South Dakota Medicaid
Laboratory Services Fee Schedule

Effective July 1, 2022

Providers must bill for services at their usual and customary charge. The fee listed below is the maximum allowable amount a provider may be reimbursed. Providers must append applicable modifiers to procedure codes. A list of authorized modifiers and payment effects is available at: https://dss.sd.gov/docs/medicaid/modifiers.pdf.

Providers should refer to South Dakota Medicaid's provider manual webpage for applicable coverage criteria and claim instructions: https://dss.sd.gov/medicaid/providers/billingmanuals/. For information regarding requesting a coverage or rate change refer to the Reconsideration, Reviews, Coverage Requests, and Fair Hearing provider manual.

Changes to current fees are indicated in red.

Code	Description	Fee	Prior Auth Status
36415	Collection Of Venous Blood By Venipuncture	$ 3.18	
78267	Nuclear Medicine Study Of Digestive Tract, Acquisition	$ 11.72	
78268	Nuclear Medicine Study Of Digestive Tract, Analysis	$ 100.07	
80047	Blood Test, Basic Group Of Blood Chemicals (Calcium, Ionized)	$ 13.73	
80048	Blood Test, Basic Group Of Blood Chemicals (Calcium, Total)	$ 8.46	
80050	General Health Panel	$ 63.77	
80051	Blood Test Panel For Electrolytes (Sodium Potassium, Chloride, Carbon Dioxide)	$ 7.01	
80053	Blood Test, Comprehensive Group Of Blood Chemicals	$ 10.56	
80055	Obstetric Blood Test Panel	$ 47.81	
80061	Blood Test, Lipids (Cholesterol And Triglycerides)	$ 13.39	
80069	Kidney Function Blood Test Panel	$ 8.68	
80074	Acute Hepatitis Panel	$ 47.63	
80076	Liver Function Blood Test Panel	$ 8.17	
80081	Blood Test Panel For Obstetrics (Cbc, Differential Wbc Count, Hepatitis B, Hiv, Rubella, Syphilis, Antibody Screening, Rbc, Blood Typing)	$ 74.86	
80145	Measurement Of Adalimumab	$ 38.57	
80150	Amikacin	$ 15.08	
80151	Measurement Of Amiodarone	$ 18.64	
80155	Caffeine Level	$ 38.57	
80156	Carbamazepine Level, Total	$ 14.57	
80157	Carbamazepine Level, Free	$ 13.25	
80158	Cyclosporine Level	$ 18.05	
80159	Clozapine Level	$ 20.15	
80161	Measurement Of Carbamazepine-10,11-Epoxide	$ 18.64	
80162	Digoxin Level, Total	$ 13.28	
80163	Digoxin Level, Free	$ 13.28	
80164	Valproic Acid Level, Total	$ 13.54	
80165	Valproic Acid Level, Free	$ 13.54	
80167	Measurement Of Felbamate	$ 18.64	
80168	Ethosuximide	$ 16.34	
80169	Everolimus Level	$ 13.73	
80170	Gentamicin	$ 16.38	
80171	Gabapentin Level	$ 21.67	
80173	Haloperidol	$ 15.78	
80175	Lamotrigine Level	$ 13.25	
80176	Lidocaine	$ 14.69	
80177	Levetiracetam Level	$ 13.25	
80178	Lithium	$ 6.61	
80179	Measurement Of Salicylate	$ 18.64	
80180	Mycophenolate (Mycophenolic Acid) Level	$ 18.05	
80181	Measurement Of Flecainide	$ 18.64	
80183	Oxcarbazepine Level	$ 13.25	
80184	Phenobarbital	$ 15.30	
80185	Phenytoin Level, Total	$ 13.25	
80186	Phenytoin Level, Free	$ 13.76	
80187	Measurement Of Posaconazole	$ 27.11	
80188	Primidone	$ 16.59	

80189	Measurement Of Itraconazole	$ 27.11	
80190	Procainamide;	$ 60.00	
80192	Procainamide Level, With Metabolites	$ 16.75	
80193	Measurement Of Leflunomide	$ 38.57	
80194	Quinidine	$ 14.60	
80195	Sirolimus	$ 13.73	
80197	Tacrolimus	$ 13.73	
80198	Theophylline	$ 14.14	
80199	Tiagabine Level	$ 27.11	
80200	Tobramycin	$ 16.13	
80201	Topiramate	$ 11.92	
80202	Vancomycin	$ 13.54	
80203	Zonisamide Level	$ 13.25	
80204	Measurement Of Methotrexate	$ 38.57	
80210	Measurement Of Rufinamide	$ 27.11	
80230	Measurement Of Infliximab	$ 38.57	
80235	Measurement Of Lacosamide	$ 27.11	
80280	Measurement Of Vedolizumab	$ 38.57	
80285	Measurement Of Voriconazole	$ 27.11	
80299	Quantitation Of Therapeutic Drug	$ 18.64	
80305	Testing For Presence Of Drug, Read By Direct Observation	$ 12.60	
80306	Testing For Presence Of Drug, Read By Instrument Assisted Observation	$ 17.14	
80307	Testing For Presence Of Drug, By Chemistry Analyzers	$ 62.14	
80400	Hormonal Panel For Adrenal Gland Assessment (Adrenal Gland Insufficiency)	$ 32.62	
80402	Hormone Panel For Adrenal Gland Assessment (21 Hydroxylase Deficiency)	$ 86.96	
80406	Hormone Panel Adrenal Gland Assessment (3 Beta-Hydroxydehydrogenase Deficiency)	$ 78.26	
80408	Aldosterone Suppression Evaluation Panel	$ 125.50	
80410	Calcitonin Stimulation Panel	$ 80.37	
80412	Adrenal Gland Stimulation Panel	$ 801.62	
80414	Reproductive Hormone Panel (Testosterone)	$ 51.64	
80415	Reproductive Hormone Panel (Estradiol)	$ 55.89	
80416	Renal Vein Renin (Kidney Enzyme) Stimulation Panel	$ 209.32	
80417	Peripheral Vein Renin (Kidney Enzyme) Stimulation Panel	$ 43.99	
80418	Anterior Pituitary Gland Evaluation Panel	$ 579.48	
80420	Dexamethasone (Steroid) Suppression Evaluation Panel, 48 Hour	$ 161.88	
80422	Glucagon (Hormone) Tolerance Panel To Evaluate For Insulinoma (Pancreatic Tumor)	$ 46.07	
80424	Glucagon (Hormone) Tolerance Panel To Evaluate For Pheochromocytoma (Adrenal Gland Tumor)	$ 50.50	
80426	Gonadotropin Releasing Hormone (Reproductive Hormone) Panel	$ 148.41	
80428	Growth Hormone Stimulation Panel	$ 66.70	
80430	Growth Hormone Suppression Panel	$ 129.33	
80432	Insulin-Induced C-Peptide (Protein) Suppression Panel	$ 165.61	
80434	Insulin Tolerance Panel For Acth (Adrenal Gland Hormone) Insufficiency	$ 285.03	
80435	Insulin Tolerance Panel For Growth Hormone Deficiency	$ 103.00	
80436	Metyrapone (Hormone Antibody) Panel	$ 91.16	
80438	Thyrotropin Releasing Hormone (Trh) (Hypothalamus Hormone) Stimulation Panel, 1 Hour	$ 50.41	
80439	Thyrotropin Releasing Hormone (Trh) (Hypothalamus Hormone) Stimulation Panel, 2 Hour	$ 67.21	
80500	Clinical Pathology Consultation	Price by Report	
80502	Comprehensive, Clinical Pathology Consultation	Price by Report	
81000	Manual Urinalysis Test With Examination Using Microscope, Non-Automated	$ 4.02	
81001	Manual Urinalysis Test With Examination Using Microscope, Automated	$ 3.17	
81002	Urinalysis, Manual Test	$ 3.48	
81003	Urinalysis, By Dip Stick Or Tablet Reagent For Bilirubin, Glucose, Hemoglobin, Ketones, Leukocytes, Nitrite, Ph, Protein, Specific Gravity, Urobilinogen, Any Number Of These Constituents; Without Microscopy, Automated	$ 2.25	
81005	Analysis Of Urine, Except Immunoassays	$ 2.17	
81007	Urinalysis; Bacteriuria Screen, Except By Culture Or Dipstick	$ 29.98	
81015	Urinalysis; Microscopic Only	$ 3.05	
81020	Urinalysis, 2 Or 3 Glass Test	$ 4.70	
81025	Urine Pregnancy Test, By Visual Color Comparison Methods	$ 8.61	

81050	Volume Measurement For Timed Collection, Each	$	3.64	
81099	Unlisted Analysis Of Urine	$	13.71	
81105	Gene Analysis (Human Platelet Antigen 1) For Common Variant	$	122.22	
81106	Gene Analysis (Human Platelet Antigen 2) For Common Variant	$	122.22	
81107	Gene Analysis (Human Platelet Antigen 3) For Common Variant	$	122.22	
81108	Gene Analysis (Human Platelet Antigen 4) For Common Variant	$	122.22	
81109	Gene Analysis (Human Platelet Antigen 5) For Common Variant	$	122.22	
81110	Gene Analysis (Human Platelet Antigen 6) For Common Variant	$	122.22	
81111	Gene Analysis (Human Platelet Antigen 9) For Common Variant	$	122.22	
81112	Gene Analysis (Human Platelet Antigen 15) For Common Variant	$	122.22	
81120	Gene Analysis (Isocitrate Dehydrogenase 1 [Nadp+], Soluble) For Common Variants	$	193.25	
81121	Gene Analysis (Isocitrate Dehydrogenase 2 [Nadp+], Mitochondrial) For Common Variants	$	295.79	
81161	Gene Analysis (Dystrophin)	$	279.00	PA Required
81162	Gene Analysis (Breast Cancer 1 And 2) Of Full Sequence And Analysis For Duplication Or Deletion Variants	$	1,824.88	PA Required
81163	Gene Analysis (Breast Cancer 1 And 2) Of Full Sequence	$	468.00	PA Required
81164	Gene Analysis (Breast Cancer 1 And 2) For Duplication Or Deletion Variants	$	584.23	PA Required
81165	Gene Analysis (Breast Cancer 1) Of Full Sequence	$	282.88	PA Required
81166	Gene Analysis (Breast Cancer 1) For Duplication Or Deletion Variants	$	301.35	PA Required
81167	Gene Analysis (Breast Cancer 2) For Duplication Or Deletion Variants	$	282.88	PA Required
81168	Gene Analysis (Ccnd1/Igh (T(11;14))) Translocation Analysis	$	207.31	
81170	Gene Analysis (Abl Proto-Oncogene 1, Non-Receptor Tyrosine Kinase)	$	300.00	
81171	Gene Analysis (Fragile X Mental Retardation 2) For Abnormal Alleles	$	137.00	PA Required
81172	Gene Analysis (Fragile X Mental Retardation 2) For Characterization Of Alleles	$	274.83	PA Required
81173	Gene Analysis (Androgen Receptor) Of Full Sequence	$	301.35	PA Required
81174	Gene Analysis (Androgen Receptor) For Known Familial Variant	$	185.20	PA Required
81175	Gene Analysis (Additional Sex Combs Like 1, Transcriptional Regulator) Full Sequence Analysis	$	676.50	
81176	Gene Analysis (Additional Sex Combs Like 1, Transcriptional Regulator) Targeted Sequence Analysis	$	241.90	
81177	Gene Analysis (Atropin 1) For Abnormal Alleles	$	137.00	PA Required
81178	Gene Analysis (Ataxin 1) For Abnormal Alleles	$	137.00	PA Required
81179	Gene Analysis (Ataxin 2) For Abnormal Alleles	$	137.00	PA Required
81180	Gene Analysis (Ataxin 3) For Abnormal Alleles	$	137.00	PA Required
81181	Gene Analysis (Ataxin 7) For Abnormal Alleles	$	137.00	PA Required
81182	Gene Analysis (Ataxin 8 Opposite Strand [Non-Protein Coding]) For Abnormal Alleles	$	137.00	PA Required
81183	Gene Analysis (Ataxin 10) For Abnormal Alleles	$	137.00	PA Required
81184	Gene Analysis (Calcium Voltage-Gated Channel Subunit Alpha1 A) For Abnormal Alleles	$	137.00	PA Required
81185	Gene Analysis (Calcium Voltage-Gated Channel Subunit Alpha1 A) Of Full Sequence	$	846.27	PA Required
81186	Gene Analysis (Calcium Voltage-Gated Channel Subunit Alpha1 A) For Known Familial Variant	$	185.20	PA Required
81187	Gene Analysis (Cch-Type Zinc Finger Nucleic Acid Binding Protein) For Abnormal Alleles	$	137.00	PA Required
81188	Gene Analysis (Cystatin B) For Abnormal Alleles	$	137.00	PA Required
81189	Gene Analysis (Cystatin B) Of Full Sequence	$	274.83	PA Required
81190	Gene Analysis (Cystatin B) For Known Familial Variants	$	185.20	PA Required
81191	Gene Analysis (Neurotrophic Receptor Tyrosine Kinase 1) Translocation Analysis	$	207.31	PA Required
81192	Gene Analysis (Neurotrophic Receptor Tyrosine Kinase 2) Translocation Analysis	$	207.31	PA Required
81193	Gene Analysis (Neurotrophic Receptor Tyrosine Kinase 3) Translocation Analysis	$	207.31	PA Required
81194	Gene Analysis (Neurotrophic Receptor Tyrosine Kinase 1, 2, And 3) Translocation Analysis	$	518.28	PA Required
81200	Aspa (Aspartoacylase) (Eg, Canavan Disease) Gene Analysis, Common Variants (Eg, E285A, Y231X)	$	47.25	PA Required
81201	Gene Analysis (Adenomatous Polyposis Coli), Full Gene Sequence	$	780.00	PA Required
81202	Gene Analysis (Adenomatous Polyposis Coli), Known Familial Variants	$	280.00	PA Required
81203	Gene Analysis (Adenomatous Polyposis Coli), Duplication Or Deletion Variants	$	200.00	PA Required
81204	Gene Analysis (Androgen Receptor) For Characterization Of Alleles	$	137.00	PA Required
81205	Gene Analysis (Branched-Chain Keto Acid Dehydrogenase E1, Beta Polypeptide)	$	94.99	PA Required
81206	Translocation Analysis (Bcr/Abl1) Major Breakpoint	$	163.96	
81207	Translocation Analysis (Bcr/Abl1) Minor Breakpoint	$	144.84	
81208	Bcr/Abl1 (T(9;22)) (Eg, Chronic Myelogenous Leukemia) Translocation Analysis; Other Breakpoint, Qualitative Or Quantitative	$	214.62	
81209	Gene Analysis (Bloom Syndrome, Recq Helicase-Like)	$	39.31	PA Required
81210	Gene Analysis (V-Raf Murine Sarcoma Viral Oncogene Homolog B1)	$	175.40	PA Required

81212	Gene Analysis (Breast Cancer 1 And 2) For 185Delag, 5385Insc, 6174Delt Variants	$	440.00	PA Required
81215	Gene Analysis (Breast Cancer 1) For Known Familial Variant	$	375.25	PA Required
81216	Gene Analysis (Breast Cancer 2) Of Full Sequence	$	185.12	PA Required
81217	Gene Analysis (Breast Cancer 2) For Known Familial Variant	$	375.25	PA Required
81218	Gene Analysis (Ccaat/Enhancer Binding Protein [C/Ebp], Alpha) Full Gene Sequence	$	241.90	
81219	Gene Analysis (Calreticulin), Common Variants	$	121.63	
81220	Cftr (Cystic Fibrosis Transmembrane Conductance Regulator) (Eg, Cystic Fibrosis) Gene Analysis; Common Variants (Eg, Acmg/Acog Guidelines)	$	556.60	PA Required
81221	Cftr (Cystic Fibrosis Transmembrane Conductance Regulator) (Eg, Cystic Fibrosis) Gene Analysis; Known Familial Variants	$	97.22	PA Required
81222	Cftr (Cystic Fibrosis Transmembrane Conductance Regulator) (Eg, Cystic Fibrosis) Gene Analysis; Duplication/Deletion Variants	$	435.07	PA Required
81223	Cftr (Cystic Fibrosis Transmembrane Conductance Regulator) (Eg, Cystic Fibrosis) Gene Analysis; Full Gene Sequence	$	499.00	PA Required
81224	Cftr (Cystic Fibrosis Transmembrane Conductance Regulator) (Eg, Cystic Fibrosis) Gene Analysis; Intron 8 Poly-T Analysis (Eg, Male Infertility)	$	168.75	PA Required
81225	Gene Analysis (Cytochrome P450, Family 2, Subfamily C, Polypeptide 19) Common Variants	$	291.36	PA Required
81226	Gene Analysis (Cytochrome P450, Family 2, Subfamily D, Polypeptide 6) Common Variants	$	450.91	PA Required
81227	Gene Analysis (Cytochrome P450, Family 2, Subfamily C, Polypeptide 9) Common Variants	$	174.81	PA Required
81228	Cytogenomic Constitutional (Genome-Wide) Microarray Analysis; Interrogation Of Genomic Regions For Co	$	900.00	PA Required
81229	Cytogenomic Constitutional (Genome-Wide) Microarray Analysis; Interrogation Of Genomic Regions For Copy Number And Single Nucleotide Polymorphism (Snp) Variants For Chromosomal Abnormalities	$	1,160.00	PA Required
81232	Gene Analysis (Dihydropyrimidine Dehydrogenase) For Common Variant	$	174.81	
81233	Gene Analysis (Bruton'S Tyrosine Kinase) For Common Variants	$	175.40	PA Required
81234	Gene Analysis (Dm1 Protein Kinase) For Abnormal Alleles	$	137.00	PA Required
81235	Gene Analysis (Epidermal Growth Factor Receptor), Common Variants	$	324.58	
81236	Gene Analysis (Enhancer Of Zeste 2 Polycomb Repressive Complex 2 Subunit) Of Full Sequence	$	282.88	PA Required
81237	Gene Analysis (Enhancer Of Zeste 2 Polycomb Repressive Complex 2 Subunit) For Common Variants	$	175.40	PA Required
81238	Gene Analysis (Coagulation Factor Ix) Full Sequence Analysis	$	600.00	
81239	Gene Analysis (Dm1 Protein Kinase) For Characterization Of Alleles	$	274.83	PA Required
81240	Gene Analysis (Prothrombin, Coagulation Factor Ii) A Variant	$	65.69	PA Required
81241	F5 (Coagulation Factor V) (Eg, Hereditary Hypercoagulability) Gene Analysis, Leiden Variant	$	73.37	
81242	Gene Analysis (Fanconi Anemia, Complementation Group C) Common Variant	$	36.62	
81243	Fmr1 (Fragile X Mental Retardation 1) (Eg, Fragile X Mental Retardation) Gene Analysis; Evaluation To Detect Abnormal (Eg, Expanded) Alleles	$	57.04	
81244	Gene Analysis (Fragile X Mental Retardation 1) For Characterization Of Alleles	$	44.89	PA Required
81245	Gene Analysis (Fms-Related Tyrosine Kinase 3) Internal Tandem Duplication Variants	$	165.51	
81246	Test For Detecting Genes Associated With Blood Cancer	$	83.00	
81247	Gene Analysis (Glucose-6-Phosphate Dehydrogenase) For Common Variant	$	174.81	
81248	Gene Analysis (Glucose-6-Phosphate Dehydrogenase) For Known Familial Variant	$	375.25	
81249	Gene Analysis (Glucose-6-Phosphate Dehydrogenase) Full Sequence Analysis	$	600.00	
81250	Gene Analysis (Glucose-6-Phosphatase, Catalytic Subunit) Common Variants	$	58.49	
81251	Gene Analysis (Glucosidase, Beta, Acid) Common Variants	$	47.25	PA Required
81252	Gene Analysis (Gap Junction Protein, Beta 2, 26Kda, Connexin 26), Full Gene Sequence	$	101.12	PA Required
81253	Gene Analysis (Gap Junction Protein, Beta 2, 26Kda, Connexin 26), Known Familial Variants	$	61.52	PA Required
81254	Gene Analysis (Gap Junction Protein, Beta 6, 30Kda, Connexin 30), Common Variants	$	35.00	PA Required
81255	Hexa (Hexosaminidase A [Alpha Polypeptide]) (Eg, Tay-Sachs Disease) Gene Analysis, Common Variants (Eg, 1278Instatc, 1421+1G>C, G269S)	$	51.45	
81256	Hfe (Hemochromatosis) (Eg, Hereditary Hemochromatosis) Gene Analysis, Common Variants (Eg, C282Y, H63D)	$	65.36	
81257	Gene Analysis (Alpha Globin 1 And Alpha Globin 2) For Common Deletions Or Variant	$	102.26	PA Required
81258	Gene Analysis (Alpha Globin 1 And Alpha Globin 2) For Known Familial Variant	$	375.25	PA Required
81259	Gene Analysis (Alpha Globin 1 And Alpha Globin 2) Full Sequence Analysis	$	600.00	PA Required
81260	Gene Analysis (Inhibitor Of Kappa Light Polypeptide Gene Enhancer In B-Cells, Kinase Complex-Associated Protein) Common Variants	$	39.31	PA Required
81261	Igh@ (Immunoglobulin Heavy Chain Locus) (Eg, Leukemias And Lymphomas, B-Cell), Gene Rearrangement Analysis To Detect Abnormal Clonal Population(S); Amplified Methodology (Eg, Polymerase Chain Reaction)	$	197.99	
81262	Igh@ (Immunoglobulin Heavy Chain Locus) (Eg, Leukemias And Lymphomas, B-Cell), Gene Rearrangement Analysis To Detect Abnormal Clonal Population(S); Direct Probe Methodology (Eg, Southern Blot)	$	68.55	
81263	Gene Rearrangement Analysis (Immunoglobulin Heavy Chain Locus), Variable Region Somatic Mutation Analysis	$	294.52	
81264	Igk@ (Immunoglobulin Kappa Light Chain Locus) (Eg, Leukemia And Lymphoma, B-Cell), Gene Rearrangement Analysis, Evaluation To Detect Abnormal Clonal Population(S)	$	172.73	

