $25.00 |

**Immunizations: Self-Pay Pricing Monthly Flat Fee Option**

|  |  |  |
| --- | --- | --- |
| Tdap | $65.00 | $55.00 |
| Td | $55.00 | $35.00 |

\*Other immunizations available upon request.

**In House Labs: Self-Pay Pricing Monthly Flat Fee Option**

|  |  |  |
| --- | --- | --- |
| Urinalysis | $20.00 | FREE |
| Urine Pregnancy Test | $20.00 | $10.00 |
| Rapid Strep Test | $20.00 | FREE |
| Influenza A and B Test | $30.00 | $20.00 |
| Fecal Occult Blood Stool | $30.00 | $15.00 |
| Glucose  | $5.00 | FREE |

**Labs done at Quest Diagnostics ONLY for both types of payment options**

|  |  |
| --- | --- |
| Comp Metabolic Panel with EGFR | $25.00 |
| Complete Blood Count with Differential | $20.00 |
| Complete Blood Count with Manual Diff | $20.00 |
| Thyroid Panel and TSH | $30.00 |
| TSH | $25.00 |
| Vitamin B12 and Folate | $40.00 |
| Iron Binding Capacity/FerritinLipid Panel with direct reflex LDL direct(additional charge for direct LDL if indicated) | $30.00$25.00$40.00 for direct LDL if indicated |
| Ferritin | $20.00 |
| Respiratory Allergy Pro and Region XI | $215.00 |
| PSA; total | $30.00 |
| PSA; Free and Total | $90.00 |
| Vitamin D | $50.00 |
| Total Testosterone (males) | $35.00 |
| Prothrombin (INR) | $18.00 |
| Rheumatoid Factor | $30.00 |
| HgA1C | $25.00 |
| Plasma Glucose | $13.00 |
| Lipid Panel  | $20.00 |
| Celiac Panel | $220.00 |
| HIV | $35.00 |
| Hepatitis C | $25.00 |
| Amylase | $10.00 |
| Lipase | $10.00 |
| H pylori Stool | $40.00 |
| Throat Culture (processed at Quest Diagnostics) | $35.00 |
| Pap Pathology | State of Montana only allows billing of third parties and the patient themselves only. I cannot by law negotiate price |
| Skin Biopsy | State of Montana only allows billing of third parties and the patient themselves only. I cannot by law negotiate price.  |
| PTH, Intact and Calcium | $50.00 |
| Influenza A and B, Rapid AG | $35.00 |
| Sure Swab Chlamydia/GC RNA | $50.00 |
| Culture, Aerobic/Anaerobic Prof | $140.00 |
| Culture, Aerobic | $50.00 |
| Fecal Occult Stool (2 different samples) | $75.00 |
| Urinalysis with reflex to microscopic and culture (addition cost for culture) | $15.00$ 20.00 for culture if indicated |
| C-Reactive Protein | $25.00 |
| Culture, Genital | $40.00 |
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*\*Other tests available at discounted pricing upon request*