

OUT-PATIENT HOSPITAL LABORATORY BILLING ONLY: UPDATE JANUARY 1, 2018

CPT/HCPCS/CDT = PROCEDURE CODE NUMBER

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CPT/ HCPCS/ CDT/ PRACTITIONER	MOD 1	MOD 2	SHORT - DESCRIPTION	MAXIMUM FEE ALLOWANCE SPECIALIST	MAXIMUM FEE ALLOWANCE NON- SPECIALIST	IND
G0027			SEMAN ANALYSIS	\$2.40		
G0123			SCR CYTO C/V THIN PREP AUTO	\$23.50		
G0141			SCR C/V CYTO AUTOSYS AN M.D.	\$10.00		
G0306			CBC AUTO AGB-RBC-WBC-W-PLAT &	\$5.00		
G0307			HEMOGRAM AUTO W PLATELET COUNT	\$4.80		
G0328			IMMUNOASSAY INFECTIOUS AG QUAL	\$7.00		
G0432			INFECTIOUS AGENT ANTIBODY DETE	\$15.44		
G0433			INFECTIOUS AGENT ANTIBODY DETE	\$15.44		
G0434			DRUG SCREEN, OTH THAN CHROMATO	\$16.38		
G0435			INFECTIOUS AGENT ANTIBODY DETE	\$13.50		
G0461			IMMUNOHISTOCHEMISTRY OR IMMUNO	\$77.88		
G0462			IMMUNOHISTOCHEMISTRY OR IMMUNO	\$60.90		
G0480			DRUG TEST(S) DEFINITIVE UTILIZ	\$63.95		.
G0481			DRUG TEST(S) DEFINITIVE UTILIZ	\$98.39		.
G0482			DRUG TEST(S) DEFINITIVE UTILIZ	\$132.82		.
G0483			DRUG TEST(S), DEFINITIVE, UTIL	\$172.18		.
J0886			INJECTION EPOETIN ALFA(ESRD)10	\$13.31		
P0971			PLASMA (SINGLE DONOR), PATHOGE	COST TO CHARGE		
P3000			SCREENING PAP SMEAR,CERV OR VA	\$6.00		
P3001			SCREENING PAP SMEAR,UP TO 3,RE	\$6.00		
P9010			BLOOD (WHOLE) TRANSUSION PER U	COST TO CHARGE		
P9011			BLOOD S SPLIT/UNIT SPECIFY AMO	COST TO CHARGE		
P9012			CRYOPREIPITATE EACH UNIT	COST TO CHARGE		
P9016			LEUKOCYTE POOR BLOOD, EACH UNI	COST TO CHARGE		
P9017			FRESH FROZEN PLASMA SINGLE	COST TO CHARGE		
P9019			PLATELETS, EACH UNIT	COST TO CHARGE		
P9020			PLATELET RICH PLASMA EACH UNIT	COST TO CHARGE		
P9021			RED BLOOD CELLS EACH UNIT	COST TO CHARGE		
P9022			RED BLOOD CELLS, WASHED EACH U	COST TO CHARGE		
P9023			PLASMA POOLED,MULTIPLE,DONOR F	COST TO CHARGE		
P9031			PLATELETS LEUK RED,EACH UNIT	COST TO CHARGE		
P9032			PLATELETS IRRADIATED EACH UNIT	COST TO CHARGE		
P9033			PLATELETS,LEUKOCYTES IRRADIATE	COST TO CHARGE		
P9034			PLATELETS,PHERESIS,EACH UNIT	COST TO CHARGE		
P9035			PLATELETS,PHERESIS,LEUKOCYTES	COST TO CHARGE		

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P9036			PLATELETS, PHERESIS, IRRADIATED	COST TO CHARGE		
P9037			PLATELETS, PHERESIS, LEUK. RE. IRR	COST TO CHARGE		
P9038			RED BL. CELL, IRRADIATED EACH UN	COST TO CHARGE		
P9039			RED BL. CELL DEGLYCEROLIZED EAC	COST TO CHARGE		
P9040			RED BL. CELLS, LEUK, RE IRR, EACH	COST TO CHARGE		