81265	Comparative Analysis Using Short Tandem Repeat (Str) Markers; Patient And Comparative Specimen (Eg, Pre-Transplant Recipient And Donor Germline Testing, Post-Transplant Non- Hematopoietic Recipient Germline [Eg, Buccal Swab Or Other Germline Tissue Sample] And	$ 233.07	
81266	Comparative Analysis Using Short Tandem Repeat (Str) Markers Of Patient And Specimen, Each Additional Specimen	$ 304.81	
81267	Chimerism Analysis Post Transplantation, Without Cell Selection	$ 207.46	
81268	Chimerism Analysis Post Transplantation, With Cell Selection	$ 260.79	
81269	Gene Analysis (Alpha Globin 1 And Alpha Globin 2) For Duplication/Deletion Variants	$ 202.40	PA Required
81270	Jak2 (Janus Kinase 2) (Eg, Myeloproliferative Disorder) Gene Analysis, P.Val617Phe (V617F) Variant	$ 91.66	
81271	Gene Analysis (Huntingtin) For Abnormal Alleles	$ 137.00	PA Required
81272	Gene Analysis (V-Kit Hardy-Zuckerman 4 Feline Sarcoma Viral Oncogene Homolog), Targeted Sequence	$ 329.51	PA Required
81273	Gene Analysis (V-Kit Hardy-Zuckerman 4 Feline Sarcoma Viral Oncogene Homolog), D816 Variants	$ 124.87	PA Required
81274	Gene Analysis (Huntingtin) For Characterization Of Alleles	$ 274.83	PA Required
81275	Gene Analysis (V-Ki-Ras2 Kirsten Rat Sarcoma Viral Oncogene) Variants In Codons 12 And 13	$ 193.25	PA Required
81276	Gene Analysis (Kirsten Rat Sarcoma Viral Oncogene Homolog), Additional Variants	$ 193.25	PA Required
81277	Cancer Cytogenomic Array Gene Analysis	$ 1,160.00	PA Required
81278	Gene Analysis (Igh@/Bcl2 (T(14;18)) Translocation Analysis	$ 207.31	
81279	Gene Analysis (Janus Kinase 2) Targeted Sequence Analysis	$ 185.20	
81284	Gene Analysis (Frataxin) For Abnormal Alleles	$ 137.00	PA Required
81285	Gene Analysis (Frataxin) For Characterization Of Alleles	$ 274.83	PA Required
81286	Gene Analysis (Frataxin) Of Full Sequence	$ 274.83	PA Required
81287	Gene Analysis (O-6-Methylguanine-Dna Methyltransferase) For Promoter Methylation	$ 124.64	
81288	Test For Detecting Genes Associated With Colon Cancer, Promoter Methylation Analysis	$ 192.32	PA Required
81289	Gene Analysis (Frataxin) For Known Familial Variants	$ 185.20	PA Required
81290	Mcoln1 (Mucolipin 1) (Eg, Mucolipidosis, Type Iv) Gene Analysis, Common Variants (Eg, Ivs3-2A>G, Del6.4Kb)	$ 39.31	PA Required
81291	Gene Analysis (5, 10-Methylenetetrahydrofolate Reductase) Common Variants	$ 65.34	PA Required
81292	Gene Analysis (Mutl Homolog 1, Colon Cancer, Nonpolyposis Type 2) Full Sequence Analysis	$ 675.40	PA Required
81293	Gene Analysis (Mutl Homolog 1, Colon Cancer, Nonpolyposis Type 2) Known Familial Variants	$ 331.00	PA Required
81294	Gene Analysis (Mutl Homolog 1, Colon Cancer, Nonpolyposis Type 2) Duplication Or Deletion Variants	$ 202.40	PA Required
81295	Gene Analysis (Muts Homolog 2, Colon Cancer, Nonpolyposis Type 1) Full Sequence Analysis	$ 381.70	PA Required
81296	Gene Analysis (Muts Homolog 2, Colon Cancer, Nonpolyposis Type 1) Known Familial Variants	$ 337.73	PA Required
81297	Gene Analysis (Muts Homolog 2, Colon Cancer, Nonpolyposis Type 1) Duplication Or Deletion Variants	$ 213.30	PA Required
81298	Msh6 (Muts Homolog 6 [E. Coli]) (Eg, Hereditary Non-Polyposis Colorectal Cancer, Lynch Syndrome) Gene Analysis; Full Sequence Analysis	$ 641.85	PA Required
81299	Msh6 (Muts Homolog 6 [E. Coli]) (Eg, Hereditary Non-Polyposis Colorectal Cancer, Lynch Syndrome) Gene Analysis; Known Familial Variants	$ 308.00	PA Required
81300	Msh6 (Muts Homolog 6 [E. Coli]) (Eg, Hereditary Non-Polyposis Colorectal Cancer, Lynch Syndrome) Gene Analysis; Duplication/Deletion Variants	$ 238.00	PA Required
81301	Microsatellite Instability Analysis (Eg, Hereditary Non-Polyposis Colorectal Cancer, Lynch Syndrome) Of Markers For Mismatch Repair Deficiency (Eg, Bat25, Bat26), Includes Comparison Of Neoplastic And Normal Tissue, If Performed	$ 348.56	PA Required
81302	Mecp2 (Methyl Cpg Binding Protein 2) (Eg, Rett Syndrome) Gene Analysis; Full Sequence Analysis	$ 527.87	PA Required
81303	Mecp2 (Methyl Cpg Binding Protein 2) (Eg, Rett Syndrome) Gene Analysis; Known Familial Variant	$ 120.00	PA Required
81304	Mecp2 (Methyl Cpg Binding Protein 2) (Eg, Rett Syndrome) Gene Analysis; Duplication/Deletion Variants	$ 150.00	PA Required
81305	Gene Analysis (Myeloid Differentiation Primary Response 88) For P.Leu265Pro Variant	$ 175.40	PA Required
81306	Gene Analysis (Nudix Hydrolase 15) For Common Variants	$ 291.36	PA Required
81307	Gene Analysis (Partner And Localizer Of Brca2) Full Sequence Analysis	$ 676.50	PA Required
81308	Gene Analysis (Partner And Localizer Of Brca2) For Detection Of Known Familial Variant	$ 301.35	PA Required
81309	Gene Analysis (Partner And Localizer Of Brca2) Targeted Sequence Analysis	$ 274.83	PA Required
81310	Npm1 (Nucleophosmin) (Eg, Acute Myeloid Leukemia) Gene Analysis, Exon 12 Variants	$ 246.52	
81311	Gene Analysis For Cancer (Neuroblastoma)	$ 295.79	PA Required
81312	Gene Analysis (Poly[A] Binding Protein Nuclear 1) For Abnormal Alleles	$ 137.00	PA Required
81313	Test For Detecting Genes Associated With Prostate Cancer	$ 255.05	PA Required
81314	Gene Analysis ((Platelet-Derived Growth Factor Receptor, Alpha Polypeptide) Targeted Sequence	$ 329.51	PA Required

81315	Pml/Raralpha, (T(15;17)), (Promyelocytic Leukemia/Retinoic Acid Receptor Alpha) (Eg, Promyelocytic Leukemia) Translocation Analysis; Common Breakpoints (Eg, Intron 3 And Intron 6), Qualitative Or Quantitative	$ 207.31	
81316	Pml/Raralpha, (T(15;17)), (Promyelocytic Leukemia/Retinoic Acid Receptor Alpha) (Eg, Promyelocytic Leukemia) Translocation Analysis; Single Breakpoint (Eg, Intron 3, Intron 6 Or Exon 6), Qualitative Or Quantitative	$ 207.31	
81317	Pms2 (Postmeiotic Segregation Increased 2 [S. Cerevisiae]) (Eg, Hereditary Non-Polyposis Colorectal Cancer, Lynch Syndrome) Gene Analysis; Full Sequence Analysis	$ 676.50	PA Required
81318	Pms2 (Postmeiotic Segregation Increased 2 [S. Cerevisiae]) (Eg, Hereditary Non-Polyposis Colorectal Cancer, Lynch Syndrome) Gene Analysis; Known Familial Variants	$ 331.00	PA Required
81319	Pms2 (Postmeiotic Segregation Increased 2 [S. Cerevisiae]) (Eg, Hereditary Non-Polyposis Colorectal Cancer, Lynch Syndrome) Gene Analysis; Duplication/Deletion Variants	$ 203.50	PA Required
81320	Gene Analysis (Phospholipase C Gamma 2) For Common Variants	$ 291.36	PA Required
81321	Gene Analysis (Phosphatase And Tensin Homolog), Full Sequence Analysis	$ 600.00	PA Required
81322	Gene Analysis (Phosphatase And Tensin Homolog), Known Familial Variant	$ 46.60	PA Required
81323	Gene Analysis (Phosphatase And Tensin Homolog), Duplication Or Deletion Variant	$ 300.00	PA Required
81324	Gene Analysis (Peripheral Myelin Protein 22), Duplication Or Deletion Analysis	$ 758.36	PA Required
81325	Gene Analysis (Peripheral Myelin Protein 22), Full Sequence Analysis	$ 769.58	PA Required
81326	Gene Analysis (Peripheral Myelin Protein 22), Known Familial Variant	$ 46.60	PA Required
81327	Gene Analysis (Septin9) For Promoter Methylation	$ 192.00	PA Required
81328	Gene Analysis (Solute Carrier Organic Anion Transporter Family, Member 1B1) For Common Variant	$ 174.81	PA Required
81329	Gene Analysis (Survival Of Motor Neuron 1, Telomeric) For Dosage/Deletion	$ 137.00	PA Required
81330	Gene Analysis (Sphingomyelin Phosphodiesterase 1, Acid Lysosomal) Common Variants	$ 47.00	PA Required
81331	Snrpn/Ube3A (Small Nuclear Ribonucleoprotein Polypeptide N And Ubiquitin Protein Ligase E3A) (Eg, Prader-Willi Syndrome And/Or Angelman Syndrome), Methylation Analysis	$ 51.07	PA Required
81332	Gene Analysis (Serpin Peptidase Inhibitor, Clade A, Alpha-1 Antiproteinase, Antitrypsin, Member 1) Common Variants	$ 43.65	PA Required
81333	Gene Analysis (Transforming Growth Factor Beta-Induced) For Common Variants	$ 137.00	PA Required
81334	Gene Analysis (Runt Related Transcription Factor 1) Targeted Sequence Analysis	$ 329.51	
81336	Gene Analysis (Survival Of Motor Neuron 1, Telomeric) Of Full Sequence	$ 301.35	PA Required
81337	Gene Analysis (Survival Of Motor Neuron 1, Telomeric) For Known Familial Sequence Variants	$ 185.20	PA Required
81338	Gene Analysis (Mpl Proto-Oncogene, Thrombopoietin Receptor) For Detection Of Common Variants	$ 150.33	
81339	Gene Analysis (Mpl Proto-Oncogene, Thrombopoietin Receptor) Sequence Analysis Of Exon 10	$ 185.20	
81340	Trb@ (T Cell Antigen Receptor, Beta) (Eg, Leukemia And Lymphoma), Gene Rearrangement Analysis To Detect Abnormal Clonal Population(S); Using Amplification Methodology (Eg, Polymerase Chain Reaction)	$ 208.92	
81341	Trb@ (T Cell Antigen Receptor, Beta) (Eg, Leukemia And Lymphoma), Gene Rearrangement Analysis To Detect Abnormal Clonal Population(S); Using Direct Probe Methodology (Eg, Southern Blot)	$ 49.59	
81342	Trg@ (T Cell Antigen Receptor, Gamma) (Eg, Leukemia And Lymphoma), Gene Rearrangement Analysis, Evaluation To Detect Abnormal Clonal Population(S)	$ 201.50	
81343	Gene Analysis (Protein Phosphatase 2 Regulatory Subunit Bbeta) For Abnormal Alleles	$ 137.00	PA Required
81344	Gene Analysis (Tata Box Binding Protein) For Abnormal Alleles	$ 137.00	PA Required
81345	Gene Analysis (Telomerase Reverse Transcriptase) Targeted Sequence Analysis	$ 185.20	PA Required
81347	Gene Analysis (Splicing Factor [3B] Subunit B1) For Detection Of Common Variants	$ 193.25	PA Required
81348	Gene Analysis (Serine And Arginine-Rich Splicing Factor 2) For Detection Of Common Variants	$ 175.40	PA Required
81350	Gene Analysis (Udp Glucuronosyltransferase 1 Family, Polypeptide A1) For Detection Of Common Variants	$ 234.00	PA Required
81351	Gene Analysis (Tumor Protein 53) Full Sequence Analysis	$ 641.85	PA Required
81352	Gene Analysis (Tumor Protein 53) Targeted Sequence Analysis	$ 329.51	PA Required
81353	Gene Analysis (Tumor Protein 53) Targeted Sequence Analysis For Detection Of Known Familial Variant	$ 308.00	PA Required
81355	Gene Analysis (Vitamin K Epoxide Reductase Complex Subunit 1) Common Variants	$ 88.20	PA Required
81357	Gene Analysis (U2 Small Nuclear Rna Auxiliary Factor 1) For Detection Of Common Variants	$ 193.25	PA Required
81360	Gene Analysis (Zinc Finger Ccch-Type, Rna Binding Motif And Serine/Arginine-Rich 2) For Detection Of Common Variants	$ 193.25	PA Required
81361	Gene Analysis (Hemoglobin, Subunit Beta) For Common Variant	$ 174.81	
81362	Gene Analysis (Hemoglobin, Subunit Beta) For Known Familial Variant	$ 375.25	
81363	Gene Analysis (Hemoglobin, Subunit Beta) For Duplication/Deletion Variant	$ 202.40	
81364	Gene Analysis (Hemoglobin, Subunit Beta) Full Sequence Analysis	$ 324.58	
81370	Hla Class I And Ii Typing Low Resolution Hla-A, -B, -C, -Drb1/3/4/5 And -Dqb1	$ 402.12	
81371	Hla Class I And Ii Typing, Low Resolution Hla-A, -B, And -Drb1	$ 404.52	
81372	Hla Class I Typing, Low Resolution (Eg, Antigen Equivalents); Complete (Ie, Hla-A, -B, And -C)	$ 403.59	

