

# 2019 Fee Schedule

Adopted by the Board of Health on January 31, 2019

## Environmental Health & Water Lab Services

<b>On-Site Wastewater Treatment Systems (OWTS)</b>		
New OWTS Permit (Construction Permit)	\$1000 + \$23*	Includes design review, up to 2 inspections
Alteration Permit	\$950 + \$23*	Includes design review, up to 2 inspections
Change of Use Permit	\$450 + \$23*	Includes design review and 1 inspection
Soil Remediation Permit	\$350 + \$23*	Includes 1 inspection
Minor Repair Permit	\$350 + \$23*	Includes 1 inspection
Transfer of Title Acceptance Document	\$60	If application is incomplete, fee will be charged again upon resubmission
Re-inspection (beyond inspections included in permit fee)	\$120	Per re-inspection
Appeals and Variances	\$60/hour	Minimum charge \$240
Site Visit/ Courtesy Inspection and Report	\$240	
OWTS Regulations, Printed and Bound	\$20	Free with System Contractors License
Consultation/ Plan Review	\$60/hour	First hour free
County Planning Review and Comments	\$60/hour	First hour free, if no site visit is required
County Planning Review and Comments with Site Visit	\$240	
Staff Services Fee	\$60/hour	
System Contractor License	\$120	Includes class, test, license for calendar year

\* Per §25-10-107 C.R.S. Colorado Department of Health & Environment (CDPHE) Water Quality Division assesses a fee of \$23 for each authorized new and repair OWTS permit; \$20 is submitted to CDPHE and \$3 is retained by SJBPH to cover administrative costs.

\*\* \$43.00 of each retail food license fee collected is sent to the State Treasurer. Reflects fee increases per HB 16-1401

# SAN JUAN BASIN

## public health

System Contractor License Renewal	\$60	Includes test, license for calendar year
System Cleaner License and Inspection	\$60	First vehicle
System Cleaner License and Inspection	\$30	Additional vehicles
<b>Water Lab</b>		
Drinking water: standard bacteria, for private wells and homes	\$25	
Drinking water: standard bacteria, for public water systems or compliance reporting	\$30	Includes submission of results to State or other compliance authority
Drinking water: Quanti-Tray	\$36	
Wastewater: Total Suspended Solids	\$18	
Wastewater: Fecal coliform	\$48	
Wastewater: E. coli	\$36	
Wastewater: Biochemical Oxygen Demand	\$60	
Wastewater: Total Dissolved Solids	\$18	
Wastewater/drinking water: Additional services	Market price	Plus shipping (for non-compliance samples) and a \$13.50 handling fee
<b>Retail Food Establishments</b>		
Annual License Fee		Per Section 25-4-1607 C.R.S., effective September 1, 2018
No Fee License (k-12 schools, non-profit)	\$0	
Limited Food Service License (convenience)	\$270**	
Restaurant License (0-100 seats)	\$385**	
Restaurant License (101-200 seats)	\$430**	
Restaurant License (>200 seats)	\$465**	
Grocery Store License (0-15,000 sq. ft.)	\$195**	
Grocery Store License (>15,000 sq. ft.)	\$353**	
Grocery Store w/Deli License (0-15,000 sq. ft.)	\$375**	

\* Per §25-10-107 C.R.S. Colorado Department of Health & Environment (CDPHE) Water Quality Division assesses a fee of \$23 for each authorized new and repair OWTS permit; \$20 is submitted to CDPHE and \$3 is retained by SJBPH to cover administrative costs.

\*\* \$43.00 of each retail food license fee collected is sent to the State Treasurer. Reflects fee increases per HB 16-1401

SAN JUAN BASIN  
**public health**

Grocery Store w/Deli License (>15,000 sq. ft.)	\$715**	
Mobile Unit License (pre-packaged, non PHF)	\$270**	
Mobile Unit License (full food service)	\$385**	
Oil and Gas Temporary License	\$850**	
Retail Food Establishment Plan Review Application	\$100	Per Section 25-4-1607 C.R.S.
Plan Review	\$60/hr.	Includes review of plans, pre-operational inspections, and staff training as needed.  Not to exceed \$580. Per Section 25-4-1607 C.R.S.
Change of Ownership Inspection	\$60/hr.	Includes staff training
HACCP Review	\$60/hr.	Includes review of written procedures.  Not to exceed \$100 Per Section 25-4-1607 C.R.S.
Existing HACCP Process Review	\$60/hr.	Includes onsite review of HACCP processes already conducted in an establishment.  Not to exceed \$400 Per Section 25-4-1607 C.R.S.
Class attendance (Food Safety Basics, Mini Skills, etc.)	\$10	Per attendee
Temporary Event Vendor Plan Review	\$60/hr.	Temporary event plan reviews are conducted every year and expire on December 31 <sup>st</sup>
Vendor Event Application and License	\$30	Application and license is valid for one event.  Mobile units that hold an annual Colorado State RFE license are exempt

\* Per §25-10-107 C.R.S. Colorado Department of Health & Environment (CDPHE) Water Quality Division assesses a fee of \$23 for each authorized new and repair OWTS permit; \$20 is submitted to CDPHE and \$3 is retained by SJBPH to cover administrative costs.