P9041			INFUSION, ALBUMIN, 5% 50ML	COST TO CHARGE		
P9043			INFUSION, PLASMA PROTEIN FRACTI	COST TO CHARGE		
P9044			PLASMA, CRYOPRECIPITATE REDUCED	COST TO CHARGE		
P9045			INFUSION, ALBUMIN (HUMAN), 5%,	COST TO CHARGE		
P9046			INFUSION, ALBUMIN (HUMAN), 25%,	COST TO CHARGE		
P9047			INFUSION, ALBUMIN (HUMAN), 25%	COST TO CHARGE		
P9051			WHOLE BLOOD OR RED BLOOD CELLS	COST TO CHARGE		
P9052			PLATELETS, HLA-MATCHED LEUKOCY	COST TO CHARGE		
P9053			PLATELETS, PHERESIS, LEUKOCYTE	COST TO CHARGE		
P9056			WHOLE BLOOD, LEUKOCYTES REDUCE	COST TO CHARGE		
P9058			RED BLOOD CELLS, LEUKOCYTES RE	COST TO CHARGE		
P9060			FRESH FROZEN PLASMA, DONOR RET	\$61.08		
P9070			PLASMA, POOLED MULTIPLE DONOR,	COST TO CHARGE		
P9071			PLASMA (SINGLE DONOR), PATHOGE	COST TO CHARGE		
P9072			PLATELETS, PHERESIS, PATHOGEN	COST TO CHARGE		
P9604			TRAVEL ALL. 1 WAY, PROR. TRIP CHA	\$10.00		
Q0111			WET MOUNT, PREP OF VAG. CERVICAL	\$2.40		
Q0112			ALL POTASSIUM HYDROXIDE PREPAR	\$2.40		
Q0113			PINWORM EXAMINATION	\$5.10		
Q0114			FERN TEST	\$9.60		
Q0115			POST-COITAL DIRECT, QUAL EX VAG	\$12.33		
Q4081			INJECTION, EPOETIN ALFA 100 U	\$1.33		
36415			VENIPUNCTURE MULTIPLE PATIENTS	\$1.80		
36416			COLLECTION OF CAPILLARY BLOOD	\$1.80		
36430			TRANSFUSION, BLOOD/BLOOD COMPON	\$13.00		
36440			BLOOD TRANSFUSION SERVICE	\$30.00		
36450			EXCHANGE TRANSFUSION SERVICE	\$100.80		
36455			EXCHANGE TRANSFUSION SERVICE	\$98.53		
36460			TRANSFUSION SERVICE, FETAL	\$151.00		
36516			THERAPEUTIC Apheresis EXT SEL	\$49.00		

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80047			BASIC METABOLIC PANEL (CALCIUM	\$9.23		
80048			BASIC METABOLIC PANEL	\$9.30		
80050			GENERAL HEALTH SCREEN PANEL	\$36.00		
80051			ELECTROLYTE PANEL	\$5.90		
80053			COMP METABOLIC PANEL	\$10.50		
80055			OBSTETRIC PROFILE	\$15.00		
80061			LIPID PROFILE	\$15.00		
80069			RENAL FUNCTION PANEL	\$9.60		
80074			ACUTE HEPATITIS PANEL	\$30.00		
80076			HEPATIC FUNCTION PANEL	\$7.00		
80081			BLOOD TEST PANEL FOR OBSTETRIC	\$82.15		
80150			AMIKACIN	\$15.00		
80155			CAFFEINE LEVEL	\$15.52		
80156			CARBAMAZEPINE	\$15.90		
80157			CARBAMAZEPINE:FREE	\$10.00		
80158			CYCLOSPORINE	\$20.00		
80159			CLOZAPINE LEVEL	\$16.15		
80162			DIGOXIN	\$15.00		
80163			DIGOXIN LEVEL	\$14.57		
80164			DIPROPYLACETIC ACID (VALPROIC	\$10.00		
80165			VALPROIC ACID LEVEL	\$10.65		
80168			ETHOSUXIMIDE	\$18.00		