81373	Hla Class I Typing, Low Resolution (Eg, Antigen Equivalents); One Locus (Eg, Hla-A, -B, Or -C), Each	$	127.43	
81374	Hla Class I Typing, Low Resolution One Antigen Equivalent	$	74.33	
81375	Hla Class Ii Typing, Low Resolution (Eg, Antigen Equivalents); Hla-Drb1/3/4/5 And -Dqb1	$	220.74	
81376	Hla Class Ii Typing Low Resolution One Locus	$	122.22	
81377	Hla Class Ii Typing, Low Resolution (Eg, Antigen Equivalents); One Antigen Equivalent, Each	$	94.74	
81378	Hla Class I And Ii Typing High Resolution Hla-A, -B, -C, And -Drb1	$	345.57	
81379	Hla Class I Typing, High Resolution (Ie, Alleles Or Allele Groups); Complete (Ie, Hla-A, -B, And -C)	$	335.38	
81380	Hla Class I Typing, High Resolution (Ie, Alleles Or Allele Groups); One Locus (Eg, Hla-A, -B, Or -C), Each	$	177.25	
81381	Hla Class I Typing, High Resolution (Ie, Alleles Or Allele Groups); One Allele Or Allele Group (Eg, B*57:01P), Each	$	169.90	
81382	Hla Class Ii Typing High Resolution One Locus	$	123.68	
81383	Hla Class Ii Typing, High Resolution (Ie, Alleles Or Allele Groups); One Allele Or Allele Group (Eg, Hla-Dqb1*06:02P), Each	$	109.13	
81400	Molecular Pathology Procedure Level 1	$	63.96	PA Required
81401	Molecular Pathology Procedure Level 2	$	137.00	PA Required
81402	Molecular Pathology Procedure Level 3	$	150.33	PA Required
81403	Molecular Pathology Procedure Level 4	$	185.20	PA Required
81404	Molecular Pathology Procedure Level 5	$	274.83	PA Required
81405	Molecular Pathology Procedure Level 6	$	301.35	PA Required
81406	Molecular Pathology Procedure Level 7	$	282.88	PA Required
81407	Molecular Pathology Procedure Level 8	$	846.27	PA Required
81408	Molecular Pathology Procedure Level 9	$	2,000.00	PA Required
81410	Test For Detecting Genes Associated With Heart Disease, Genomic Sequence Analysis Panel, At Least 9 Genes	$	504.00	PA Required
81411	Test For Detecting Genes Associated With Heart Disease, Duplication/Deletion Analysis Panel	$	1,350.19	PA Required
81412	Test For Detecting Genes For Disorders Related To Ashkenazi Jews, Genomic Sequence Analysis Panel, At Least 9 Genes	$	2,448.56	PA Required
81413	Test For Detecting Genes Associated With Heart Disease, Genomic Sequence Analysis Panel, At Least 10 Genes	$	584.90	PA Required
81414	Test For Detecting Genes Associated With Heart Disease, Duplication/Deletion Analysis Panel, At Least 2 Genes	$	584.90	PA Required
81415	Test For Detecting Exome, Sequence Analysis	$	4,780.00	PA Required
81416	Test For Detecting Exome, Sequence Analysis, Each Comparator Exome	$	12,000.00	PA Required
81417	Reevaluation Test Of Previously Obtained Exome Sequence	$	320.00	PA Required
81419	Gene Analysis Panel For Evaluation Of Genes Associated With Epilepsy	$	2,448.56	PA Required
81420	Test For Detecting Genes Associated With Fetal Disease, Aneuploidy Genomic Sequence Analysis Panel	$	759.05	PA Required
81422	Test For Detecting Genes Associated With Fetal Disease, Microdeletion(S) Genomic Sequence Analysis	$	759.05	PA Required
81425	Test For Detecting Genes Associated With Disease, Genome Sequence Analysis	$	5,031.20	PA Required
81426	Test For Detecting Genes Associated With Disease, Genome Sequence Analysis, Each Additional Comparator Genome	$	2,709.95	PA Required
81427	Reevaluation Test Of Previously Obtained Genome Sequence	$	2,337.65	PA Required
81430	Test For Detecting Genes Causing Hearing Loss Genomic Sequence Analysis Panel, At Least 60 Genes	$	1,625.00	PA Required
81431	Test For Detecting Genes Causing Hearing Loss, Duplication/Deletion Analysis Panel	$	679.57	PA Required
81432	Test For Detecting Genes Associated With Inherited Breast Cancer-Related Disorders	$	679.05	PA Required
81433	Gene Analysis (Breast And Related Cancers), Duplication Or Deletion Variants	$	438.93	PA Required
81434	Gene Analysis (Retinal Disorders), Genomic Sequence	$	597.91	PA Required
81435	Test For Detecting Genes Associated With Colon Cancer, Genomic Sequence Analysis Panel, At Least 10 Genes	$	584.90	PA Required
81436	Test For Detecting Genes Associated With Colon Cancer, Duplication/Deletion Analysis Panel, At Least 5 Genes	$	584.90	PA Required
81437	Gene Analysis (Neuroendocrine Tumors), Genomic Sequence	$	438.93	PA Required
81438	Gene Analysis (Neuroendocrine Tumors), Duplication And Deletion Variants	$	438.93	PA Required
81439	Test For Detecting Genes Associated With Inherited Disease Of Heart Muscle	$	584.90	PA Required
81440	Test For Detecting Genes	$	3,324.00	PA Required
81442	Gene Analysis (Noonan Syndrome) Genomic Sequence Analysis	$	2,143.60	PA Required
81443	Genomic Sequence Analysis Panel For Severe Inherited Conditions With Sequencing Of 15 Or More Genes	$	2,448.56	PA Required
81445	Test For Detecting Genes Associated With Cancer Of Body Organ	$	597.91	PA Required
81448	Gene Analysis Panel For Hereditary Disorders Of The Peripheral Nervous System	$	584.90	PA Required
81450	Test For Detecting Genes Associated With Blood Related Cancer	$	759.53	PA Required

81455	Test For Detecting Genes Associated With Cancer	$ 2,919.60	PA Required
81460	Test For Detecting Genes Associated With Disease, Genomic Sequence, Must Include Sequence Analysis Of Entire Mitochondrial Genome	$ 1,287.00	PA Required
81465	Test For Detecting Genes Associated With Disease, Whole Mitochondrial Genome	$ 936.00	PA Required
81470	Test For Detecting Genes Associated With Intellectual Disability, Genomic Sequence Analysis Panel, At Least 60 Genes	$ 914.00	PA Required
81471	Test For Detecting Genes Associated With Intellectual Disability, Duplication/Deletion Gene Analysis, At Least 60 Genes	$ 914.00	PA Required
81479	Molecular Pathology Procedure	$ 702.44	PA Required
81490	Test For Detecting Genes Associated With Rheumatoid Arthritis Using Immunoassay Technique	$ 840.65	PA Required
81493	Test For Detecting Genes Associated With Heart Vessels Diseases	$ 1,050.00	PA Required
81500	Genetic Profiling On Oncology Biopsy Of Ovarian Lesions, Assays Of Two Proteins	$ 260.50	PA Required
81503	Genetic Profiling On Oncology Biopsy Of Ovarian Lesions, Assays Of Five Proteins	$ 897.00	PA Required
81504	Genetic Profiling On Oncology Biopsy Lesions	$ 520.00	PA Required
81506	Endocrinology (Type 2 Diabetes), Biochemical Assays Of Seven Analytes (Glucose, Hba1C, Insulin, Hs-Crp, Adiponectin, Ferritin, Interleukin 2-Receptor Alpha), Utilizing Serum Or Plasma, Algorithm Reporting A Risk Score	$ 68.92	
81507	Dna Analysis Using Maternal Plasma	$ 795.00	PA Required
81508	Fetal Congenital Abnormalities, Biochemical Assays Of Two Proteins (Papp-A, Hcg [Any Form]), Utilizing Maternal Serum, Algorithm Reported As A Risk Score	$ 54.30	
81509	Fetal Congenital Abnormalities, Biochemical Assays Of Three Proteins (Papp-A, Hcg [Any Form], Dia), Utilizing Maternal Serum, Algorithm Reported As A Risk Score	$ 1,487.37	
81510	Fetal Congenital Abnormalities, Biochemical Assays Of Three Analytes (Afp, Ue3, Hcg [Any Form]), Utilizing Maternal Serum, Algorithm Reported As A Risk Score	$ 55.54	
81511	Fetal Congenital Abnormalities, Biochemical Assays Of Four Analytes (Afp, Ue3, Hcg [Any Form], Dia) Utilizing Maternal Serum, Algorithm Reported As A Risk Score	$ 153.50	
81512	Fetal Congenital Abnormalities, Biochemical Assays Of Five Analytes (Afp, Ue3, Total Hcg, Hyperglycosylated Hcg, Dia) Utilizing Maternal Serum, Algorithm Reported As A Risk Score	$ 69.52	PA Required
81513	Measurement Of Rna Of Bacteria In Vaginal Fluid Specimen	$ 142.63	PA Required
81514	Measurement Of Dna Of Bacteria In Vaginal Fluid Specimen	$ 262.99	PA Required
81518	Mrna Gene Analysis Of 11 Genes In Breast Tumor Tissue	$ 3,873.00	PA Required
81519	Test For Detecting Genes Associated With Breast Cancer	$ 3,873.00	PA Required
81520	Gene Analysis Of Breast Tumor Tissue, Profiling By Hybrid Capture Of 58 Genes	$ 2,510.21	
81521	Gene Analysis Of Breast Tumor Tissue, Profiling Of 70 Content Genes And 465 Housekeeping Genes	$ 3,873.00	
81522	Mrna Gene Expression Analysis Of 12 Genes In Breast Tumor Tissue	$ 3,873.00	PA Required
81525	Gene Analysis (Colon Related Cancer)	$ 3,116.00	PA Required
81528	Gene Analysis (Colorectal Cancer)	$ 508.87	
81529	Mrna Gene Analysis Of 31 Genes In Skin Melanoma Tissue Specimen	$ 7,193.00	
81535	Culture Of Live Tumor Cells And Chemotherapy Drug Response By Staining, First Single Drug Or Drug Combination	$ 579.46	PA Required
81536	Culture Of Live Tumor Cells And Chemotherapy Drug Response By Staining, Each Additional Single Drug Or Drug Combination	$ 177.56	
81538	Testing Of Lung Tumor Cells For Prediction Of Survival	$ 2,871.00	PA Required
81539	Measurement Of Proteins Associated With Prostate Cancer	$ 760.00	PA Required
81540	Gene Analysis (Cancer)	$ 3,750.00	PA Required
81541	Gene Analysis Of Prostate Tumor Tissue, Profiling By Real-Time Rt-Pcr Of 46 Genes	$ 3,873.00	
81542	Mrna Gene Expression Analysis Of 22 Genes In Prostate Tumor Tissue	$ 3,873.00	PA Required
81546	Mrna Gene Analysis Of 10,196 Genes In Fine Needle Aspiration Thyroid Specimen, Reported As Category Result (E.G. Benign, Suspicious)	$ 3,600.00	PA Required
81551	Gene Analysis Of Prostate Tumor Tissue, Profiling By Real-Time Pcr Of 3 Genes	$ 2,030.00	
81552	Mrna Gene Expression Analysis Of 15 Genes In Eye Melanoma O Tissue Or Fine Needle Aspirate	$ 7,776.00	PA Required
81554	Mrna Gene Analysis Of 190 Genes Associated With Lung Disease (Idiopathic Pulmonary Fibrosis) In Transbronchial Biopsy Specimen Of Lung	$ 5,500.00	PA Required
81595	Test For Detecting Genes Associated With Heart Diseases	$ 3,240.00	
81596	Biochemical Assays For Evaluation Of Chronic Hepatitis C Virus Infection	$ 72.19	
81599	Multianalyte Assay Procedure With Algorithmic Analysis	Price by Report	PA Required
82009	Ketone Bodies Analysis, Qualitative	$ 4.52	
82010	Ketone Bodies Analysis, Quantitative	$ 8.17	
82013	Acetylcholinesterase	$ 12.29	
82016	Acylcarnitines; Qualitative, Each Specimen	$ 16.49	
82017	Acylcarnitines; Quantitative, Each Specimen (For Carnitine, See 82379)	$ 16.87	
82024	Adrenocorticotropic Hormone (Acth)	$ 38.62	
82030	Adenosine, 5-Monophosphate, Cyclic (Cyclic Amp) Level	$ 25.80	
82040	Albumin; Serum, Plasma Or Whole Blood	$ 4.95	

82042	Cerebrospinal Fluid, Or Amniotic Fluid Albumin (Protein) Level	$	7.78	
82043	Urine Microalbumin (Protein) Level	$	5.78	
82044	Urine Microalbumin (Protein) Analysis	$	6.23	
82045	Albumin; Ischemia Modified	$	33.94	
82075	Measurement Of Alcohol Level In Breath Specimen	$	30.00	
82077	Measurement Of Alcohol Level In Specimen Other Than Breath Or Urine	$	17.27	
82085	Aldolase	$	9.71	
82088	Aldosterone;	$	40.75	
82103	Alpha-1-Antitrypsin (Protein) Blood Test, Total	$	13.44	
82104	Alpha-1-Antitrypsin (Protein) Blood Test, Phenotype	$	14.46	
82105	Alpha-Fetoprotein (Afp) Level, Serum	$	16.77	
82106	Alpha-Fetoprotein (Afp) Level, Amniotic Fluid	$	17.00	
82107	Afp-L3 Fraction Isoform And Total Afp (Including Ratio)	$	64.41	
82108	Aluminum	$	25.48	
82120	Amines, Vaginal Fluid, Qualitative	$	5.99	
82127	Amino Acid Analysis, Qualitative, Each Specimen	$	14.18	
82128	Amino Acid Analysis, Multiple Amino Acids, Qualitative, Each Specimen	$	13.87	
82131	Amino Acid Analysis, Quantitative, Each Specimen	$	22.98	
82135	Aminolevulinic Acid, Delta (Ala)	$	16.45	
82136	Amino Acid Level, 2 To 5 Amino Acids, Quantitative, Each Specimen	$	19.61	
82139	Amino Acid Level, 6 Or More Amino Acids, Quantitative, Each Specimen	$	16.87	
82140	Ammonia	$	14.57	
82143	Amniotic Fluid Scan (Spectrophotometric)	$	9.35	
82150	Amylase	$	6.48	
82154	Androstanediol Glucuronide	$	28.83	
82157	Androstenedione	$	29.28	
82160	Androsterone	$	25.55	
82163	Angiotensin Ii	$	20.52	
82164	Angiotensin I - Converting Enzyme (Ace)	$	14.60	
82172	Apolipoprotein, Each	$	21.09	
82175	Arsenic	$	18.97	
82180	Ascorbic Acid (Vitamin C) Level, Blood	$	9.89	
82190	Atomic Absorption Spectroscopy, Each Analyte	$	15.90	
82207	Fecal Occult Blood Test	$	4.17	
82232	Beta-2 Microglobulin	$	16.18	
82239	Bile Acids Level, Total	$	17.12	
82240	Bile Acids Level, Cholylglycine	$	26.58	
82247	Bilirubin Level, Total	$	5.02	
82248	Bilirubin Level, Direct	$	5.02	
82252	Bilirubin; Feces, Qualitative	$	4.56	
82261	Biotinidase, Each Specimen	$	16.87	
82270	Blood, Occult, By Peroxidase Activity (Eg, Guaiac), Qualitative; Feces, Consecutive Collected Specimens With Single Determination, For Colorectal Neoplasm Screening (Ie, Patient Was Provided Three Cards Or Single Triple Card For Consecutive Collection)	$	4.38	
82271	Blood, Occult, By Peroxidase Activity (Eg, Guaiac), Qualitative; Other Sources	$	5.32	
82272	Stool Analysis For Blood, By Peroxidase Activity	$	4.23	
82274	Stool Analysis For Blood, By Fecal Hemoglobin Determination By Immunoassay	$	15.92	
82286	Bradykinin	$	5.16	
82300	Cadmium	$	23.64	
82306	Vitamin D; 25 Hydroxy, Includes Fraction(S), If Performed	$	29.60	
82308	Calcitonin	$	26.79	
82310	Calcium Level, Total	$	5.16	
82330	Calcium Level, Ionized	$	13.68	
82331	Calcium Level, After Calcium Infusion Test	$	13.34	
82340	Calcium; Urine Quantitative, Timed Specimen	$	6.03	
82355	Calculus; Qualitative Analysis	$	11.58	
82360	Calculus (Stone); Quantitative Analysis, Chemical	$	12.87	
82365	Calculus (Stone), Quantitative; Infrared Spectroscopy	$	12.90	
82370	Calculus (Stone), Quantitative; X-Ray Diffraction	$	12.52	
82373	Carbohydrate Deficient Transferrin	$	18.06	

82374	Carbon Dioxide (Bicarbonate)	$	4.88	
82375	Carbon Monoxide, (Carboxyhemoglobin); Quantitative	$	12.32	
82376	Carboxyhemoglobin; Qualitative	$	14.07	
82378	Carcinoembryonic Antigen (Cea)	$	18.96	
82379	Carnitine (Total And Free), Quantitative, Each Specimen	$	16.87	
82380	Carotene	$	9.22	
82382	Catecholamines; Total Urine	$	27.30	
82383	Catecholamines (Dopamine, Norepinephrine, Epinephrine); Blood	$	29.08	
82384	Catecholamines (Dopamine, Norepinephrine, Epinephrine); Fractionated	$	25.25	
82387	Cathepsin-D	$	18.06	
82390	Ceruloplasmin	$	10.74	
82397	Chemiluminescent Assay	$	14.12	
82415	Chloramphenicol	$	12.67	
82435	Chloride; Blood	$	4.60	
82436	Chloride; Urine	$	5.75	
82438	Chloride; Other Source	$	5.00	
82441	Chlorinated Hydrocarbons, Screen	$	6.01	
82465	Cholesterol, Serum Or Whole Blood, Total	$	4.35	
82480	Cholinesterase (Enzyme) Level, To Test For Exposure To Chemical Or Liver Disease	$	7.87	
82482	Cholinesterase; Rbc	$	9.81	
82485	Chondroitin B Sulfate, Quantitative	$	20.65	
82495	Chromium	$	20.28	
82507	Citrate	$	27.80	
82523	Collagen Cross Links Test, (Urine Test To Evaluate Bone Health)	$	18.68	
82525	Copper	$	12.41	
82528	Corticosterone	$	22.52	
82530	Cortisol (Hormone) Measurement, Free	$	16.71	
82533	Cortisol (Hormone) Measurement, Total	$	16.30	
82540	Creatine	$	4.64	
82542	Chemical Analysis Using Chromatography Technique	$	24.09	
82550	Creatine Kinase (Cardiac Enzyme) Level, Total	$	6.51	
82552	Creatine Kinase (Cardiac Enzyme) Level, Isoenzymes	$	13.39	
82553	Creatine Kinase (Cardiac Enzyme) Level, Mb Fraction Only	$	11.55	
82554	Creatine Kinase (Cardiac Enzyme) Level, Isoforms	$	11.87	
82565	Creatinine; Blood	$	5.12	
82570	Creatinine; Other Source	$	5.18	
82575	Creatinine; Clearance	$	9.46	
82585	Cryofibrinogen	$	14.14	
82595	Cryoglobulin, Qualitative Or Semi-Quantitative (Eg, Cryocrit)	$	6.47	
82600	Cyanide	$	19.40	
82607	Cyanocobalamin (Vitamin B-12);	$	15.08	
82608	Cyanocobalamin (Vitamin B-12) Level, Unsaturated Binding Capacity	$	14.32	
82610	Cystatin C	$	18.52	
82615	Cystine And Homocystine, Urine; Qualitative	$	9.55	
82626	Dehydroepiandrosterone (Dhea)	$	25.27	
82627	Dehydroepiandrosterone-Sulfate (Dhea-S)	$	22.23	
82633	Desoxycorticosterone, 11 (Hormone) Level	$	30.98	
82634	Deoxycortisol, 11 (Hormone) Level	$	29.28	
82638	Dibucaine Number	$	12.25	
82642	Measurement Of Dihydrotestosterone	$	29.28	
82652	Dihydroxyvitamin D, 1, 25 Level	$	38.50	
82656	Elastase, Pancreatic (El-1), Fecal, Qualitative Or Semi-Quantitative	$	11.53	
82657	Enzyme Activity Measurement, Nonradioactive Substrate	$	22.17	
82658	Enzyme Activity Measurement, Radioactive Substrate	$	44.03	
82664	Electrophoresis, Laboratory Testing Technique	$	61.50	
82668	Erythropoietin	$	18.79	
82670	Measurement Of Total Estradiol (Hormone)	$	27.94	
82671	Estrogen Analysis, Fractionated	$	32.30	
82672	Estrogen Analysis, Total	$	21.70	