\*\* \$43.00 of each retail food license fee collected is sent to the State Treasurer. Reflects fee increases per HB 16-1401

SAN JUAN BASIN  
**public health**

Inspection and plan review by request	\$75	Includes both written plan review and onsite inspection for the first hour. Additional time is charged at \$60/hr.
<b>Childcare Centers and Camps</b>		
Application Fee	\$100	
Childcare centers Regular inspection Follow-up	\$120 \$60	Additional staff time will be charged per hour
Camps Regular inspection Follow-up	\$240 \$120	Additional staff time will be charged per hour
Plan Review/Staff Service Fee	\$60/hr.	First hour is free
<b>Other Consumer Protection Inspections</b> including pools, spas, body art, schools etc..	\$120	Includes the first two hours. Additional time is charged at \$60/hr.

\* Per §25-10-107 C.R.S. Colorado Department of Health & Environment (CDPHE) Water Quality Division assesses a fee of \$23 for each authorized new and repair OWTS permit; \$20 is submitted to CDPHE and \$3 is retained by SJBPB to cover administrative costs.

\*\* \$43.00 of each retail food license fee collected is sent to the State Treasurer. Reflects fee increases per HB 16-1401

## Open Records Requests

<b>Public Records</b>		
Paper copy		
Up to 11" x 17" in size	\$0.25/page	
Greater than 11" x 17" in size		Actual cost of reproduction
Electronic copy	\$1 per CD/DVD	Data compilation time additional
Data compilation		Includes the cost of redacting documents to excise privileged information
Less than one hour to fulfill request	\$0	
More than one hour to fulfill request	\$25/hour	Or as otherwise established in the Colorado Revised Statutes

## Vital Statistics

<b>Vital Statistics</b>		Fees are set by the Office of the State Registrar of Vital Statistics
Birth Certificate	\$20.00	First copy
Additional certificates	\$13.00	
Death Certificate	\$20.00	First copy
Additional certificates	\$13.00	

Clinic

Immunizations	Price	Adult or Pediatric Vaccines
Travel Consult (new patient)	\$45.00	
Travel Consult (existing patient)	\$25.00	
VFC Vaccines	\$21.68	Pediatric
317 Vaccines	\$21.68	Adult
Flu Vaccine- Under 65	\$25.00	Adult and Pediatric
PPD- TB Test	\$30.00	Adult and pediatric
HEP A Pediatric Havrix	\$52.00	Pediatric
Polio IPOL	\$58.00	Adult
HEP A Havrix	\$69.00	Adult
TDAP	\$61.00	Adult
HEP B Energix	\$73.00	Adult
High Dose Flu 65+	\$76.00	Adult
Typhoid VI	\$101.00	Adult and Pediatric
MMR	\$104.00	Adult
Twinrix (HEP A/B) combo	\$114.00	Adult
Pneumovax 23	\$133.00	Adult
Typhoid Oral	\$141.00	Adult and Pediatric
MCV-4	\$149.00	Adult
Yellow Fever	\$151.00	Adult and Pediatric
Varicella	\$161.00	Adult
Bexero (Men B)	\$190.00	Adult and Pediatric
HPV 9 Gardasil	\$237.00	Adult
PCV-13	\$233.00	Adult
Shingrix	\$174.00	Adult
Rabavert	\$320.00	Adult and Pediatric
Japanese Encephalitis	\$323.00	Adult and Pediatric

Note: SJBPH reviews immunization fees on a quarterly basis and makes adjustments based on vaccine prices.

SAN JUAN BASIN  
**public health**

<b>Colposcopy</b>	<b>Price</b>	
Colposcopy no Biopsy	\$167.00	
Colposcopy w/ 1 Biopsy	\$214.00	
Colposcopy w/ 1 Biopsy + Endocervical Curettage (ECC)	\$260.00	
Tissue Biopsy	\$47.00	
Immunohistochemical Stain	\$22.00	
Histochemical Stain	\$20.00	
One Biopsy	\$47.00	
Two Biopsies (Biopsy + ECC)	\$94.00	

Note: SJBPH reviews immunization fees on a quarterly basis and makes adjustments based on vaccine prices.