80169			EVEROLIMUS LEVEL	\$15.07		
80170			GENTAMICIN	\$12.60		
80171			GABAPENTIN LEVEL	\$11.58		
80173			HALOPERIDOL	\$16.10		
80175			LAMOTRIGINE LEVEL	\$14.54		
80176			LIDOCAINE	\$18.00		
80177			LEVETIRACETAM LEVEL	\$14.54		
80178			LITHIUM	\$9.00		
80180			MYCOPHENOLATE (MYCOPHENOLIC AC	\$15.76		
80183			OXCARBAZEPINE LEVEL	\$14.54		
80184			PHENOBARBITAL	\$12.80		
80185			PHENYTOIN: TOTAL	\$14.65		
80186			PHENOIN, FREE	\$15.02		

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80188			PRIMIDONE	\$20.00		
80190			PROCAINAMIDE	\$15.00		
80192			PROCAINAMIDE,WITH METABOLITES	\$15.00		
80194			QUINIDINE	\$15.00		
80195			SIROLIMYS	\$14.98		
80197			TACROLIMUS	\$15.00		
80198			THEOPHYLLINE	\$15.00		
80199			TIAGABINE LEVEL	\$19.82		
80200			TOBRAMYCIN	\$12.60		
80201			TROPRIAMATE	\$12.00		
80202			VANCOMYCIN	\$12.00		
80203			ZONISAMIDE LEVEL	\$14.54		
80299			QUANT.DRUG NOT ELSEWHERE SPECI	\$10.80		
80305			TESTING FOR PRESENCE OF DRUG	\$16.18		
80306			TESTING FOR PRESENCE OF DRUG	\$21.58		
80307			TESTING FOR PRESENCE OF DRUG	\$86.28		
80320			ALCOHOLS LEVELS	COST TO CHARGE		
80321			ALCOHOLS LEVELS	COST TO CHARGE		
80322			ALCOHOLS LEVELS	COST TO CHARGE		
80323			ALKALOIDS LEVELS	COST TO CHARGE		
80324			AMPHETAMINES LEVELS	COST TO CHARGE		
80325			AMPHETAMINES LEVELS	COST TO CHARGE		
80326			AMPHETAMINES LEVELS	COST TO CHARGE		
80327			ANABOLIC STEROIDS LEVELS	COST TO CHARGE		
80328			ANABOLIC STEROIDS LEVELS	COST TO CHARGE		
80329			ANALGESICS LEVELS	COST TO CHARGE		
80330			ANALGESICS LEVELS	COST TO CHARGE		
80331			ANALGESICS LEVELS	COST TO CHARGE		
80332			ANTIDEPRESSANTS LEVELS	COST TO CHARGE		
80333			ANTIDEPRESSANTS LEVELS	COST TO CHARGE		
80334			ANTIDEPRESSANTS LEVELS	COST TO CHARGE		
80335			ANTIDEPRESSANTS LEVELS	COST TO CHARGE		
80336			ANTIDEPRESSANTS LEVELS	COST TO CHARGE		
80337			ANTIDEPRESSANTS LEVELS	COST TO CHARGE		
80338			ANTIDEPRESSANTS LEVELS	COST TO CHARGE		

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80339			ANTIEPILEPTICS LEVELS	COST TO CHARGE		
80340			ANTIEPILEPTICS LEVELS	COST TO CHARGE		
80341			ANTIEPILEPTICS LEVELS	COST TO CHARGE		
80342			ANTIPSYCHOTICS LEVELS	COST TO CHARGE		
80343			ANTIPSYCHOTICS LEVELS	COST TO CHARGE		
80344			ANTIPSYCHOTICS LEVELS	COST TO CHARGE		
80345			BARBITURATES LEVELS	COST TO CHARGE		
80346			BENZODIAZEPINES LEVELS	COST TO CHARGE		
80347			BENZODIAZEPINES LEVELS	COST TO CHARGE		