82677	Estriol	$	24.18	
82679	Estrone	$	24.95	
82681	Direct Measurement Of Free Estradiol (Hormone)	$	27.94	
82693	Ethylene Glycol	$	14.90	
82696	Etiocholanolone	$	26.24	
82705	Stool Fat Or Lipids Analysis, Qualitative	$	5.10	
82710	Stool Fat Or Lipids Analysis, Quantitative	$	16.80	
82715	Stool Fat Differential Measurement, Quantitative	$	22.97	
82725	Fatty Acids, Nonesterified	$	18.77	
82726	Very Long Chain Fatty Acids	$	19.75	
82728	Ferritin	$	13.63	
82731	Fetal Fibronectin, Cervicovaginal Secretions, Semi-Quantitative	$	64.41	
82735	Fluoride	$	18.54	
82746	Folic Acid Level, Serum	$	14.70	
82747	Folic Acid Level, Rbc	$	17.65	
82757	Fructose, Semen	$	17.34	
82759	Galactokinase, Rbc	$	21.48	
82760	Galactose	$	11.20	
82775	Galactose-1-Phosphate Uridyl Transferase; Quantitative	$	21.07	
82776	Galactose-1-Phosphate Uridyl Transferase; Screen	$	11.74	
82784	Gammaglobulin (Immunoglobulin); Iga, Igd, Igg, Igm, Each	$	9.30	
82785	Gammaglobulin (Immunoglobulin); Ige	$	16.46	
82787	Gammaglobulin (Immune System Protein) Measurement, Immunoglobulin Subclasses	$	8.02	
82800	Gases, Blood; Ph Only	$	11.00	
82803	Gases, Blood, Any Combination Of Ph, Pco2, Po2, Co2, Hco2 (Including Calculated O2 Saturation);	$	26.07	
82805	Blood Gases Measurement, With O2 Saturation	$	78.77	
82810	Blood Gas, Oxygen Saturation Measurement	$	9.77	
82820	Hemoglobin-Oxygen Affinity (Po2 For 50% Hemoglobin Saturation With Oxygen)	$	13.34	
82930	Gastric Acid Analysis, Includes Ph If Performed, Each Specimen	$	6.71	
82938	Gastrin (Gi Tract Hormone) Level, After Secretin Stimulation	$	17.69	
82941	Gastrin	$	17.63	
82943	Glucagon	$	14.29	
82945	Glucose, Body Fluid, Other Than Blood	$	3.93	
82946	Glucagon Tolerance Test	$	17.77	
82947	Glucose; Quantitative, Blood (Except Reagent Strip)	$	3.93	
82948	Glucose; Blood, Reagent Strip	$	5.04	
82950	Glucose; Post Glucose Dose (Includes Glucose)	$	4.75	
82951	Blood Glucose (Sugar) Tolerance Test, 3 Specimens	$	12.87	
82952	Blood Glucose (Sugar) Tolerance Test, Each Additional Beyond 3 Specimens	$	3.92	
82955	Glucose-6-Phosphate Dehydrogenase (G6Pd) Quantitative	$	9.70	
82960	Glucose-6-Phosphate Dehydrogenase (G6Pd); Screen	$	6.05	
82962	Glucose, Blood, By Glucose Monitoring Device(S) Cleared By The Fda Specifically For Home Use	$	3.28	
82963	Glucosidase, Beta	$	21.48	
82965	Glutamate Dehydrogenase	$	13.15	
82977	Glutamyltransferase, Gamma (Ggt)	$	7.20	
82978	Glutathione	$	15.45	
82979	Glutathione Reductase, Rbc	$	9.44	
82985	Glycated Protein	$	16.76	
83001	Gonadotropin, Follicle Stimulating (Reproductive Hormone) Level	$	18.58	
83002	Gonadotropin, Luteinizing (Reproductive Hormone) Level	$	18.52	
83003	Growth Hormone, Human (Hgh) (Somatotropin)	$	16.67	
83006	Test For Detecting Genes Associated With Growth Stimulation	$	75.60	
83009	Helicobacter Pylori, Blood Test Analysis For Urease Activity, Non-Radioactive Isotope (Eg, C-13)	$	67.36	
83010	Haptoglobin; Quantitative	$	12.58	
83012	Haptoglobin; Phenotypes	$	26.89	
83013	Helicobacter Pylori; Breath Test Analysis For Urease Activity, Non-Radioactive Isotope (Eg, C-13)	$	67.36	
83014	Helicobacter Pylori; Drug Administration	$	7.86	

83015	Heavy Metal Screening Test	$	20.94	
83018	Heavy Metal Level	$	21.96	
83020	Hemoglobin Analysis And Measurement, Electrophoresis	$	12.87	
83021	Hemoglobin Analysis And Measurement, Chromatography	$	18.06	
83026	Hemoglobin; By Copper Sulfate Method, Non-Automated	$	4.01	
83030	Hemoglobin; F(Fetal), Chemical	$	10.74	
83033	Hemoglobin; F (Fetal), Qualitative	$	8.00	
83036	Hemoglobin; Glycosylated (A1C)	$	9.71	
83037	Hemoglobin A1C Level, By Device For Home Use	$	9.71	
83045	Methemoglobin (Hemoglobin) Analysis, Qualitative	$	6.49	
83050	Methemoglobin (Hemoglobin) Analysis, Quantitative	$	8.20	
83051	Hemoglobin; Plasma	$	7.31	
83060	Hemoglobin; Sulfhemoglobin, Quantitative	$	8.80	
83065	Hemoglobin; Thermolabile	$	9.00	
83068	Hemoglobin; Unstable, Screen	$	9.47	
83069	Hemoglobin Urine	$	3.95	
83070	Hemosiderin (Hemoglobin Breakdown Product) Analysis	$	4.75	
83080	B-Hexosaminidase, Each Assay	$	16.87	
83088	Histamine	$	29.53	
83090	Homocystine	$	17.92	
83150	Homovanillic Acid (Hva)	$	22.41	
83491	Hydroxycorticosteroids, 17 (Adrenal Gland Hormone) Level	$	17.90	
83497	Hydroxyindolacetic Acid, 5-(Hiaa)	$	12.90	
83498	Hydroxyprogesterone, 17-D (Synthetic Hormone) Level	$	27.17	
83500	Hydroxyproline (Amino Acid) Measurement, Free	$	22.65	
83505	Hydroxyproline (Amino Acid) Measurement, Total	$	24.30	
83516	Analysis Of Substance Using Immunoassay Technique, Multiple Step Method	$	11.53	
83518	Analysis Of Substance Using Immunoassay Technique, Single Step Method	$	9.64	
83519	Measurement Of Substance Using Immunoassay Technique, By Radioimmunoassay	$	18.40	
83520	Immunoassay For Analyte Other Than Infectious Agent Antibody Or Infectious Agent Antigen; Quantitative, Not Otherwise Specified	$	17.27	
83525	Insulin Measurement, Total	$	11.43	
83527	Insulin Measurement, Free	$	12.95	
83528	Intrinsic Factor	$	19.82	
83540	Iron	$	6.47	
83550	Iron Binding Capacity	$	8.74	
83570	Isocitric Dehydrogenase (Idh)	$	8.85	
83582	Ketogenic Steroids; Fractionation	$	15.47	
83586	Ketosteroids, 17 (Hormone) Measurement, Total	$	12.80	
83593	Ketosteroids, 17 (Hormone) Measurement, Fractionation	$	28.50	
83605	Lactate (Lactic Acid)	$	11.57	
83615	Lactate Dehydrogenase (Ld), (Ldh)	$	6.04	
83625	Lactate Dehydrogenase (Ld), (Ldh) Isoenzymes, Separation And Quantitation	$	12.79	
83630	Lactoferrin, Fecal; Qualitative	$	19.70	
83631	Lactoferrin, Fecal; Quantitative	$	19.63	
83632	Lactogen, Human Placental (Hpl) Human Chorionic Somatomammotropin	$	20.22	
83633	Urine Lactose (Carbohydrate) Analysis	$	11.25	
83655	Lead	$	12.11	
83661	Fetal Lung Maturity Assessment, Lecithin Sphingomyelin (L/S) Ratio	$	21.99	
83662	Fetal Lung Maturity Assessment, Foam Stability Test	$	18.91	
83663	Fetal Lung Maturity Assessment, Fluorescence Polarization	$	18.91	
83664	Fetal Lung Maturity Assessment, Lamellar Body Density	$	19.32	
83670	Leucine Aminopeptidase (Lap)	$	9.81	
83690	Lipase	$	6.89	
83695	Lipoprotein (A)	$	14.32	
83698	Lipoprotein-Associated Phospholipase A2 (Lp-Pla2)	$	46.31	
83700	Lipoprotein Level, Electrophoretic Separation And Quantitation	$	11.26	
83701	Lipoprotein, Blood; High Resolution Fractionation And Quantitation Of Lipoproteins Including Lipoprotein Subclasses When Performed (Eg, Electrophoresis, Ultracentrifugation)	$	33.86	
83704	Lipoprotein Level, Quantitation Of Lipoprotein Particle Number(S)	$	34.19	

83718	Lipoprotein, Direct Measurement; High Density Cholesterol (Hdl Cholesterol)	$	8.19	
83719	Lipoprotein, Direct Measurement; Direct Measurement, Vldl Cholesterol	$	12.75	
83721	Lipoprotein, Direct Measurement; Direct Measurement, Ldl Cholesterol	$	10.50	
83722	Measurement Of Small Dense Low Density Lipoprotein Cholesterol	$	34.19	
83727	Luteinizing Releasing Factor (Lrh)	$	17.19	
83735	Magnesium	$	6.70	
83775	Malate Dehydrogenase	$	7.37	
83785	Manganese	$	26.65	
83789	Mass Spectrometry (Laboratory Testing Method)	$	24.11	
83825	Mercury, Quantitative	$	16.26	
83835	Metanephrines	$	16.94	
83857	Methemalbumin	$	10.74	
83861	Microfluidic Analysis Utilizing An Integrated Collection And Analysis Device, Tear Osmolarity	$	22.48	
83864	Mucopolysaccharides (Protein) Level	$	28.50	
83872	Mucin, Synovial Fluid (Ropes Test)	$	5.86	
83873	Myelin Basic Protein (Nerve Protein) Level, Spinal Fluid	$	17.20	
83874	Myoglobin	$	12.92	
83876	Myeloperoxidase (Mpo)	$	50.86	
83880	Natriuretic Peptide	$	39.26	
83883	Nephelometry, Test Method Using Light	$	13.60	
83885	Nickel	$	24.51	
83915	Nucleotidase 5' (Enzyme) Level	$	11.15	
83916	Oligoclonal Immune (Oligoclonal Bands)	$	27.39	
83918	Organic Acids; Total, Quantitative, Each Specimen	$	23.60	
83919	Organic Acids; Qualitative, Each Specimen	$	16.45	
83921	Organic Acid, Single, Quantitative	$	21.21	
83930	Osmolality; Blood	$	6.61	
83935	Osmolality; Urine	$	6.82	
83937	Osteocalcin (Bone G1A Protein)	$	29.85	
83945	Oxalate	$	14.45	
83950	Oncoprotein; Her-2/Neu	$	64.41	
83951	Oncoprotein; Des-Gamma-Carboxy-Prothrombin (Dcp)	$	64.41	
83970	Parathormone (Parathyroid Hormone)	$	41.28	
83986	Ph; Body Fluid, Not Otherwise Specified	$	3.58	
83987	Ph; Exhaled Breath Condensate	$	3.58	
83992	Phencyclidine (Pcp)	$	24.10	
83993	Calprotectin, Fecal	$	19.63	
84030	Phenylalanine, Pku (Amino Acid) Level	$	5.50	
84035	Phenylketones, Qualitative	$	3.98	
84060	Phosphatase (Enzyme) Measurement, Acid, Total	$	7.64	
84066	Phosphatase, Prostatic (Prostate Enzyme) Level	$	9.66	
84075	Phosphatase (Enzyme) Level, Alkaline	$	5.18	
84078	Phosphatase (Enzyme) Level, Alkaline, Heat Stable	$	8.26	
84080	Phosphatase (Enzyme) Measurement, Alkaline, Isoenzymes	$	14.78	
84081	Phosphatidylgycerol	$	16.52	
84085	Phosphogluconate, 6, Dehydrogenase (Enzyme) Level	$	9.44	
84087	Phosphohexose Isomerase	$	10.73	
84100	Phosphorus Inorganic (Phosphate)	$	4.74	
84105	Phosphorus (Phosphate); Urine	$	5.78	
84106	Porphobilinogen, Urine; Qualitative	$	5.82	
84110	Porphobilinogen, Urine; Quantitative	$	8.44	
84112	Cervicovaginal Secretion Of Placenta Protein	$	98.11	
84119	Porphyrins, Urine; Qualitative	$	13.36	
84120	Porphyrins, Urine; Quantitation And Fractionation	$	14.71	
84126	Stool Porphyrins (Metabolism Substance) Level	$	39.11	
84132	Potassium; Serum, Plasma Or Whole Blood	$	4.76	
84133	Potassium; Urine	$	4.73	
84134	Prealbumin	$	14.59	
84135	Pregnanediol	$	21.27	

84138	Pregnanetriol	$	21.05	
84140	Pregnenolone	$	20.67	
84143	17-Hydroxypregnenolone	$	22.81	
84144	Progesterone	$	20.86	
84145	Procalcitonin (Pct)	$	27.22	
84146	Prolactin	$	19.38	
84150	Prostaglandin, Each	$	41.77	
84152	Psa (Prostate Specific Antigen) Measurement, Complexed	$	18.39	
84153	Psa (Prostate Specific Antigen) Measurement, Total	$	18.39	
84154	Psa (Prostate Specific Antigen) Measurement, Free	$	18.39	
84155	Total Protein Level, Blood	$	3.67	
84156	Total Protein Level, Urine	$	3.67	
84157	Total Protein Level, Body Fluid	$	4.00	
84160	Protein, Total, By Refractometry, Any Source	$	5.61	
84163	Pregnancy-Associated Plasma Protein-A (Papp-A)	$	15.05	
84165	Protein Measurement, Serum	$	10.74	
84166	Protein Measurement, Body Fluid	$	17.83	
84181	Protein; Western Blot, With Interpretation And Report, Blood Or Other Body Fluid	$	17.03	
84182	Protein Measurement, Immunological Probe For Band Identification	$	29.21	
84202	Protoporphyrin, Rbc; Quantitative	$	14.35	
84203	Protoporphyrin, Rbc; Screen	$	9.74	
84206	Proinsulin	$	26.69	
84207	Pyridoxal Phosphate (Vitamin B-6)	$	28.10	
84210	Pyruvate	$	14.48	
84220	Pyruvate Kinase	$	9.44	
84228	Quinine	$	11.63	
84233	Receptor Assay; Estrogen	$	87.88	
84234	Receptor Assay; Progesterone	$	64.88	
84235	Receptor Assay; Endocrine, Other Than Estrogen Or Progesterone (Specify Hormone)	$	71.23	
84238	Receptor Assay; Non-Endocrine (Specify Receptor)	$	36.57	
84244	Renin	$	21.99	
84252	Riboflavin (Vitamin B-2)	$	20.24	
84255	Selenium	$	25.53	
84260	Serotonin	$	30.98	
84270	Sex Hormone Binding Globulin (Shbg)	$	21.73	
84275	Sialic Acid	$	13.44	
84285	Silica	$	25.21	
84295	Sodium; Serum, Plasma Or Whole Blood	$	4.81	
84300	Sodium; Urine	$	5.06	
84302	Sodium; Other Source	$	4.86	
84305	Somatomedin	$	21.26	
84307	Somatostatin	$	18.28	
84311	Spectrophotometry, Analyte Not Elsewhere Specified	$	8.10	
84315	Specific Gravity (Except Urine)	$	3.28	
84375	Sugars, Chromatographic, Tlc Or Paper Chromatography	$	39.00	
84376	Carbohydrate Analysis, Single Qualitative	$	5.50	
84377	Carbohydrate Analysis, Multiple Qualitative	$	5.50	
84378	Carbohydrate Analysis, Single Quantitative	$	11.53	
84379	Carbohydrate Analysis, Multiple Quantitative	$	11.53	
84392	Sulfate, Urine	$	5.49	
84402	Testosterone (Hormone) Level, Free	$	25.47	
84403	Testosterone (Hormone) Level, Total	$	25.81	
84410	Testosterone Level	$	51.28	
84425	Thiamine (Vitamin B-1)	$	21.23	
84430	Thiocyanate	$	11.63	
84431	Thromboxane Metabolite(S), Including Thromboxane If Performed, Urine	$	35.11	
84432	Thyroglobulin	$	16.06	
84436	Thyroxine (Thyroid Chemical), Total	$	6.87	
84437	Thyroxine (Thyroid Chemical), Requiring Elution	$	6.47	

84439	Thyroxine (Thyroid Chemical), Free	$ 9.02	
84442	Thyroxine Binding Globulin (Tbg)	$ 14.78	
84443	Blood Test, Thyroid Stimulating Hormone (Tsh)	$ 16.80	
84445	Thyroid Stimulating Immune Globulins (Tsi)	$ 50.86	
84446	Tocopherol Alpha (Vitamin E)	$ 14.18	
84449	Transcortin (Cortisol Binding Globulin)	$ 18.00	
84450	Liver Enzyme (Sgot), Level	$ 5.18	
84460	Liver Enzyme (Sgpt), Level	$ 5.30	
84466	Transferrin	$ 12.76	
84478	Triglycerides	$ 5.74	
84479	Thyroid Hormone (T3 Or T4) Uptake Or Thyroid Hormone Binding Ratio (Thbr)	$ 6.47	
84480	Thyroid Hormone, T3 Measurement, Total	$ 14.18	
84481	Thyroid Hormone, T3 Measurement, Free	$ 16.94	
84482	Thyroid Hormone, T3 Measurement, Reverse	$ 15.76	
84484	Troponin (Protein) Analysis, Quantitative	$ 12.47	
84485	Trypsin (Pancreatic Enzyme) Measurement, Intestinal Fluid	$ 7.20	
84488	Trypsin (Pancreatic Enzyme) Analysis, Stool	$ 7.30	
84490	Stool Trypsin (Pancreatic Enzyme) Analysis, 24-Hour Collection	$ 9.93	
84510	Tyrosine	$ 10.63	
84512	Troponin (Protein) Analysis, Qualitative	$ 10.09	
84520	Urea Nitrogen Level To Assess Kidney Function, Quantitative	$ 3.95	
84525	Urea Nitrogen Level To Assess Kidney Function, Semiquantitative	$ 5.13	
84540	Urea Nitrogen Level To Assess Kidney Function, Urine	$ 5.56	
84545	Urea Nitrogen Level To Assess Kidney Function, Clearance	$ 7.20	
84550	Uric Acid Level, Blood	$ 4.52	
84560	Uric Acid; Other Source	$ 5.08	
84577	Urobilinogen (Metabolism Substance) Level, Stool	$ 16.80	
84578	Urobilinogen (Metabolism Substance) Analysis, Urine	$ 4.47	
84580	Urobilinogen (Metabolism Substance) Level, Urine	$ 9.55	
84583	Urobilinogen (Metabolism Substance) Measurement, Urine	$ 6.05	
84585	Vanillymandelic Acid (Vma), Urine	$ 15.50	
84586	Vasoactive Intestinal Peptide (Vip)	$ 35.33	
84588	Vasopressin (Antidiuretic Hormone, Adh)	$ 33.94	
84590	Vitamin A	$ 11.61	
84591	Vitamin, Not Otherwise Specified	$ 17.06	
84597	Vitamin K	$ 13.72	
84600	Volatile Chemical Measurement	$ 17.11	
84620	Xylose Tolerance Test, Blood (Administration, See 99070)	$ 12.91	
84630	Zinc	$ 11.39	
84681	C-Peptide	$ 20.81	
84702	Gonadotropin, Chorionic (Reproductive Hormone) Level	$ 15.05	
84703	Gonadotropin, Chorionic Qualitative	$ 7.52	
84704	Gonadotropin, Chorionic (Reproductive Hormone) Measurement	$ 15.29	
84830	Ovulation Tests, By Visual Color Comparison Methods For Human Luteinizing Hormone	$ 12.70	
84999	Unlisted Chemistry Procedure	Price by Report	
85002	Bleeding Time	$ 4.82	
85004	Blood Count; Automated Differential Wbc Count	$ 6.47	
85007	Blood Count; Blood Smear, Microscopic Examination With Manual Differential Wbc Count	$ 3.80	
85008	Blood Count; Blood Smear, Microscopic Examination Without Manual Differential Wbc Count	$ 3.43	
85009	Blood Count; Manual Differential Wbc Count, Buffy Coat	$ 5.07	
85013	Blood Count; Spun Microhematocrit	$ 7.00	
85014	Blood Count; Hematocrit (Hct)	$ 2.37	
85018	Blood Count, Hemoglobin	$ 2.37	
85025	Complete Blood Cell Count (Red Cells, White Blood Cell, Platelets), Automated Test And Automated Differential White Blood Cell Count	$ 7.77	
85027	Complete Blood Cell Count (Red Cells, White Blood Cell, Platelets), Automated Test	$ 6.47	
85032	Blood Count; Manual Cell Count (Erythrocyte, Leukocyte, Or Platelet) Each	$ 4.31	
85041	Red Blood Cell Count, Automated Test	$ 3.02	
85044	Red Blood Count, Manual Test	$ 4.31	