Income as % of Poverty Guidelines		CPT Code	0-100%	101-150%	151-200%	201-250%	250-350%
			Code 1	Code 2	Code 3	Code 4	Code 5
% Pay Status		Cost	0%	25%	50%	75%	100%
VISIT TYPES (Select one from this section per visit)	New Patient-Minimum	99201	\$0	\$17	\$34	\$51	\$68
	New Patient-Expanded	99202	\$0	\$29	\$57	\$86	\$114
	New Patient-Detailed	99203	\$0	\$41	\$82	\$123	\$165
	Establish Patient-Minimal	99211	\$0	\$8	\$16	\$25	\$33
	Established Patient-Focused	99212	\$0	\$17	\$33	\$50	\$67
	Established Patient-Expanded	99213	\$0	\$28	\$56	\$83	\$111
	New Patient Preventive Visit - 12-17 Years of Age	99384	\$0	\$52	\$104	\$155	\$207
	New Patient Preventive Visit - 18-39 Years of Age	99385	\$0	\$50	\$100	\$151	\$201
	New Patient Preventive Visit - 40-64 Years of Age	99386	\$0	\$58	\$117	\$175	\$233
	Established Patient Preventive Visit - 12-17 Years of Age	99394	\$0	\$44	\$89	\$133	\$177
	Established Patient Preventive Visit - 18-39 Years of Age	99395	\$0	\$45	\$90	\$136	\$181
	Established Patient Preventive Visit - 40-64 Years of Age	99396	\$0	\$48	\$96	\$145	\$193
	Individual Counseling, 15 minutes	99401	\$0	\$14	\$29	\$43	\$58
	Individual Counseling, 30 minutes	99402	\$0	\$24	\$48	\$72	\$96
	Individual Counseling, 45 minutes	99403	\$0	\$33	\$67	\$100	\$134
	IUD Removal	58301	\$0	\$36	\$73	\$109	\$146
	IUD Insertion	58300	\$0	\$28	\$56	\$85	\$113
	Implant Insertion	11981	\$0	\$55	\$109	\$164	\$219
	Implant Removal	11982	\$0	\$61	\$122	\$183	\$245
	Implant Removal with Reinsertion	11983	\$0	\$88	\$177	\$265	\$353
LAB SERVICES	Chlamydia/Gonorrhea (slides for the reasons stated below <sup>2</sup> )*		\$0	\$8	\$15	\$23	\$30
	Thin Prep Pap Test (Initial or Annual Exam)*		\$0	\$6	\$13	\$19	\$25
	HPV Screening Test Done with Pap		\$0	\$9	\$18	\$26	\$35
	Urine Pregnancy Test	81025	\$0	\$3	\$5	\$8	\$10
	Lipid Profile (for a BC method)*		\$0	\$11	\$22	\$32	\$43
	Blood Glucose (for a BC method)*		\$0	\$3	\$6	\$8	\$11
	Hematocrit (for pre-IUD client or for a BC method)*	85013	\$0	\$4	\$8	\$12	\$16
	Hemoglobin (for pre-IUD client or for a BC method)*	85018	\$0	\$4	\$8	\$12	\$16
	Blood Draw/Venipuncture (with a lab that slides)*	36415	\$0	\$1	\$3	\$4	\$5
	Specimen Handling to Lab (with a lab that slides)*	99000	\$0	\$2	\$4	\$5	\$7
Collection of Capillary Blood Specimen	36416	\$0	\$1	\$3	\$4	\$5	
CONTRACEPTIVES/SUPPLIES	Oral Birth Control		\$0	\$5	\$10	\$15	\$20
	Depo-Provera		\$0	\$9	\$18	\$26	\$35
	Plan B		\$0	\$3	\$6	\$9	\$12
	Nuva Ring		\$0	\$7	\$13	\$20	\$26
	Ella		\$0	\$4	\$8	\$11	\$15
	Diflucan		\$5	\$5	\$6	\$9	\$12
	Acyclovir		\$5	\$5	\$5	\$8	\$10
	Metrogel		\$17	\$17	\$17	\$17	\$17
	STI treatment drugs		\$0	\$3	\$5	\$8	\$10
	Male Condoms (12)		\$0	\$1	\$2	\$2	\$3
	Latex Free Condoms (per pkg of 6)		\$0	\$0	\$0	\$0	\$0
	IUD Kyleena		\$0	\$62	\$125	\$187	\$249
	IUD Skyla		\$0	\$62	\$125	\$187	\$249
	IUD Liletta		\$0	\$13	\$25	\$38	\$50
	IUD Mirena		\$0	\$62	\$125	\$187	\$249
	IUD Paragard		\$0	\$62	\$125	\$187	\$249
	Nexplanon		\$0	\$100	\$200	\$299	\$399
Zithromax (state supplied)		\$0	\$0	\$0	\$0	\$0	