80348			BUPRENORPHINE LEVEL	COST TO CHARGE		
80349			CANNABINOIDS LEVELS	COST TO CHARGE		
80350			CANNABINOIDS LEVELS	COST TO CHARGE		
80351			CANNABINOIDS LEVELS	COST TO CHARGE		
80352			CANNABINOIDS LEVELS	COST TO CHARGE		
80353			COCAINE LEVEL	COST TO CHARGE		
80354			FENTANYL LEVEL	COST TO CHARGE		
80355			GABAPENTIN LEVEL NON-BLOOD	COST TO CHARGE		
80356			HEROIN METABOLITE LEVEL	COST TO CHARGE		
80357			KETAMINE AND NORKETAMINE LEVEL	COST TO CHARGE		
80358			METHADONE LEVEL	COST TO CHARGE		
80359			METHYLENEDIOXYAMPHETAMINES LEV	COST TO CHARGE		
80360			METHYLPHENIDATE LEVEL	COST TO CHARGE		
80361			OPIATES LEVELS	COST TO CHARGE		
80362			OPIOIDS LEVELS	COST TO CHARGE		
80363			OPIOIDS LEVELS	COST TO CHARGE		
80364			OPIOIDS LEVELS	COST TO CHARGE		
80365			OXYCODONE LEVELS	COST TO CHARGE		
80366			PREGABALIN LEVEL	COST TO CHARGE		
80367			PROPOXYPHENE LEVEL	COST TO CHARGE		
80368			SEDATIVE HYPNOTICS (NON-BENZOD	COST TO CHARGE		
80369			SKELETAL MUSCLE RELAXANTS LEVE	COST TO CHARGE		
80370			SKELETAL MUSCLE RELAXANTS LEVE	COST TO CHARGE		
80371			SYNTHETIC STIMULANTS LEVELS	COST TO CHARGE		
80372			TAPENTADOL LEVEL	COST TO CHARGE		
80373			TRAMADOL LEVEL	COST TO CHARGE		

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80374			STEREOISOMER (ENANTIOMER) DRUG	COST TO CHARGE		
80375			DRUGS OR SUBSTANCES MEASUREMEN	COST TO CHARGE		
80376			DRUGS OR SUBSTANCES MEASUREMEN	COST TO CHARGE		
80377			DRUGS OR SUBSTANCES MEASUREMEN	COST TO CHARGE		
80400			ACTH STIM PANEL:FOR ADRENAL IN	\$34.00		
80402			ACTH STIM.P.:21 HYDROXYLASE DE	\$96.00		
80406			ACTH STIM.P.:3 BETA-HYDRO.DEF.	\$98.00		
80408			ALDOST:SUPP.EVAL.PANEL	\$130.00		
80410			CALCIUM-PENTAGASTRIN-STIM.PANE	\$102.00		
80412			CORTICOTROPIC REL.HORMONE PANE	COST TO CHARGE		
80414			CHDRIONIC GONADOTROPHIN PANEL	\$61.00		
80415			CHORIONIC GONAD.P.ESTRADIOL RE	\$50.00		
80416			RENAL VEIN RENIN STIM.P.CAPTOP	\$150.00		
80417			PERIPHERAL VEIN RENIN STIM.P.C	\$50.00		
80418			COMB.RAPIAD ANTERIOR PIT. PANE	COST TO CHARGE		
80420			DEXAMETHASONE SUPP. PANEL, 48	\$74.00		
80422			GLUCAGON TOLERANCE PANEL:INSUL	\$45.00		
80424			GLUCAGON TOLERANCE PANEL:PHEOC	\$33.00		
80426			GONADO.REL.HORMONE STIM.PANEL	\$130.00		
80428			GROWTH HOR.STIM.P.ARGININE INF	\$60.00		
80430			GROWTH.HORMONE SUPP.P.GLUKOSE	\$73.00		
80432			INSULIN-IN.C-PEPTIDE SUPP.PANE	\$125.00		
80434			INS.TOLERANCE PANEL:ACTH INSUF	\$100.00		