85045	Red Blood Count, Automated Test	$	3.99	
85046	Red Blood Count Automated, With Additional Calculations	$	5.57	
85048	Blood Count; Leukocyte (Wbc), Automated	$	2.54	
85049	Platelet Count, Automated Test	$	4.48	
85055	Reticulated Platelet Assay	$	35.74	
85060	Blood Smear, Peripheral, Interpretation By Physician With Written Report	$	11.80	
85097	Bone Marrow, Smear Interpretation	$	52.74	
85130	Chromogenic Substrate Assay	$	11.89	
85170	Blood Clot Evaluation, (Retraction Time)	$	16.30	
85175	Blood Clot Evaluation, (Clot Dissolving Time)	$	20.37	
85210	Clotting Factor Ii Prothrombin, Measurement	$	12.98	
85220	Clotting Factor V (Acg Or Proaccelerin) Measurement	$	17.65	
85230	Clotting Factor Vii (Proconvertin, Stable Factor)	$	17.90	
85240	Clotting; Factor Viii (Ahg), One Stage	$	17.90	
85244	Clotting; Factor Viii Related Antigen	$	20.42	
85245	Clotting; Factor Viii, Vw Factor, Ristocetin Cofactor	$	22.94	
85246	Clotting; Factor Viii, Vw Factor Antigen	$	22.94	
85247	Clotting; Factor Viii, Von Willebrand'S Factor, Multimetric Analysis	$	22.94	
85250	Clotting; Factor Ix (Ptc Or Christmas)	$	19.04	
85260	Clotting; Factor X (Stuart-Prower)	$	17.90	
85270	Clotting; Factor Xi (Pta)	$	17.90	
85280	Clotting; Factor Xii (Hageman)	$	19.35	
85290	Clotting; Factor Xiii (Fibrin Stabilizing)	$	16.34	
85291	Clotting; Factor Xiii (Fibrin Stabilizing), Screen Solubility	$	9.11	
85292	Clotting; Prekallikrein Assay (Fletcher Factor Assay)	$	18.93	
85293	Clotting; High Molecular Weight Kinninogen Assay (Fitzgerald Factor Assay)	$	18.93	
85300	Clotting Inhibitors Or Anticoagulants; Antithrombin Iii, Activity	$	11.85	
85301	Clotting Inhibitors Or Anticoagulants; Antithrombin Iii, Antigen Assay	$	10.81	
85302	Protein C, (Clotting Inhibitor) Activity	$	12.01	
85303	Clotting Inhibitors Or Anticoagulants; Protein C, Activity	$	13.84	
85305	Clotting Inhibitors Or Anticoagulants; Protein S, Total	$	11.61	
85306	Clotting Inhibitors Or Anticoagulants; Protein S, Free	$	15.32	
85307	Activated Protein C (Apc) Resistance Assay	$	15.32	
85335	Factor Inhibitor Test	$	12.87	
85337	Thrombomodulin	$	17.27	
85345	Coagulation Time Measurement, Lee And White	$	4.69	
85347	Coagulation Time Measurement, Activated	$	4.28	
85348	Coagulation Time Measurement, Other Methods	$	4.49	
85360	Euglobulin Lysis	$	8.41	
85362	Coagulation Function Analysis, Agglutination Slide, Semiquantitative	$	6.89	
85366	Coagulation Function Measurement, Paracoagulation	$	80.46	
85370	Coagulation Function Measurement, Quantitative	$	12.43	
85378	Coagulation Function Measurement, Qualitative Or Semiquantitative	$	9.72	
85379	Coagulation Function Measurement, D-Dimer; Quantitative	$	10.18	
85380	Coagulation Function Measurement, Ultrasensitive, Qualitative Or Semiquantitative	$	10.18	
85384	Fibrinogen; Activity	$	9.72	
85385	Fibrinogen; Antigen	$	14.46	
85390	Fibrinolysins Or Coagulopathy Screen, Interpretation And Report	$	15.48	
85396	Coagulation Or Fibrinolysis (Clot Dissolving) Function Measurement With Interpretation And Written Report, Per Day	$	19.94	
85397	Coagulation And Fibrinolysis, Functional Activity, Not Otherwise Specified (Eg, Adamts-13), Each Analyte	$	30.86	
85400	Fibrinolytic Factors And Inhibitors; Plasmin	$	7.71	
85410	Fibrinolytic Mechanisms; Antiplasmin	$	7.71	
85415	Fibrinolytic Factors And Inhibitors; Plasminogen Activator	$	17.19	
85420	Fibrinolytic Mechanisms; Plasminogen	$	6.53	
85421	Fibrinolytic Mechanisms Plasminogen, Antigenic Assay	$	10.18	
85441	Evaluation Of Red Blood Cell Defect (Heinz Bodies), Direct	$	4.20	
85445	Evaluation Of Red Blood Cell Defect (Heinz Bodies), Induced	$	6.82	

85460	Fetal Hemoglobin Or Red Blood Cells Measurement For Assessment Of Fetal-Maternal Circulation, Differential Lysis	$ 7.73	
85461	Fetal Hemoglobin Or Red Blood Cells Measurement For Assessment Of Fetal-Maternal Circulation, Rosette	$ 9.36	
85475	Hemolysin, Acid	$ 8.87	
85520	Heparin Assay	$ 13.09	
85525	Heparin Neutralization	$ 11.84	
85530	Heparin-Protamine Tolerance Test	$ 13.09	
85536	Iron Stain, Peripheral Blood	$ 6.88	
85540	Leukocyte Alkaline Phosphatase With Count	$ 8.60	
85547	Mechanical Fragility, Rbc	$ 8.60	
85549	Muramidase	$ 18.75	
85555	Red Blood Cell Fragility Measurement, Unincubated	$ 7.47	
85557	Red Blood Cell Fragility Measurement, Incubated	$ 13.36	
85576	Platelet Aggregation Function Test	$ 24.91	
85597	Phospholipid Neutralization; Platelet	$ 17.98	
85598	Phospholipid Neutralization; Hexagonal Phospholipid	$ 17.98	
85610	Blood Test, Clotting Time	$ 4.29	
85611	Blood Test, Clotting Time, Substitution	$ 3.94	
85612	Clotting Factor X Assessment Test, Undiluted	$ 17.49	
85613	Clotting Factor X Assessment Test, Diluted	$ 9.58	
85635	Reptilase Test	$ 9.85	
85651	Red Blood Cell Sedimentation Rate, To Detect Inflammation, Non-Automated	$ 4.27	
85652	Red Blood Cell Sedimentation Rate, To Detect Inflammation, Automated	$ 2.70	
85660	Sickling Of Rbc, Reduction, Slide Method	$ 5.51	
85670	Thrombin Time, Fibrinogen Screening Test, Plasma	$ 5.77	
85675	Thrombin Time, Fibrinogen Screening Test, Titer	$ 6.85	
85705	Thromboplastin Inhibition; Tissue	$ 9.63	
85730	Coagulation Assessment Blood Test, Plasma Or Whole Blood	$ 6.01	
85732	Coagulation Assessment Blood Test, Substitution, Plasma Fractions	$ 6.47	
85810	Viscosity	$ 11.67	
85999	Unlisted Hematology Procedure	$ 8.47	
86000	Agglutinins, Febrile (Eg, Brucella, Francisella, Murine Typhus, Q Fever, Rocky Mountain Spotted Fever, Scrub Typhus), Each Antigen	$ 6.98	
86001	Measurement Of Antibody (Igg) To Allergic Substance, Each Allergen	$ 7.82	
86003	Measurement Of Antibody (Ige) To Allergic Substance, Crude Allergen Extract, Each	$ 5.22	
86005	Measurement Of Antibody (Ige) To Allergic Substance, Multiallergen Screen	$ 7.97	
86008	Measurement Of Antibody (Ige) To Allergic Substance, Recombinant Or Purified Component, Each	$ 17.93	
86021	Antibody Identification; Leukocyte Antibodies	$ 15.05	
86022	Antibody Identification Test, Platelet Antibodies	$ 18.37	
86023	Antibody Identification Test, Platelet Associated Immunoglobulin Assay	$ 12.46	
86038	Antinuclear Antibodies (Ana);	$ 12.09	
86039	Measurement Of Antibody For Assessment Of Autoimmune Disorder, Titer	$ 11.16	
86060	Antistreptolysin 0; Titer	$ 7.30	
86063	Antistreptolysin 0; Screen	$ 5.77	
86077	Blood Bank Physician Services; Difficult Crossmatch And/Or Evaluation Of Irregular Antibody(S), Interpretation And Written Report	$ 24.32	
86078	Blood Bank Physician Services; Investigation Of Transfusion Reaction Including Suspicion Of Transmissible Disease, Interpretation And Written Report	$ 47.18	
86079	Blood Bank Physician Services; Authorization For Deviation From Standard Blood Banking Procedures (Eg, Use Of Outdated Blood, Transfusion Of Rh Incompatible Units), With Written Report	$ 25.32	
86140	C-Reactive Protein	$ 5.18	
86141	Measurement C-Reactive Protein For Detection Of Infection Or Inflammation, High Sensitivity	$ 12.95	
86146	Beta 2 Glycoprotein I Antibody, Each	$ 25.45	
86147	Cardiolipin Antibody (Tissue Antibody) Measurement	$ 25.45	
86148	Anti-Phosphatidylserine (Phospholipid) Antibody	$ 16.07	
86152	Cell Enumeration Using Immunologic Selection And Identification In Fluid Specimen (Eg, Circulating Tumor Cells In Blood);	$ 250.78	
86153	Cell Enumeration Using Immunologic Selection And Identification In Fluid Specimen, Physician Interpretation And Report	$ 42.12	
86155	Chemotaxis Assay, Specify Method	$ 15.99	

86156	Cold Agglutinin; Screen	$	8.07	
86157	Cold Agglutinin; Titer	$	8.06	
86160	Measurement Of Complement (Immune System Proteins), Antigen	$	12.00	
86161	Complement; Functional Activity, Each Component	$	12.00	
86162	Measurement Of Complement (Immune System Proteins), Total Hemolytic	$	20.32	
86171	Measurement Of Complement Fixation Tests (Immune System Proteins)	$	10.01	
86200	Cyclic Citrullinated Peptide (Ccp), Antibody	$	12.95	
86215	Deoxyribonuclease, Antibody	$	13.25	
86225	Measurement Of Dna Antibody, Native Or Double Stranded	$	13.74	
86226	Measurement Of Dna Antibody, Single Stranded	$	12.11	
86235	Measurement Of Antibody For Assessment Of Autoimmune Disorder, Any Method	$	17.93	
86255	Fluorescent Noninfectious Agent Antibody; Screen, Each Antibody	$	12.05	
86256	Fluorescent Antibody; Titer, Each Antibody	$	12.05	
86277	Growth Hormone, Human (Hgh), Antibody	$	15.74	
86280	Hemagglutination Inhibition Test (Hai)	$	8.19	
86294	Immunologic Analysis For Detection Of Tumor Antigen, Qualitative Or Semiquantitative	$	25.57	
86300	Immunologic Analysis For Detection Of Tumor Antigen, Quantitative; Ca 15-3	$	20.81	
86301	Immunologic Analysis For Detection Of Tumor Antigen, Quantitative; Ca 19-9	$	20.81	
86304	Immunologic Analysis For Detection Of Tumor Antigen, Quantitative; Ca 125	$	20.81	
86305	Human Epididymis Protein 4 (He4)	$	20.81	
86308	Heterophile Antibodies; Screening	$	5.18	
86309	Mononucleosis Antibody Level, Titer	$	6.47	
86310	Mononucleosis Antibody Level, Titers After Absorption	$	7.37	
86316	Immunoassay For Tumor Antigen; Other Antigen, Quantitative (Eg, Ca 50, 72-4, 549), Each	$	20.81	
86317	Detection Of Infectious Agent Antibody, Quantitative	$	14.99	
86318	Test For Detection Of Infectious Agent Antibody, Qualitative Or Semiquantitative	$	18.09	
86320	Immunoelectrophoresis; Serum	$	29.92	
86325	Immunoelectrophoresis; Other Fluids (Eg, Urine, Cerebrospinal Fluid) With Concentration	$	23.13	
86327	Immunologic Analysis Technique, Crossed	$	29.92	
86328	Test For Detection Of Severe Acute Respiratory Syndrome Coronavirus 2 (Covid-19) Antibody, Qualitative Or Semiquantitative	$	45.23	
86329	Immunologic Analysis Technique, Unspecified	$	14.05	
86331	Immunodiffusion; Gel Diffusion, Qualitative (Ouchterlony)	$	11.98	
86332	Immune Complex Assay	$	24.37	
86334	Immunologic Analysis Technique On Serum (Immunofixation)	$	22.34	
86335	Immunologic Analysis Technique On Body Fluid, Other Fluids With Concentration	$	29.35	
86336	Inhibin A	$	15.59	
86337	Insulin Antibodies	$	21.41	
86340	Intrinsic Factor Antibodies	$	15.08	
86341	Islet Cell Antibody	$	23.57	
86343	Leukocyte Histamine Release Test (Lhr)	$	12.46	
86344	Leukocyte Phagocytosis	$	10.39	
86352	Cellular Function Assay Involving Stimulation (Eg, Mitogen Or Antigen) And Detection Of Biomarker (Eg, Atp)	$	135.86	
86353	White Blood Cell Function Measurement, Mitogen Or Antigen Induced Blastogenesis	$	49.03	
86355	B Cells, Total Count	$	37.73	
86356	Mononuclear Cell Antigen, Quantitative (Eg, Flow Cytometry), Not Otherwise Specified, Each Antigen	$	26.78	
86357	Natural Killer (Nk) Cells, Total Count	$	37.73	
86359	T Cells Count, Total	$	37.73	
86360	T Cell Count And Ratio, Including Ratio	$	46.98	
86361	T Cells; Absolute Cd4 Count	$	26.78	
86367	Stem Cells Count, Total	$	77.78	
86376	Microsomal Antibodies (Eg, Thyroid Or Liver-Kidney), Each	$	14.55	
86382	Neutralization Test, Viral	$	16.91	
86384	Nitroblue Tetrazolium Dye Test (Ntd)	$	13.61	
86386	Nuclear Matrix Protein 22 (Nmp22), Qualitative	$	21.78	
86403	Particle Agglutination; Screen, Each Antibody	$	11.54	
86406	Particle Agglutination; Titer, Each Antibody	$	10.64	
86408	Screening Test For Detection Of Severe Acute Respiratory Syndrome Coronavirus 2 (Covid-19) Neutralizing Antibody	$	42.13	

86409	Measurement Of Neutralizing Antibody To Severe Acute Respiratory Syndrome Coronavirus 2 (Covid-19)	$ 79.61	
86413	Severe Acute Respiratory Syndrome Coronavirus 2 (Sarscov-2) (Coronavirus Disease [Covid-19]) Antibody, Quantitative	$ 51.43	
86430	Rheumatoid Factor; Qualitative	$ 6.14	
86431	Rheumatoid Factor; Quantitative	$ 5.67	
86480	Tuberculosis Test, Gamma Interferon	$ 61.98	
86481	Tuberculosis Test, Enumeration Of T-Cells	$ 100.00	
86485	Skin Test; Candida	$ 20.18	
86486	Skin Test; Unlisted Antigen, Each	$ 4.60	
86490	Skin Test; Coccidioidomycosis	$ 8.40	
86510	Skin Test; Histoplasmosis	$ 9.00	
86580	Skin Test; Tuberculosis, Intradermal	$ 6.99	
86590	Streptokinase, Antibody	$ 12.66	
86592	Syphilis Test, Non-Treponemal Antibody; Qualitative (Eg, Vdrl, Rpr, Art)	$ 4.27	
86593	Syphilis Test, Non-Treponemal Antibody; Quantitative	$ 4.40	
86602	Antibody; Actinomyces	$ 10.18	
86603	Antibody; Adenovirus	$ 12.87	
86606	Antibody; Aspirgillus	$ 15.05	
86609	Antibody; Bacterium, Not Elsewhere Specified	$ 12.88	
86611	Antibody; Bartonella	$ 10.18	
86612	Antibody; Blastomyces	$ 12.90	
86615	Antibody; Bordetella	$ 13.19	
86617	Antibody; Borrelia Burgdorferi (Lyme Disease) Confirmatory Test (Eg, Western Blot Or Immunoblot)	$ 15.49	
86618	Antibody; Borellia Bufgdorferi (Lyme Disease)	$ 17.03	
86619	Antibody; Borrelia (Relapsing Fever)	$ 13.38	
86622	Antibody; Brucella	$ 8.93	
86625	Antibody; Campylobacter	$ 13.12	
86628	Antibody; Candida	$ 12.01	
86631	Antibody; Chlamydia	$ 11.82	
86632	Antibody; Chlamydia, Igm	$ 12.68	
86635	Antibody; Coccidioides	$ 11.47	
86638	Antibody; Coxiella Brunetii (Q Fever)	$ 12.12	
86641	Antibody; Cryptococcus	$ 14.41	
86644	Antibody; Cytomegalovirus (Cmv)	$ 14.39	
86645	Antibody; Cytomegalovirus (Cmv), Igm	$ 16.85	
86648	Antibody; Diptheria	$ 15.21	
86651	Antibody; Encephalitis, California (La Crosse)	$ 13.19	
86652	Antibody; Encephalitis, Eastern Equine	$ 13.19	
86653	Antibody; Encephalitis, St. Louis	$ 13.19	
86654	Antibody; Encephalitis, Western Equine	$ 13.19	
86658	Antibody; Enterovirus (Eg, Coxsackie, Echo, Polio)	$ 13.03	
86663	Analysis For Antibody To Epstein-Barr Virus (Mononucleosis Virus), Early Antigen	$ 13.12	
86664	Analysis For Antibody To Epstein-Barr Virus (Mononucleosis Virus), Nuclear Antigen	$ 15.29	
86665	Analysis For Antibody To Epstein-Barr Virus (Mononucleosis Virus), Viral Capsid	$ 18.14	
86666	Antibody; Ehrlichia	$ 10.18	
86668	Antibody; Francisella Tularensis	$ 14.16	
86671	Antibody; Fungus, Not Elsewhere Specified	$ 12.25	
86674	Antibody; Giardia Lamblia	$ 14.72	
86677	Antibody; Helicobacter Pylori	$ 16.85	
86682	Antibody; Helminth, Not Elsewhere Specified	$ 13.01	
86684	Antibody; Hemophilus Influenza	$ 15.84	
86687	Analysis For Antibody To Human T-Cell Lymphotropic Virus, Type 1 (Htlv-1)	$ 9.09	
86688	Analysis For Antibody To Human T-Cell Lymphotropic Virus, Type 2 (Htlv-2)	$ 14.00	
86689	Confirmation Test For Antibody To Human T-Cell Lymphotropic Virus (Htlv) Or Hiv	$ 19.35	
86692	Antibody; Hepatitis, Delta Agent	$ 17.16	
86694	Antibody; Herpes Simplex, Non-Specific Type Test	$ 14.39	
86695	Analysis For Antibody To Herpes Simplex Virus, Type 1	$ 13.19	
86696	Analysis For Antibody To Herpes Simplex Virus, Type 2	$ 19.35	