80435			INS.TOLERANCE PANEL:GROWTH HOR	\$95.00		
80436			METYRAPONE PANEL	\$75.00		
80438			THYROTROPIN REL.HORMONE ONE HO	\$50.00		
80439			THYROTROPIN REL.HORMONE 2 HRS	\$74.27		
80500			CLINICAL PATH CONSULT:LIMITED	COST TO CHARGE		
80502			CLINICAL PATH CONSULT:COMPREHE	COST TO CHARGE		
81000			URINALYSIS WITH MICROSCOPY	\$1.20		
81001			URINALYSIS,AUTOMATED W.MICROSC	\$1.20		
81002			ROUTINE URINE ANALYSIS	\$1.00		
81003			URINALYSIS WITHOUT MICR AUTOMA	\$1.50		
81005			URINALYSIS,QUAL OR SEMI-QUANT	\$1.00		
81007			URINE BACTERIURIA SR NON-CULT	\$2.84		

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81015			MICROSCOPIC EXAM OF URINE	\$0.40		
81020			URINALYSIS, GLASS TEST	\$4.30		
81025			URINE PREG. TEST:VISUAL COLOR	\$3.00		
81050			VOL.MEAS.TIMED COLLECTION, EAC	\$3.40		
81099			UNLISTED URINALYSIS PROCEDURE	COST TO CHARGE		
81161			GENE ANALYSIS (DYSTROPHIN)	\$0.00		
81162			GENE ANALYSIS (BREAST CANCER 1	\$2,002.61		
81170			GENE ANALYSIS (ABL PROTO-ONCOG	\$265.46		
81200			ASPA (ASPARTOACYLASE) (EG, CAN	COST TO CHARGE		
81201			APC (ADENOMATOUS POLYPOSIS COL	COST TO CHARGE		
81202			APC (ADENOMATOUS POLYPOSIS COL	COST TO CHARGE		
81203			APC (ADENOMATOUS POLYPOSIS COL	COST TO CHARGE		
81205			BCKDHB (BRANCHED-CHAIN KETO AC	COST TO CHARGE		
81206			BCR/ABL1 (T(9:22)) (EG, CHRONI	COST TO CHARGE		
81207			BCR/ABL1 (T(9:22)) (EG, CHRONI	COST TO CHARGE		
81208			BCR/ABL1 (T(9:22)) (EG, CHRONI	COST TO CHARGE		
81209			BLM (BLOOM SYNDROME, RECQ HELI	COST TO CHARGE		
81210			BRAF (V-RAF MURINE SARCOMA VIR	COST TO CHARGE		
81211			BRCA1, BRCA2 (BREAST CANCER 1	COST TO CHARGE		
81212			BRCA1, BRCA2 (BREAST CANCER 1	COST TO CHARGE		
81213			BRCA1, BRCA2 (BREAST CANCER 1	COST TO CHARGE		
81214			BRCA1 (BREAST CANCER 1) (EG, H	COST TO CHARGE		
81215			BRCA1 (BREAST CANCER 1) (EG, H	COST TO CHARGE		
81216			BRCA2 (BREAST CANCER 2) (EG, H	COST TO CHARGE		
81217			BRCA2 (BREAST CANCER 2) (EG, H	COST TO CHARGE		
81218			GENE ANALYSIS (CCAAT/ENHANCER	\$265.46		
81219			GENE ANALYSIS (CALRETICULIN),	\$133.47		
81220			CFTR (CYSTIC FIBROSIS TRANSMEM	COST TO CHARGE		
81221			CFTR (CYSTIC FIBROSIS TRANSMEM	COST TO CHARGE		
81222			CFTR (CYSTIC FIBROSIS TRANSMEM	COST TO CHARGE		
81223			CFTR (CYSTIC FIBROSIS TRANSMEM	COST TO CHARGE		
81224			CFTR (CYSTIC FIBROSIS TRANSMEM	COST TO CHARGE		
81225			CYP2C19 (CYTOCHROME P450, FAMI	COST TO CHARGE		
81226			CYP2D6 (CYTOCHROME P450, FAMIL	COST TO CHARGE		