86698	Antibody; Histoplasma	$	13.79	
86701	Antibody; Hiv-1	$	8.89	
86702	Antibody; Hiv-2	$	13.52	
86703	Antibody; Hiv-1 And Hiv-2, Single Result	$	13.71	
86704	Hepatitis B Core Antibody (Hbcab), Total	$	12.05	
86705	Hepatitis B Core Antibody (Hbcab); Igm Antibody	$	11.77	
86706	Hepatitis B Surface Antibody (Hbsab)	$	10.74	
86707	Hepatitis Be Antibody (Hbeab)	$	11.57	
86708	Measurement Of Hepatitis A Antibody	$	12.39	
86709	Measurement Of Hepatitis A Antibody (Igm)	$	11.26	
86710	Antibody; Influenza Virus	$	13.55	
86711	Antibody; Jc (John Cunningham) Virus	$	16.89	
86713	Antibody; Legionella	$	15.30	
86717	Antibody; Leishmania	$	12.25	
86720	Antibody; Leptospira	$	16.20	
86723	Antibody; Listeria Monocytogenes	$	13.19	
86727	Antibody; Lymphocytic Choriomeningitis	$	12.87	
86732	Antibody; Mucormycosis	$	15.00	
86735	Antibody; Mumps	$	13.05	
86738	Antibody; Mycoplasma	$	13.24	
86741	Antibody; Neisseria Meningitidis	$	13.19	
86744	Antibody; Nocardia	$	15.99	
86747	Antibody; Parvovirus	$	15.03	
86750	Antibody; Plasmodium (Malaria)	$	13.19	
86753	Antibody; Protozoa, Not Elsewhere Specified	$	12.39	
86756	Antibody; Respiratory Syncytial Virus	$	15.89	
86757	Antibody; Rickettsia	$	19.35	
86759	Antibody; Rotavirus	$	18.23	
86762	Antibody; Rubella	$	14.39	
86765	Antibody; Rubeola	$	12.88	
86768	Antibody; Salmonella	$	13.19	
86769	Measure Of Severe Acute Respiratory Syndrome Coronavirus 2 (Covid-19) Antibody	$	42.13	
86771	Antibody; Shigella	$	24.48	
86774	Antibody; Tetanus	$	14.80	
86777	Antibody; Toxoplasma	$	14.39	
86778	Antibody; Toxoplasma, Igm	$	14.41	
86780	Analysis For Antibody, Treponema Pallidum	$	13.24	
86784	Antibody; Trichinella	$	12.56	
86787	Antibody; Varicella-Zoster	$	12.88	
86788	West nile virus ab igm	$	16.85	
86789	West nile virus	$	14.39	
86790	Antibody; Virus, Not Elsewhere Specified	$	12.88	
86793	Antibody; Yersinia	$	13.19	
86794	Analysis For Antibody To Zika Virus	$	16.85	
86800	Thyroglobulin Antibody	$	15.91	
86803	Hepatitis C Antibody;	$	14.27	
86804	Hepatitis C Antibody; Confirmatory Test (Eg, Immunoblot)	$	15.49	
86805	Immunologic Analysis For Autoimmune Disease, With Titration	$	189.51	
86806	Immunologic Analysis For Autoimmune Disease, Without Titration	$	47.59	
86807	Transplant Antibody Measurement, Standard Method	$	78.65	
86808	Transplant Antibody Measurement, Quick Method	$	29.68	
86812	Immunologic Analysis For Autoimmune Disease, A, B, Or C, Single Antigen	$	25.81	
86813	Immunologic Analysis For Autoimmune Disease, A, B, Or C, Multiple Antigens	$	58.00	
86816	Immunologic Analysis For Autoimmune Disease, Dr/Dq, Single Antigen	$	30.17	
86817	Immunologic Analysis For Autoimmune Disease, Dr/Dq, Multiple Antigens	$	106.14	
86821	Immunologic Analysis For Autoimmune Disease, Lymphocyte Culture, Mixed	$	36.56	
86828	Antibody To Human Leukocyte Antigens (Hla), Solid Phase Assays (Eg, Microspheres Or Beads, Elisa, Flow Cytometry); Qualitative Assessment Of The Presence Or Absence Of Antibody(Ies) To Hla Class I And Class Ii Hla Antigens	$	64.19	PA Required

86829	Antibody To Human Leukocyte Antigens (Hla), Solid Phase Assays (Eg, Microspheres Or Beads, Elisa, Flow Cytometry); Qualitative Assessment Of The Presence Or Absence Of Antibody(Ies) To Hla Class I Or Class Ii Hla Antigens	$ 64.19	PA Required
86830	Assessment Of Antibody To Human Leukocyte Antigens (Hla) With Antibody Identification By Qualitative Panel Using Complete Hla Phenotypes, Hla Class I	$ 95.52	PA Required
86831	Assessment Of Antibody To Human Leukocyte Antigens (Hla) With Antibody Identification By Qualitative Panel Using Complete Hla Phenotypes, Hla Class Ii	$ 81.88	PA Required
86832	Assessment Of Antibody To Human Leukocyte Antigens (Hla) With High Definition Qualitative Panel For Identification Of Antibody Specificities, Hla Class I	$ 323.75	PA Required
86833	Assessment Of Antibody To Human Leukocyte Antigens (Hla) With High Definition Qualitative Panel For Identification Of Antibody Specificities, Hla Class Ii	$ 325.80	PA Required
86834	Assessment Of Antibody To Human Leukocyte Antigens (Hla), Hla Class I	$ 357.56	PA Required
86835	Assessment Of Antibody To Human Leukocyte Antigens (Hla) With Solid Phase Assays, Hla Class Ii	$ 322.96	PA Required
86849	Unlisted Immunology Procedure	Price by Report	
86850	Antibody Screen, Rbc, Each Serum Technique	$ 9.77	
86860	Antibody Elution (Rbc), Each Elution	Price by Report	
86870	Antibody Identification, Rbc Antibodies, Each Panel For Each Serum Technique	$ 49.93	
86880	Red Blood Cell Antibody Detection Test, Direct	$ 5.39	
86885	Red Blood Cell Antibody Detection Test, Indirect	$ 5.72	
86886	Antihuman Globulin Test (Coombs Test); Indirect, Each Antibody Titer	$ 5.18	
86890	Processing And Storage Of Blood Unit Or Component, Predeposited	Price by Report	
86891	Processing And Storage Of Blood Unit Or Component, Intra- Or Postoperative Salvage	$ 242.88	
86900	Blood Group Typing (Abo)	$ 2.99	
86901	Blood Typing For Rh (D) Antigen	$ 2.99	
86902	Screening Test For Compatible Blood Unit, Using Reagent Serum	$ 6.35	
86904	Screening Test For Compatible Blood Unit, Using Patient Serum	$ 16.34	
86905	Blood Typing For Red Blood Cell Antigens	$ 3.83	
86906	Blood Typing Rh Phenotyping	$ 7.75	
86920	Blood Unit Compatibility Test, Immediate Spin Technique	$ 29.46	
86921	Blood Unit Compatibility Test, Incubation Technique	Price by Report	
86922	Blood Unit Compatibility Test, Antiglobulin Technique	$ 23.45	
86923	Blood Unit Compatibility Test, Electronic	Price by Report	
86927	Fresh Frozen Plasma, Thawing, Each Unit	Price by Report	
86930	Frozen Blood, Each Unit; Freezing (Includes Preparation)	Price by Report	
86931	Frozen Blood, Each Unit; Thawing	Price by Report	
86932	Frozen Blood, Each Unit; Freezing (Includes Preparation) And Thawing	Price by Report	
86940	Hemolysins And Agglutinins, Auto, Screen, Each;	$ 8.77	
86941	Hemolysins And Agglutinins, Auto, Screen, Each; Incubated	$ 12.11	
86945	Irradiation Of Blood Product, Each Unit	Price by Report	
86950	Leukocyte Transfusion	Price by Report	
86960	Volume Reduction Of Blood Or Blood Product (Eg, Red Blood Cells Or Platelets), Each Unit	Price by Report	
86965	Pooling Of Platelets Or Other Blood Products	$ 146.68	
86970	Pretreatment Of Red Blood Cells For Use In Red Blood Cells Antibody Analysis And Measurement, Incubation With Chemical Agents Or Drugs	$ 61.08	
86971	Pretreatment Of Red Blood Cells For Use In Red Blood Cells Antibody Analysis And Measurement, Incubation With Enzymes	$ 44.45	
86972	Pretreatment Of Red Blood Cells For Use In Red Blood Cells Antibody Analysis And Measurement, By Density Gradient Separation	$ 44.45	
86975	Pretreatment Of Serum For Use In Red Blood Cell Antibody Analysis And Measurement, Incubation With Drugs	Price by Report	
86976	Pretreatment Of Serum For Use In Red Blood Cell Antibody Analysis And Measurement, By Dilution	Price by Report	
86977	Pretreatment Of Serum For Use In Red Blood Cell Antibody Analysis And Measurement, Incubation With Inhibitors	Price by Report	
86978	Pretreatment Of Serum For Use In Red Blood Cell Antibody Analysis And Measurement, By Differential Red Cell Absorption	Price by Report	
86985	Splitting Of Blood Or Blood Products, Each Unit	Price by Report	
86999	Unlisted Transfusion Medicine Procedure	$ 15.23	
87003	Animal Inoculation, Small Animal With Observation And Dissection	$ 16.84	
87015	Concentration (Any Type), For Infectious Agents	$ 6.68	
87040	Culture, Bacterial; Blood, Aerobic, With Isolation And Presumptive Identification Of Isolates (Includes Anaerobic Culture, If Appropriate)	$ 10.32	
87045	Culture, Bacterial; Stool, Aerobic, With Isolation And Preliminary Examination (Eg, Kia, Lia), Salmonella And Shigella Species	$ 9.44	
87046	Stool Culture, Additional Pathogens	$ 9.44	
87070	Bacterial Culture, Any Other Source Except Urine, Blood Or Stool, Aerobic	$ 8.62	

87071	Culture, Bacterial; Quantitative, Aerobic With Isolation And Presumptive Identification Of Isolates, Any Source Except Urine, Blood Or Stool	$ 9.89	
87073	Culture, Bacterial; Quantitative, Anaerobic With Isolation And Presumptive Identification Of Isolates, Any Source Except Urine, Blood Or Stool	$ 9.66	
87075	Bacterial Culture, Any Source, Except Blood, Anaerobic	$ 9.47	
87076	Culture, Bacterial; Anaerobic Isolate, Additional Methods Required For Definitive Identification, Each Isolate	$ 8.08	
87077	Culture, Bacterial; Aerobic Isolate, Additional Methods Required For Definitive Identification, Each Isolate	$ 8.08	
87081	Culture, Presumptive, Pathogenic Organisms, Screening Only;	$ 6.63	
87084	Culture, Presumptive, Pathogenic Organisms, Screening Only, By Commercial Kit (Specify Type); For Single Organisms With Colony Estimation From Density Chart (Includes Throat Cultures)	$ 27.07	
87086	Bacterial Colony Count, Urine	$ 8.07	
87088	Culture, Bacterial; With Isolation And Presumptive Identification Of Isolates, Urine	$ 8.09	
87101	Fungal Culture (Mold Or Yeast) Of Skin, Hair, Or Nail	$ 7.71	
87102	Culture, Fungi, Isolation; Other Source	$ 8.41	
87103	Culture, Fungi, Isolation Blood	$ 20.46	
87106	Fungal Culture, Yeast	$ 10.32	
87107	Culture, Fungi, Definitive Identification, Each Organism; Mold	$ 10.32	
87109	Culture, Mycoplasma, Any Source	$ 15.39	
87110	Culture, Chlamydia, Any Source	$ 19.60	
87116	Culture, Tubercle Or Other Acid-Fast Bacilli (Eg, Tb, Afb, Mycobacteria) Any Source, With Isolation And Presumptive Identification Of Isolates	$ 10.80	
87118	Culture, Mycobacterial, Definitive Identification, Each Isolate	$ 14.61	
87140	Identification Of Organisms By Immunologic Analysis, Immunofluorescent Method	$ 5.57	
87143	Culture, Typing; Gas Liquid Chromatography (Glc) Or High Pressure Liquid Chromatography (Hplc) Method	$ 12.52	
87147	Identification Of Organisms By Immunologic Analysis, Other Than Immunofluorescence Method	$ 5.18	
87149	Identification Of Organisms By Genetic Analysis, Direct Probe Technique	$ 20.05	
87150	Identification Of Organisms By Genetic Analysis, Amplified Probe Technique	$ 35.09	
87152	Culture, Typing; Identification By Pulse Field Gel Typing	$ 7.74	
87153	Identification Of Organisms By Nucleic Acid Sequencing Method	$ 115.36	
87158	Culture, Typing; Other Methods	$ 7.74	
87164	Dark Field Microscopic Examination For Organism, Includes Specimen Collection	$ 10.74	
87166	Dark Field Microscopic Examination For Organism, Without Collection	$ 11.30	
87168	Macroscopic Examination; Arthropod	$ 4.27	
87169	Macroscopic Examination; Parasite	$ 4.31	
87172	Pinworm Exam (Eg, Cellophane Tape Prep)	$ 4.27	
87176	Homogenization, Tissue, For Culture	$ 5.88	
87177	Ova And Parasites, Direct Smears, Concentration And Identification	$ 8.90	
87181	Evaluation Of Antimicrobial Drug (Antibiotic, Antifungal, Antiviral), Agar Dilution Method	$ 4.75	
87184	Evaluation Of Antimicrobial Drug (Antibiotic, Antifungal, Antiviral)	$ 7.48	
87185	Detection Of Antimicrobial Drug (Antibiotic, Antifungal, Antiviral)	$ 4.75	
87186	Evaluation Of Antimicrobial Drug (Antibiotic, Antifungal, Antiviral), Microdilution Or Agar Dilution	$ 8.65	
87187	Evaluation Of Antimicrobial Drug (Antibiotic, Antifungal, Antiviral), Microdilution Or Agar Dilution, Each Plate	$ 40.17	
87188	Evaluation Of Antimicrobial Drug (Antibiotic, Antifungal, Antiviral), Macrobroth Dilution Method	$ 6.64	
87190	Antimicrobial Study, Mycobacteria (Tb Organism Family)	$ 7.31	
87197	Evaluation Of Antibiotic Therapy	$ 15.02	
87205	Special Gram Or Giemsa Stain For Microorganism	$ 4.27	
87206	Special Fluorescent And/Or Acid Fast Stain For Microorganism	$ 5.39	
87207	Special Stain For Inclusion Bodies Or Parasites	$ 5.99	
87209	Smear, Primary Source With Interpretation; Complex Special Stain (Eg, Trichrome, Iron Hemotoxylin) For Ova And Parasites	$ 17.98	
87210	Smear, Primary Source With Interpretation; Wet Mount For Infectious Agents (Eg, Saline, India Ink, Koh Preps)	$ 5.82	
87220	Tissue Examination By Koh Slide Of Samples From Skin, Hair, Or Nails For Fungi Or Ectoparasite Ova Or Mites (Eg, Scabies)	$ 4.27	
87230	Toxin Or Antitoxin Assay, Tissue Culture (Eg, Clostridium Difficile Toxin)	$ 19.74	
87250	Inoculation Of Embryonated Eggs, Or Small Animal For Virus Isolation	$ 19.56	
87252	Virus Isolation; Tissue Culture Inoculation, Observation, And Presumptive Identification By Cytopathic Effect	$ 26.07	
87253	Tissue Culture For Virus Isolation	$ 20.20	