81227			CYP2C9 (CYTOCHROME P450, FAMIL	COST TO CHARGE		

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CPT/ HCPCS/ CDT/ PRACTITIONER	MOD 1	MOD 2	SHORT - DESCRIPTION	MAXIMUM FEE ALLOWANCE SPECIALIST	MAXIMUM FEE ALLOWANCE NON- SPECIALIST	IND
81228			CYTOGENOMIC CONSTITUTIONAL (GE	COST TO CHARGE		
81229			CYTOGENOMIC CONSTITUTIONAL (GE	COST TO CHARGE		
81235			EGFR (EPIDERMAL GROWTH FACTOR	COST TO CHARGE		
81240			F2 (PROTHROMBIN, COAGULATION F	COST TO CHARGE		
81241			F5 (COAGULATION FACTOR V) (EG,	COST TO CHARGE		
81242			FANCC (FANCONI ANEMIA, COMPLEM	COST TO CHARGE		
81243			FMR1 (FRAGILE X MENTAL RETARDA	COST TO CHARGE		
81244			FMR1 (FRAGILE X MENTAL RETARDA	COST TO CHARGE		
81245			FLT3 (FMS-RELATED TYROSINE KIN	COST TO CHARGE		
81246			TEST FOR DETECTING GENES ASSOC	COST TO CHARGE		
81250			G6PC (GLUCOSE-6-PHOSPHATASE, C	COST TO CHARGE		
81251			GBA (GLUCOSIDASE, BETA, ACID)	COST TO CHARGE		
81252			GJB2 (GAP JUNCTION PROTEIN, BE	COST TO CHARGE		
81253			GJB2 (GAP JUNCTION PROTEIN, BE	COST TO CHARGE		
81254			GJB6 (GAP JUNCTION PROTEIN, BE	COST TO CHARGE		
81255			HEXA (HEXOSAMINIDASE A [ALPHA	COST TO CHARGE		
81256			HFE (HEMOCHROMATOSIS) (EG, HER	COST TO CHARGE		
81257			HBA1/HBA2 (ALPHA GLOBIN 1 AND	COST TO CHARGE		
81260			IKBKAP (INHIBITOR OF KAPPA LIG	COST TO CHARGE		
81261			IGH@ (IMMUNOGLOBULIN HEAVY CHA	COST TO CHARGE		
81262			IGH@ (IMMUNOGLOBULIN HEAVY CHA	COST TO CHARGE		
81263			IGH@ (IMMUNOGLOBULIN HEAVY CHA	COST TO CHARGE		
81264			IGK@ (IMMUNOGLOBULIN KAPPA LIG	COST TO CHARGE		
81265			COMPARATIVE ANALYSIS USING SHO	COST TO CHARGE		
81266			COMPARATIVE ANALYSIS USING SHO	COST TO CHARGE		
81267			CHIMERISM (ENGRAFTMENT) ANALYS	COST TO CHARGE		
81268			CHIMERISM (ENGRAFTMENT) ANALYS	COST TO CHARGE		
81270			JAK2 (JANUS KINASE 2) (EG, MYE	COST TO CHARGE		
81272			GENE ANALYSIS (V-KIT HARDY-ZUC	\$265.46		
81273			GENE ANALYSIS (V-KIT HARDY-ZUC	\$100.59		
81275			KRAS (V-KI-RAS2 KIRSTEN RAT SA	COST TO CHARGE		
81276			GENE ANALYSIS (KIRSTEN RAT SAR	\$158.86		
81287			MGMT (O-6-METHYLGUANINE-DNA ME	COST TO CHARGE		
81288			TEST FOR DETECTING GENES ASSOC	COST TO CHARGE		
81290			MCOLN1 (MUCOLIPIN 1) (EG, MUCO	COST TO CHARGE		

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81291			MTHFR (5,10-METHYLENETETRAHYDR	COST TO CHARGE		
81292			MLH1 (MUTL HOMOLOG 1, COLON CA	COST TO CHARGE		
81293			MLH1 (MUTL HOMOLOG 1, COLON CA	COST TO CHARGE		
81294			MLH1 (MUTL HOMOLOG 1, COLON CA	COST TO CHARGE		
81295			MSH2 (MUTS HOMOLOG 2, COLON CA	COST TO CHARGE		
81296			MSH2 (MUTS HOMOLOG 2, COLON CA	COST TO CHARGE		
81297			MSH2 (MUTS HOMOLOG 2, COLON CA	COST TO CHARGE		
81298			MSH6 (MUTS HOMOLOG 6 [E. COLI]	COST TO CHARGE		
81299			MSH6 (MUTS HOMOLOG 6 [E. COLI]	COST TO CHARGE		
81300			MSH6 (MUTS HOMOLOG 6 [E. COLI]	COST TO CHARGE		
81301			MICROSATELLITE INSTABILITY ANA	COST TO CHARGE		
81302			MECP2 (METHYL CPG BINDING PROT	COST TO CHARGE		
81303			MECP2 (METHYL CPG BINDING PROT	COST TO CHARGE		
81304			MECP2 (METHYL CPG BINDING PROT	COST TO CHARGE		
81310			NPM1 (NUCLEOPHOSMIN) (EG, ACUT	COST TO CHARGE		
81311			GENE ANALYSIS FOR CANCER (NEUR	\$238.29		
81313			TEST FOR DETECTING GENES ASSOC	COST TO CHARGE		
81314			GENE ANALYSIS ((PLATELET-DERIV	\$265.46		
81315			PML/RARALPHA, (T(15:17)), (PRO	COST TO CHARGE		
81316			PML/RARALPHA, (T(15:17)), (PRO	COST TO CHARGE		
81317			PMS2 (POSTMEIOTIC SEGREGATION	COST TO CHARGE		
81318			PMS2 (POSTMEIOTIC SEGREGATION	COST TO CHARGE		
81319			PMS2 (POSTMEIOTIC SEGREGATION	COST TO CHARGE		
81321			PTEN (PHOSPHATASE AND TENSIN H	COST TO CHARGE		
81322			PTEN (PHOSPHATASE AND TENSIN H	COST TO CHARGE		
81323			PTEN (PHOSPHATASE AND TENSIN H	COST TO CHARGE		
81324			PMP22 (PERIPHERAL MYELIN PROTE	COST TO CHARGE		
81325			PMP22 (PERIPHERAL MYELIN PROTE	COST TO CHARGE		
81326			PMP22 (PERIPHERAL MYELIN PROTE	COST TO CHARGE		
81327			METHYLATION ANALYSIS (SEPTIN9)	\$66.94		
81330			SMPD1(SPHINGOMYELIN PHOSPHODIE	COST TO CHARGE		
81331			SNRPN/UBE3A (SMALL NUCLEAR RIB	COST TO CHARGE		
81332			SERPINA1 (SERPIN PEPTIDASE INH	COST TO CHARGE		
81340			TRB@ (T CELL ANTIGEN RECEPTOR,	COST TO CHARGE		
81341			TRB@ (T CELL ANTIGEN RECEPTOR,	COST TO CHARGE		

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81342			TRG@ (T CELL ANTIGEN RECEPTOR,	COST TO CHARGE		
81350			UGT1A1 (UDP GLUCURONOSYLTRANSF	COST TO CHARGE		
81355			VKORC1 (VITAMIN K EPOXIDE REDU	COST TO CHARGE		
81370			HLA CLASS I AND II TYPING, LOW	COST TO CHARGE		
81371			HLA CLASS I AND II TYPING, LOW	COST TO CHARGE		
81372			HLA CLASS I TYPING, LOW RESOLU	COST TO CHARGE		
81373			HLA CLASS I TYPING, LOW RESOLU	COST TO CHARGE		
81374			HLA CLASS I TYPING, LOW RESOLU	COST TO CHARGE		
81375			HLA CLASS II TYPING, LOW RESOL	COST TO CHARGE		
81376			HLA CLASS II TYPING, LOW RESOL	COST TO CHARGE		