87254	Virus Isolation, Centrifuge Enhanced	$	19.56	
87255	Virus Isolation; Including Identification By Non-Immunologic Method, Other Than By Cytopathic Effect (Eg, Virus Specific Enzymatic Activity)	$	33.86	
87260	Infectious Agent Antigen Detection By Immunofluorescent Technique; Adenovirus	$	14.43	
87265	Infectious Agent Antigen Detection By Direct Fluorescent Antibody Technique; Bordetella Pertussis/Parapertussis	$	11.98	
87267	Detection Test For Enterovirus (Intestinal Virus), Direct Fluorescent Antibody	$	13.42	
87269	Detection Test By Immunofluorescent Technique For Giardia (Intestinal Parasite)	$	13.61	
87270	Detection Test By Immunofluorescent Technique For Chlamydia	$	11.98	
87271	Detection Test By Immunofluorescent Technique For Cytomegalovirus (Cmv)	$	13.42	
87272	Detection Test By Immunofluorescent Technique For Cryptosporidium (Parasite)	$	11.98	
87273	Detection Test By Immunofluorescent Technique For Herpes Simplex Virus Type 2	$	11.98	
87274	Detection Test By Immunofluorescent Technique For Herpes Simplex Virus Type 1	$	11.98	
87275	Detection Test By Immunofluorescent Technique For Influenza B Virus	$	12.25	
87276	Detection Test By Immunofluorescent Technique For Influenza A Virus	$	16.07	
87278	Detection Test By Immunofluorescent Technique For Legionella Pneumophila (Water Borne Bacteria)	$	15.60	
87279	Detection Test By Immunofluorescent Technique For Parainfluenza Virus	$	16.43	
87280	Detection Test By Immunofluorescent Technique For Respiratory Syncytial Virus (Rsv)	$	13.42	
87281	Detection Test By Immunofluorescent Technique For Pneumocystis Carinii (Respiratory Parasite)	$	11.98	
87283	Detection Test By Immunofluorescent Technique For Rubeola (Measles Virus)	$	60.80	
87285	Detection Test By Immunofluorescent Technique For Treponema Pallidum (Syphilis Organism)	$	12.18	
87290	Detection Test By Immunofluorescent Technique For Varicella (Chicken Pox) Zoster Virus	$	13.42	
87299	Detection Test By Immunofluorescent Technique For Organism	$	16.10	
87300	Detection Test By Immunofluorescent Technique For Multiple Organisms	$	11.98	
87301	Detection Test By Immunoassay Technique For Adenovirus Enteric Types 40/41	$	11.98	
87305	Detection Test By Immunoassay Technique For Aspergillus (Fungus)	$	11.98	
87320	Detection Test By Immunoassay Technique For Chlamydia	$	15.00	
87324	Detection Test By Immunoassay Technique For Clostridium Difficile Toxins (Stool Pathogen)	$	11.98	
87327	Detection Test By Immunoassay Technique For Cryptococcus Neoformans (Yeast)	$	13.42	
87328	Detection Test By Immunoassay Technique For Cryptosporidium (Parasite)	$	13.82	
87329	Detection Test By Immunoassay Technique For Giardia (Intestinal Parasite)	$	11.98	
87332	Detection Test By Immunoassay Technique For Cytomegalovirus	$	11.98	
87335	Detection Test By Immunoassay Technique For E. Coli, (Escherichia Coli 0157)	$	12.66	
87336	Detection Test By Immunoassay Technique For Entamoeba Histolytica Dispar Group (Parasite)	$	16.00	
87337	Detection Test By Immunoassay Technique For Entamoeba Histolytica Group (Parasite)	$	11.98	
87338	Qualitative Or Semiquantitative Detection Test By Immunoassay Technique For Helicobacter Pylori In Stool, Multiple-Step Method	$	14.38	
87339	Detection Test By Immunoassay Technique For Helicobacter Pylori (Gi Tract Bacteria)	$	16.00	
87340	Detection Test By Immunoassay Technique For Hepatitis B Surface Antigen	$	10.33	
87341	Detection Test By Immunoassay Technique For Hepatitis B Surface Antigen Neutralization	$	10.33	
87350	Detection Test By Immunoassay Technique For Hepatitis Be Surface Antigen	$	11.53	
87380	Detection Test By Immunoassay Technique For Hepatitis D	$	18.36	
87385	Detection Test By Immunoassay Technique For Histoplasma Capsulatum (Parasite)	$	13.25	
87389	Detection Test By Immunoassay Technique For Hiv-1 And Hiv-2	$	24.08	
87390	Detection Test By Immunoassay Technique For Hiv-1	$	24.06	
87391	Detection Test By Immunoassay Technique For Hiv-2	$	21.90	
87400	Detection Test By Immunoassay Technique For Influenza Virus, A Or B	$	14.13	
87420	Detection Test By Immunoassay Technique For Respiratory Syncytial Virus (Rsv)	$	13.91	
87425	Detection Test By Immunoassay Technique For Rotavirus	$	11.98	
87426	Elisa Detection Of Severe Acute Respiratory Syndrome Coronavirus 2 (Covid-19) Antigen	$	35.33	
87427	Detection Test By Immunoassay Technique For Bacteria Toxin (Shiga-Like Toxin)	$	11.98	
87428	Infectious Agent Antigen Detection By Immunoassay Technique, (Eg, Enzyme Immunoassay [Eia], Enzyme-Linked Immunosorbent Assay [Elisa], Fluorescence Immunoassay [Fia], Immunochemiluminometric Assay [Imca]) Qualitative Or Semiquantitative; Severe Acu	$	30.94	
87430	Detection Test By Immunoassay Technique For Strep (Streptococcus, Group A)	$	16.81	
87449	Immunologic Analysis For Detection Of Organism By Immunoassay Technique, Multiple-Step Method	$	11.98	
87451	Immunologic Analysis For Detection Of Organism By Immunoassay Technique, Multiple Organisms, Multiple-Step Method	$	10.51	
87471	Detection By Nucleic Acid Bartonella Henselae And Bartonella Quintana (Bacteria), Amplified Probe Technique	$	35.09	

87472	Detection By Nucleic Acid Bartonella Henselae And Bartonella Quintana (Bacteria), Quantification	$	42.84	
87475	Detection By Nucleic Acid For Borrelia Burgdorferi (Bacteria), Direct Probe Technique	$	20.05	
87476	Detection By Nucleic Acid For Borrelia Burgdorferi (Bacteria), Amplified Probe Technique	$	35.09	
87480	Detection Test For Candida Species (Yeast), Direct Probe Technique	$	20.05	
87481	Detection Test For Candida Species (Yeast), Amplified Probe Technique	$	35.09	
87482	Detection Test For Candida Species (Yeast), Quantification	$	55.74	
87483	Test For Detecting Nucleic Acid Of Organism Causing Infection Of Central Nervous System	$	416.78	
87485	Detection Test By Nucleic Acid For Chlamydia Pneumoniae, Direct Probe Technique	$	20.05	
87486	Detection Test By Nucleic Acid For Chlamydia Pneumoniae, Amplified Probe Technique	$	35.09	
87487	Detection Test By Nucleic Acid For Chlamydia Pneumoniae, Quantification	$	42.84	
87490	Detection Test By Nucleic Acid For Chlamydia, Direct Probe Technique	$	22.75	
87491	Detection Test By Nucleic Acid For Chlamydia Trachomatis, Amplified Probe Technique	$	35.09	
87492	Detection Test By Nucleic Acid For Chlamydia Trachomatis, Quantification	$	53.47	
87493	Detection Test By Nucleic Acid For Clostridium Difficile, Amplified Probe Technique	$	37.27	
87495	Detection Test By Nucleic Acid For Cytomegalovirus (Cmv), Direct Probe Technique	$	30.03	
87496	Detection Test By Nucleic Acid For Cytomegalovirus (Cmv), Amplified Probe Technique	$	35.09	
87497	Detection Test By Nucleic Acid For Cytomegalovirus, Quantification	$	42.84	
87498	Detection Test By Nucleic Acid For Enterovirus (Intestinal Virus), Amplified Probe Technique	$	35.09	
87500	Detection Test By Nucleic Acid For Vancomycin Resistance Strep (Vre), Amplified Probe Technique	$	35.09	
87501	Detection Test By Nucleic Acid For Influenza Virus, Each Type Or Subtype	$	51.31	
87502	Detection Test By Nucleic Acid For Multiple Types Influenza Virus	$	95.80	
87503	Detection Test By Nucleic Acid For Multiple Types Influenza Virus, Each Additional Influenza Virus Type Or Sub-Type	$	29.22	
87505	Detection Test By Nucleic Acid For Digestive Tract Pathogen, Multiple Types Or Subtypes, 3-5 Targets	$	128.29	
87506	Detection Test By Nucleic Acid For Digestive Tract Pathogen, Multiple Types Or Subtypes, 6-11 Targets	$	262.99	
87507	Detection Test By Nucleic Acid For Digestive Tract Pathogen, Multiple Types Or Subtypes, 12-25 Targets	$	416.78	
87510	Detection Test For Gardnerella Vaginalis (Bacteria), Direct Probe Technique	$	20.05	
87511	Detection Test For Gardnerella Vaginalis (Bacteria), Amplified Probe Technique	$	35.09	
87512	Detection Test For Gardnerella Vaginalis (Bacteria), Quantification	$	41.76	
87516	Detection Test By Nucleic Acid For Hepatitis B Virus, Amplified Probe Technique	$	35.09	
87517	Detection Test By Nucleic Acid For Hepatitis B Virus, Quantification	$	42.84	
87520	Detection Test By Nucleic Acid For Hepatitis C Virus, Direct Probe Technique	$	31.22	
87521	Detection Test By Nucleic Acid For Hepatitis C Virus, Amplified Probe Technique	$	35.09	
87522	Detection Test By Nucleic Acid For Hepatitis C Virus, Quantification	$	42.84	
87525	Detection Test By Nucleic Acid For Hepatitis G Virus, Direct Probe Technique	$	29.80	
87526	Detection Test By Nucleic Acid For Hepatitis G Virus, Amplified Probe Technique	$	39.26	
87527	Detection Test By Nucleic Acid For Hepatitis G Virus, Quantification	$	41.76	
87528	Detection Test By Nucleic Acid For Herpes Simplex Virus, Direct Probe Technique	$	20.05	
87529	Detection Test By Nucleic Acid For Herpes Simplex Virus, Amplified Probe Technique	$	35.09	
87530	Detection Test By Nucleic Acid For Herpes Simplex Virus, Quantification	$	42.84	
87531	Detection Test By Nucleic Acid For Herpes Virus-6, Direct Probe Technique	$	58.00	
87532	Detection Test By Nucleic Acid For Herpes Virus-6, Amplified Probe Technique	$	35.09	
87533	Detection Test By Nucleic Acid For Herpes Virus-6, Quantification	$	41.76	
87534	Detection Test By Nucleic Acid For Hiv-1 Virus, Direct Probe Technique	$	21.92	
87535	Detection Test By Nucleic Acid For Hiv-1 Virus, Amplified Probe Technique	$	35.09	
87536	Detection Test By Nucleic Acid For Hiv-1 Virus, Quantification	$	85.10	
87537	Detection Test By Nucleic Acid For Hiv-2 Virus, Direct Probe Technique	$	21.92	
87538	Detection Test By Nucleic Acid For Hiv-2 Virus, Amplified Probe Technique	$	35.09	
87539	Detection Test By Nucleic Acid For Hiv-2 Virus, Quantification	$	58.62	
87540	Detection Test By Nucleic Acid For Legionella Pneumophila (Water Borne Bacteria), Direct Probe Technique	$	20.05	
87541	Detection Test By Nucleic Acid For Legionella Pneumophila (Water Borne Bacteria), Amplified Probe Technique	$	35.09	
87542	Detection Test By Nucleic Acid For Legionella Pneumophila (Water Borne Bacteria), Quantification	$	41.76	
87550	Detection Test By Nucleic Acid For Mycobacteria Species (Bacteria), Direct Probe Technique	$	20.05	
87551	Detection Test By Nucleic Acid For Mycobacteria Species (Bacteria), Amplified Probe Technique	$	48.24	
87552	Detection Test By Nucleic Acid For Mycobacteria Species (Bacteria), Quantification	$	42.84	

87555	Detection Test By Nucleic Acid For Mycobacteria Tuberculosis (Tb Bacteria), Direct Probe Technique	$ 26.88	
87556	Detection Test By Nucleic Acid For Mycobacteria Tuberculosis (Tb Bacteria), Amplified Probe Technique	$ 41.68	
87557	Detection Test By Nucleic Acid For Mycobacteria Tuberculosis (Tb Bacteria), Quantification	$ 42.84	
87560	Detection Test By Nucleic Acid For Mycobacteria Avium-Intracellulare (Bacteria), Direct Probe Technique	$ 27.29	
87561	Detection Test By Nucleic Acid For Mycobacteria Avium-Intracellulare (Bacteria), Amplified Probe Technique	$ 35.09	
87562	Detection Test By Nucleic Acid For Mycobacteria Avium-Intracellulare (Bacteria), Quantification	$ 42.84	
87563	Detection Of Mycoplasma Genitalium By Dna Or Rna Probe	$ 35.09	PA Required
87580	Detection Test By Nucleic Acid For Mycoplasma Pneumoniae (Bacteria), Direct Probe Technique	$ 20.05	
87581	Detection Test By Nucleic Acid For Mycoplasma Pneumoniae (Bacteria), Amplified Probe Technique	$ 35.09	
87582	Detection Test By Nucleic Acid For Mycoplasma Pneumoniae (Bacteria), Quantification	$ 302.62	
87590	Detection Test By Nucleic Acid For Neisseria Gonorrhoeae (Gonorrhoeae Bacteria), Direct Probe Technique	$ 26.88	
87591	Detection Test By Nucleic Acid For Neisseria Gonorrhoeae (Gonorrhoeae Bacteria), Amplified Probe Technique	$ 35.09	
87592	Detection Test By Nucleic Acid For Neisseria Gonorrhoeae (Gonorrhoeae Bacteria), Quantification	$ 42.84	
87623	Detection Test By Nucleic Acid For Human Papillomavirus (Hpv), Low-Risk Types	$ 35.09	
87624	Detection Test By Nucleic Acid For Human Papillomavirus (Hpv), High-Risk Types	$ 35.09	
87625	Detection Test By Nucleic Acid For Human Papillomavirus (Hpv), Types 16 And 18 Only	$ 40.55	
87631	Detection Test By Nucleic Acid For Multiple Types Of Respiratory Virus, Multiple Types Or Subtypes, 3-5 Targets	$ 142.63	
87632	Detection Test By Nucleic Acid For Multiple Types Of Respiratory Virus, Multiple Types Or Subtypes, 6-11 Targets	$ 218.06	
87633	Detection Test By Nucleic Acid For Multiple Types Of Respiratory Virus, Multiple Types Or Subtypes, 12-25 Targets	$ 416.78	
87634	Detection Test By Nucleic Acid For Respiratory Syncytial Virus, Amplified Probe Technique	$ 70.20	
87635	Amplifed Dna Or Rna Probe Detection Of Severe Acute Respiratory Syndrome Coronavirus 2 (Covid-19) Antigen	$ 51.31	
87636	Infectious Agent Detection By Nucleic Acid (Dna Or Rna); Severe Acute Respiratory Syndrome Coronavirus 2 (Sars-Cov-2) (Coronavirus Disease [Covid-19]) And Influenza Virus Types A And B, Multiplex Amplified Probe Technique	$ 142.63	
87637	Infectious Agent Detection By Nucleic Acid (Dna Or Rna); Severe Acute Respiratory Syndrome Coronavirus 2 (Sars-Cov-2) (Coronavirus Disease [Covid-19]), Influenza Virus Types A And B, And Respiratory Syncytial Virus, Multiplex Amplified Probe Te	$ 142.63	
87640	Detection Test By Nucleic Acid For Staphylococcus Aureus (Bacteria), Amplified Probe Technique	$ 35.09	
87641	Detection Test By Nucleic Acid For Staphylococcus Aureus, Methicillin Resistant (Mrsa Bacteria), Amplified Probe Technique	$ 35.09	
87650	Detection Test By Nucleic Acid For Strep (Streptococcus, Group A), Direct Probe Technique	$ 20.05	
87651	Detection Test By Nucleic Acid For Strep (Streptococcus, Group A), Amplified Probe Technique	$ 35.09	
87652	Detection Test By Nucleic Acid For Strep (Streptococcus, Group A), Quantification	$ 41.76	
87653	Detection Test By Nucleic Acid For Strep (Streptococcus, Group B), Amplified Probe Technique	$ 35.09	
87660	Detection Test By Nucleic Acid For Trichomonas Vaginalis (Genital Parasite), Direct Probe Technique	$ 20.05	
87661	Infectious Agent Detection By Nucleic Acid (Dna Or Rna); Trichomonas Vaginalis, Amplified Probe Technique	$ 35.09	
87662	Detection Test By Nucleic Acid For Zika Virus, Amplified Probe Technique	$ 51.31	
87797	Detection Test By Nucleic Acid For Organism, Direct Probe Technique	$ 30.03	
87798	Detection Test By Nucleic Acid For Organism, Amplified Probe Technique	$ 35.09	
87799	Detection Test By Nucleic Acid For Organism, Quantification	$ 42.84	
87800	Detection Test By Nucleic Acid For Multiple Organisms, Direct Probe(S) Technique	$ 43.67	
87801	Detection Test By Nucleic Acid For Multiple Organisms, Amplified Probe(S) Technique	$ 70.20	
87802	Detection Test By Immunoassay For Streptococcus, Group B (Bacteria)	$ 12.73	
87803	Detection Test By Immunoassay For Clostridium Difficile Toxin A (Bacteria)	$ 16.00	
87804	Detection Test By Immunoassay For Influenza Virus	$ 16.55	
87806	Detection Test By Immunoassay For Hiv-1	$ 32.77	
87807	Detection Test By Immunoassay For Respiratory Syncytial Virus (Rsv)	$ 13.10	
87808	Detection Test By Immunoassay For Trichomonas Vaginal (Genital Parasite)	$ 15.29	
87809	Detection Test By Immunoassay For Adenovirus	$ 21.76	
87810	Detection Test By Immunoassay For Chlamydia Trachomatis	$ 35.29	

87811	Infectious Agent Antigen Detection By Immunoassay With Direct Optical (Ie, Visual) Observation; Severe Acute Respiratory Syndrome Coronavirus 2 (Sars-Cov-2) (Coronavirus Disease [Covid-19])	$	41.38	
87850	Detection Test By Immunoassay For Neisseria Gonorrhoeae (Gonorrhoeae)	$	24.56	
87880	Strep Test By Immunoassay For Streptococcus	$	16.53	
87899	Detection Test By Immunoassay For Identification Of Organism	$	16.07	
87900	Infectious Agent Drug Susceptibility Phenotype Prediction Using Regularly Updated Genotypic Bioinformatics	$	130.35	
87901	Analysis Test By Nucleic Acid For Hiv-1 Virus	$	257.45	
87902	Analysis Test By Nucleic Acid For Hepatitis C Virus	$	257.45	
87903	Analysis Test By Nucleic Acid For Hiv-1 Virus, First Through 10 Drugs Tested	$	488.66	
87904	Analysis Test By Nucleic Acid For Hiv-1 Virus, Each Additional Drug Tested	$	26.07	
87905	Infectious Agent Enzymatic Activity Other Than Virus (Eg, Sialidase Activity In Vaginal Fluid)	$	12.22	
87906	Analysis Test By Nucleic Acid For Hiv-1 Virus, Other Region	$	128.73	
87910	Analysis Test By Nucleic Acid For Cytomegalovirus, Cytomegalovirus	$	257.45	
87912	Analysis Test By Nucleic Acid For Hepatitis B Virus	$	257.45	
87999	Unlisted Microbiology Procedure	$	8.83	
88104	Cell Examination Of Body Fluid, Smears	$	29.68	
88106	Cell Examination Of Body Fluid, Simple Filter Method	$	34.34	
88108	Cell Examination Of Specimen, Concentration Technique	$	27.54	
88112	Cell Examination Of Specimen, Selective Cellular Enhancement Technique	$	105.28	
88120	Cell Examination Of Urine, Manual	$	517.46	
88121	Cell Examination Of Urine, Computer-Assisted	$	446.03	
88125	Cytopathology, Forensic (Eg, Sperm)	$	13.33	
88130	Sex Identification, Barr Bodies	$	17.98	
88140	Sex Identification, Peripheral Blood Smear	$	7.99	
88141	Pap Test	$	17.31	
88142	Pap Test, Manual Screening	$	20.26	
88143	Pap Test, Manual Screening And Rescreening	$	23.04	
88147	Pap Test (Pap Smear), Automated System	$	50.56	
88148	Pap Test (Pap Smear), Automated System With Manual Rescreening	$	16.00	
88150	Pap Test, Slides, Manual Screening	$	15.92	
88152	Pap Test, Slides, Automated System With Computer-Assisted Rescreening	$	27.64	
88153	Pap Test, Slides, Manual Screening And Rescreening	$	24.03	
88155	Pap Test, Slides, Definitive Hormonal Evaluation	$	14.65	
88160	Screening Examination Of Specimen Cells, Screening And Interpretation	$	30.78	
88161	Screening Examination Of Specimen Cells, Preparation, Screening And Interpretation	$	26.05	
88162	Screening Examination Of Specimen Cells, Extended Study	$	36.10	
88164	Pap Test, Slides, Manual Screening (The Bethesda System)	$	15.92	
88165	Pap Test, Slides, Manual Screening And Rescreening (The Bethesda System)	$	42.22	
88166	Pap Test, Slides, Manual Screening And Computer-Assisted Rescreening (The Bethesda System)	$	15.92	
88167	Pap Test, Slides, Manual Screening And Computer-Assisted Rescreening Using Cell Selection (The Bethesda System)	$	15.92	
88172	Cytopathology, Evaluation Of Fine Needle Aspirate; Immediate Cytohistologic Study To Determine Adequacy For Diagnosis, First Evaluation Episode, Each Site	$	47.74	
88173	Evaluation Of Fine Needle Aspirate With Or Without Preparation Of Smears; Interpretation And Report	$	78.61	
88174	Pap Test, Automated Thin Layer Preparation; Automated System	$	25.37	
88175	Pap Test, Automated Thin Layer Preparation; Automated System And Manual Rescreening	$	26.61	
88177	Pap Test, Evaluation Of Fine Needle Aspirate, Immediate, Each Additional Evaluation Episode	$	30.11	
88182	Flow Cytometry; Cell Cycle Or Dna Analysis	$	60.62	
88184	Flow Cytometry Technique For Dna Or Cell Analysis, First Marker	$	79.33	
88185	Flow Cytometry Technique For Dna Or Cell Analysis, Each Additional Marker	$	47.15	
88187	Flow Cytometry Technique For Dna Or Cell Analysis, 2 To 8 Markers	$	71.84	
88188	Flow Cytometry Technique For Dna Or Cell Analysis, 9 To 15 Markers	$	88.82	
88189	Flow Cytometry Technique For Dna Or Cell Analysis, 16 Or More Markers	$	112.46	
88199	Unlisted Cytopathology Procedure	$	35.61	
88230	Tissue Culture For Non-Neoplastic Disorders; Lymphocyte	$	116.49	
88233	Tissue Culture For Chromosome Analysis; Skin Or Other Solid Tissue Biopsy	$	140.73	
88235	Tissue Culture For Chromosome Analysis; Amniotic Fluid Or Chorionic Villus Cells	$	150.30	
88237	Tissue Culture For Neoplastic Disorders; Bone Marrow, Blood Cells	$	143.75	

88239	Tissue Culture For Neoplastic Disorders; Solid Tumor	$ 147.52	
88240	Cryopreservation, Freezing And Storage Of Cells	$ 13.07	
88241	Thawing And Expansion Of Frozen Cells, Each Aliquot	$ 12.09	
88245	Chromosome Analysis For Genetic Defects, Baseline Sister Chromatid Exchange (Sce), 20-25 Cells	$ 173.17	
88248	Chromosome Analysis For Genetic Defects, Baseline Breakage, Score 50-100 Cells, Count 20 Cells	$ 173.17	
88249	Chromosome Analysis For Genetic Defects, Score 100 Cells, Clastogen Stress	$ 173.17	
88261	Chromosome Analysis For Genetic Defects, Count 5 Cells	$ 264.34	
88262	Chromosome Analysis For Genetic Defects, Count 15-20 Cells	$ 125.49	
88263	Chromosome Analysis For Genetic Defects, Count 45 Cells For Mosaicism	$ 150.29	
88264	Chromosome Analysis For Genetic Defects, Analyze 20-25 Cells	$ 144.61	
88267	Chromosome Analysis, Amniotic Fluid Or Chorionic Villus, Count 15 Cells, 1 Karyotype, With Banding	$ 188.57	
88269	Chromosome Analysis, In Situ For Amniotic Fluid Cells, Count Cells From 6-12 Colonies, 1 Karyotype, With Banding	$ 173.66	
88271	Molecular Cytogenetics; Dna Probe, Each (Eg, Fish)	$ 21.42	
88272	Chromosome Analysis For Genetic Defects, Analyze 3-5 Cells	$ 40.70	
88273	Chromosome Analysis For Genetic Defects, Analyze 10-30 Cells	$ 34.81	
88274	Chromosome Analysis For Genetic Defects, Analyze 25-99 Cells	$ 42.38	
88275	Chromosome Analysis For Genetic Defects, Analyze 100-300 Cells	$ 51.19	
88280	Chromosome Analysis For Genetic Defects, Additional Karyotypes, Each Study	$ 33.47	
88283	Chromosome Analysis For Genetic Defects, Additional Specialized Banding Technique	$ 68.60	
88285	Chromosome Analysis For Genetic Defects, Additional Cells Counted, Each Study	$ 26.91	
88289	Chromosome Analysis For Genetic Defects, Additional High Resolution Study	$ 34.43	
88291	Cytogenetics And Molecular Cytogenetics, Interpretation And Report	$ 6.57	
88299	Unlisted Cytogenetic Study	Price by Report	
88300	Pathology Examination Of Tissue Using A Microscope, Limited Examination	$ 14.43	
88302	Pathology Examination Of Tissue Using A Microscope	$ 22.38	
88304	Pathology Examination Of Tissue Using A Microscope, Moderately Low Complexity	$ 42.06	
88305	Pathology Examination Of Tissue Using A Microscope, Intermediate Complexity	$ 74.67	
88307	Pathology Examination Of Tissue Using A Microscope, Moderately High Complexity	$ 121.30	
88309	Pathology Examination Of Tissue Using A Microscope, High Complexity	$ 177.86	
88311	Decalcification Procedure (List Separately In Addition To Code For Surgical Pathology Examination)	$ 15.11	
88312	Special Stain Including Interpretation And Report; Group I For Microorganisms (Eg, Acid Fast, Methenamine Silver)	$ 93.26	
88313	Special Stain Including Interpretation And Report; Group Ii, All Other (Eg, Iron, Trichrome), Except Stain For Microorganisms, Stains For Enzyme Constituents, Or Immunocytochemistry And Immunohistochemistry	$ 65.46	
88314	Special Stain Including Interpretation And Report; Histochemical Stain On Frozen Tissue Block (List Separately In Addition To Code For Primary Procedure)	$ 28.75	
88319	Special Stain Including Interpretation And Report; Group Iii, For Enzyme Constituents	$ 88.57	
88321	Surgical Pathology Consultation And Report On Referred Slides Prepared Elsewhere	$ 63.14	
88323	Surgical Pathology Consultation And Report On Referred Material Requiring Preparation Of Slides	$ 76.31	
88325	Surgical Pathology Consultation And Report, Comprehensive	$ 100.29	
88329	Pathology Consultation During Surgery;	$ 38.41	
88331	Pathology Examination Of Specimen During Surgery, First Tissue Block	$ 84.64	
88332	Pathology Examination Of Specimen During Surgery, Each Additional Tissue Block	$ 42.08	
88333	Pathology Cytologic Examination Of Specimen During Surgery, Initial Site	$ 96.46	
88334	Pathology Cytologic Examination Of Specimen During Surgery, Each Additional Site	$ 58.83	
88341	Special Stained Specimen Slides To Examine Tissue, Each Additional Procedure	$ 70.96	
88342	Special Stained Specimen Slides To Examine Tissue, Initial Procedure	$ 54.40	
88344	Special Stained Specimen Slides To Examine Tissue, Each Multiplex Procedure	$ 173.15	
88346	Antibody Evaluation, Initial Single Antibody Stain Procedure	$ 101.38	
88348	Electron Microscopy For Diagnosis	$ 138.03	
88350	Antibody Evaluation, Each Additional Single Antibody Stain Procedure	$ 75.50	
88355	Morphometric Analysis; Skeletal Muscle	$ 131.79	
88356	Morphometric Analysis; Nerve	$ 208.06	
88358	Morphometric Analysis; Tumor (Eg, Dna Ploidy)	$ 78.78	
88360	Microscopic Genetic Analysis Of Tumor, Manual	$ 123.86	
88361	Microscopic Genetic Analysis Of Tumor, Using Computer-Assisted Technology	$ 153.56	
88362	Nerve Teasing Preparations	$ 151.37	

88363	Examination Of Archival Tissue For Genetic Analysis	$ 67.15	
88364	Genetic Sequencing Localization, Each Additional Procedure	$ 102.87	
88365	Genetic Sequencing Localization, Initial Procedure	$ 61.35	
88366	Genetic Sequencing Localization, Each Multiplex Procedure	$ 157.95	
88367	Microscopic Genetic Analysis Of Tissue, Computer-Assisted Technology, Initial Procedure	$ 61.35	
88368	Microscopic Genetic Analysis Of Tissue, Manual, Initial Procedure	$ 61.35	
88369	Microscopic Genetic Analysis Of Tissue, Manual, Each Additional Procedure	$ 77.80	
88371	Protein Analysis Of Tissue By Western Blot, With Interpretation And Report;	$ 22.23	
88372	Protein Analysis Of Tissue By Western Blot, With Interpretation And Report	$ 26.22	
88373	Microscopic Genetic Analysis Of Tissue, Computer-Assisted Technology, Each Additional Procedure	$ 63.39	
88374	Microscopic Genetic Analysis Of Tissue, Computer-Assisted Technology, Initial Procedure, Each Multiplex Procedure	$ 217.22	
88375	Microscopic Imaging Using An Endoscope, Interpretation And Report, Real-Time Or Referred, Each Session	$ 45.10	
88377	Microscopic Genetic Analysis Of Tissue, Manual, Each Additional Multiplex Stain Procedure	$ 227.11	
88380	Microdissection (Ie, Sample Preparation Of Microscopically Identified Target); Laser Capture	$ 200.50	
88381	Preparation Of Specimen, Manual	$ 200.71	
88399	Unlisted Surgical Pathology Procedure	Price by Report	
88720	Bilirubin, Total, Transcutaneous	$ 5.02	
88738	Hemoglobin (Hgb), Quantitative, Transcutaneous	$ 5.02	
88740	Hemoglobin Measurement, Per Day	$ 9.37	
88741	Hemoglobin Measurement, Per Day, Methemoglobin	$ 9.37	
88749	Unlisted In Vivo (Eg, Transcutaneous) Laboratory Service	Price by Report	
89049	Test For Malignant Hyperthermia Susceptibility (Genetic Disorder)	$ 247.29	
89050	Cell Count, Miscellaneous Body Fluids (Eg, Cerebrospinal Fluid, Joint Fluid), Except Blood;	$ 4.72	
89051	Cell Count, Miscellaneous Body Fluids (Eg, Csf, Joint Fluid, Except Blood); With Differential	$ 5.60	
89055	White Blood Cell Measure, Stool Specimen	$ 4.27	
89060	Crystal Identification By Light Microscopy With Or Without Polarizing Lens Analysis, Any Body Fluid (Except Urine)	$ 7.33	
89125	Fat Stain Of Stool, Urine, Or Respiratory Secretions	$ 5.88	
89160	Meat Fibers, Feces	$ 4.85	
89190	Nasal Smear For Eosinophils	$ 5.79	
89220	Sputum, Obtaining Specimen, Aerosol Induced Technique (Separate Procedure)	$ 14.59	
89230	Sweat Collection By Iontophoresis	$ 4.25	
89240	Unlisted Miscellaneous Pathology Test	Price by Report	
89398	Unlisted Reproductive Medicine Laboratory Procedure	Price by Report	
0202U	Test For Detection Of Respiratory Disease-Causing Organisms From Back Of Nose And Throat (Nasopharynx) Specimen, 22 Target Organisms Including Severe Acute Respiratory Syndrome Coronavirus 2	$ 416.78	
0223U	Test For Detection Of Respiratory Disease-Causing Organisms From Back Of Nose And Throat (Nasopharynx) Specimen, 22 Target Organisms Including Severe Acute Respiratory Syndrome Coronavirus 2	$ 416.78	
0224U	Measurement Of Antibody To Severe Acute Respiratory Syndrome Coronavirus 2 (Covid-19)	$ 42.13	
0225U	Test For Detection Of Respiratory Disease-Causing Organisms, 21 Target Organisms Including Severe Acute Respiratory Syndrome Coronavirus 2 (Covid-19)	$ 416.78	
0226U	Surrogate Viral Neutralization Test (Svnt) For Detection Of Antibodies To Severe Acute Respiratory Syndrome Coronavirus 2 (Covid-19) By	$ 42.28	
0240U	Infectious Disease (Viral Respiratory Tract Infection), Pathogen-Specific Rna, 3 Targets (Severe Acute Respiratory Syndrome Coronavirus 2 [Sars-Cov-2], Influenza A, Influenza B), Upper Respiratory Specimen, Each Pathogen Reported As Detected Or Not Detected	$ 142.63	
0241U	Infectious Disease (Viral Respiratory Tract Infection), Pathogen-Specific Rna, 4 Targets (Severe Acute Respiratory Syndrome Coronavirus 2 [Sars-Cov-2], Influenza A, Influenza B, Respiratory Syncytial Virus [Rsv]), Upper Respiratory Specimen, Each Pathogen Repo	$ 142.63	
G0103	Prostate Cancer Screening; Prostate Specific Antigen Test (Psa)	$ 19.31	
G0147	Screening Cytopathology Smears, Cervical Or Vaginal, Performed By Automated System Under Physician Supervision	$ 15.92	
G0148	Screening Cytopathology Smears, Cervical Or Vaginal, Performed By Automated System With Manual Rescreening	$ 31.94	
G0306	Complete Cbc, Automated (Hgb, Hct, Rbc, Wbc, Without Platelet Count) And Automated Wbc Differential Count	$ 7.77	
G0307	Complete (Cbc), Automated (Hgb, Hct, Rbc, Wbc; Without Platelet Count)	$ 6.47	
G0471	Collection Of Venous Blood By Venipuncture Or Urine Sample By Catheterization From An Individual In A Skilled Nursing Facility (Snf) Or By A Laboratory On Behalf Of A Home Health Agency (Hha)	$ 5.00	
G0475	Hiv Antigen/Antibody, Combination Assay, Screening	$ 24.08	

G0476	Infectious Agent Detection By Nucleic Acid (Dna Or Rna); Human Papillomavirus (Hpv), High- Risk Types (E.G., 16, 18, 31, 33, 35, 39, 45, 51, 52, 56, 58, 59, 68) For Cervical Cancer Screening, Must Be Performed In Addition To Pap Test	$ 35.09	
G0480	Drug Test(S), Definitive, Utilizing (1) Drug Identification Methods Able To Identify Individual Drugs And Distinguish Between Structural Isomers (But Not Necessarily Stereoisomers), Including, But Not Limited To Gc/Ms (Any Type, Single Or Tandem) And Lc/Ms	$ 114.43	
G0481	Drug Test(S), Definitive, Utilizing (1) Drug Identification Methods Able To Identify Individual Drugs And Distinguish Between Structural Isomers (But Not Necessarily Stereoisomers), Including, But Not Limited To Gc/Ms (Any Type, Single Or Tandem) And Lc/Ms	$ 156.59	
G0482	Drug Test(S), Definitive, Utilizing (1) Drug Identification Methods Able To Identify Individual Drugs And Distinguish Between Structural Isomers (But Not Necessarily Stereoisomers), Including, But Not Limited To Gc/Ms (Any Type, Single Or Tandem) And Lc/Ms	$ 198.74	
G0483	Drug Test(S), Definitive, Utilizing (1) Drug Identification Methods Able To Identify Individual Drugs And Distinguish Between Structural Isomers (But Not Necessarily Stereoisomers), Including, But Not Limited To Gc/Ms (Any Type, Single Or Tandem) And Lc/Ms	$ 246.92	
G0659	Drug Test(S), Definitive, Utilizing Drug Identification Methods Able To Identify Individual Drugs And Distinguish Between Structural Isomers (But Not Necessarily Stereoisomers), Including But Not Limited To Gc/Ms (Any Type, Single Or Tandem) And Lc/Ms	$ 62.14	
G2023	Specimen Collection For Severe Acute Respiratory Syndrome Coronavirus 2 (Sars-Cov-2) (Coronavirus Disease [Covid-19]), Any Specimen Source	$ 23.46	
G2024	Specimen Collection For Severe Acute Respiratory Syndrome Coronavirus 2 (Sars-Cov-2) (Coronavirus Disease [Covid-19]) From An Individual In A Snf Or By A Laboratory On Behalf Of A Hha, Any Specimen Source	$ 25.46	
Q0111	Wet Mounts, Including Preparations Of Vaginal, Cervical Or Skin Specimens	$ 15.92	
Q0112	All Potassium Hydroxide (Koh) Preparations	$ 5.83	
Q0113	Pinworm Examinations	$ 4.27	
Q0114	Fern Test	$ 9.74	
Q0115	Post-Coital Direct, Qualitative Examinations Of Vaginal Or Cervical Mucous	$ 25.00	
S3620	Newborn Metabolic Screening Panel, Includes Test Kit, Postage And The Following Tests: Hemoglobin, Electrophoresis; Hydroxyprogesterone; 17-D; Phenalanine (Pku); And Thyroxine, Total	$ 95.00	
U0001	Cdc 2019 Novel Coronavirus (2019-Ncov) Real-Time Rt-Pcr Diagnostic Panel	$ 35.91	
U0002	2019-Ncov Coronavirus, Sars-Cov-2/2019-Ncov (Covid-19), Any Technique, Multiple Types Or Subtypes (Includes All Targets), Non-Cdc	$ 51.31	
U0003	Infectious Agent Detection By Nucleic Acid (Dna Or Rna); Severe Acute Respiratory Syndrome Coronavirus 2 (Sars-Cov-2) (Coronavirus Disease [Covid-19]), Amplified Probe Technique, Making Use Of High Throughput Technologies As Described By	$ 75.00	
U0004	2019-Ncov Coronavirus, Sars-Cov-2/2019-Ncov (Covid-19), Any Technique, Multiple Types Or Subtypes (Includes All Targets), Non-Cdc, Making Use Of High Throughput Technologies As Described By Cms-2020-01-R	$ 75.00	
U0005	Infectious Agent Detection By Nucleic Acid (Dna Or Rna); Severe Acute Respiratory Syndrome Coronavirus 2 (Sars-Cov-2) (Coronavirus Disease [Covid-19]), Amplified Probe Technique, Cdc Or Non-Cdc, Making Use Of High Throughput Technologies, Com	$ 25.00	