81377			HLA CLASS II TYPING, LOW RESOL	COST TO CHARGE		
81378			HLA CLASS I AND II TYPING, HIG	COST TO CHARGE		
81379			HLA CLASS I TYPING, HIGH RESOL	COST TO CHARGE		
81380			HLA CLASS I TYPING, HIGH RESOL	COST TO CHARGE		
81381			HLA CLASS I TYPING, HIGH RESOL	COST TO CHARGE		
81382			HLA CLASS II TYPING, HIGH RESO	COST TO CHARGE		
81383			HLA CLASS II TYPING, HIGH RESO	COST TO CHARGE		
81400			MOLECULAR PATHOLOGY PROCEDURE,	COST TO CHARGE		
81401			MOLECULAR PATHOLOGY PROCEDURE,	COST TO CHARGE		
81402			MOLECULAR PATHOLOGY PROCEDURE,	COST TO CHARGE		
81403			MOLECULAR PATHOLOGY PROCEDURE,	COST TO CHARGE		
81404			MOLECULAR PATHOLOGY PROCEDURE,	COST TO CHARGE		
81405			MOLECULAR PATHOLOGY PROCEDURE,	COST TO CHARGE		
81406			MOLECULAR PATHOLOGY PROCEDURE,	COST TO CHARGE		
81407			MOLECULAR PATHOLOGY PROCEDURE,	COST TO CHARGE		
81408			MOLECULAR PATHOLOGY PROCEDURE,	COST TO CHARGE		
81410			TEST FOR DETECTING GENES ASSOC	COST TO CHARGE		
81411			TEST FOR DETECTING GENES ASSOC	COST TO CHARGE		
81412			TEST FOR DETECTING GENES FOR D	COST TO CHARGE		
81413			TEST FOR DETECTING GENES ASSOC	\$641.86		
81414			TEST FOR DETECTING GENES ASSOC	\$641.86		
81415			TEST FOR DETECTING GENES ASSOC	COST TO CHARGE		
81416			TEST FOR DETECTING GENES ASSOC	COST TO CHARGE		
81417			REEVALUATION TEST FOR DETECTIN	COST TO CHARGE		
81420			TEST FOR DETECTING GENES ASSOC	COST TO CHARGE		

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81422			TEST FOR DETECTING GENES ASSOC	\$641.86		
81425			TEST FOR DETECTING GENES ASSOC	COST TO CHARGE		
81426			TEST FOR DETECTING GENES ASSOC	COST TO CHARGE		
81427			REEVALUATION TEST FOR DETECTIN	COST TO CHARGE		
81430			TEST FOR DETECTING GENES CAUSI	COST TO CHARGE		
81431			TEST FOR DETECTING GENES CAUSI	COST TO CHARGE		
81432			GENE ANALYSIS (BREAST AND RELA	COST TO CHARGE		
81433			GENE ANALYSIS (BREAST AND RELA	COST TO CHARGE		
81434			GENE ANALYSIS (RETINAL DISORDE	COST TO CHARGE		
81435			TEST FOR DETECTING GENES ASSOC	COST TO CHARGE		
81436			TEST FOR DETECTING GENES ASSOC	COST TO CHARGE		
81437			GENE ANALYSIS (NEUROENDOCRINE	COST TO CHARGE		
81438			GENE ANALYSIS (NEUROENDOCRINE	COST TO CHARGE		
81439			TEST FOR DETECTING GENES ASSOC	\$0.00		
81440			TEST FOR DETECTING GENES	COST TO CHARGE		
81442			GENE ANALYSIS (NOONAN SYNDROME	COST TO CHARGE		
81445			TEST FOR DETECTING GENES ASSOC	COST TO CHARGE		
81450			TEST FOR DETECTING GENES ASSOC	COST TO CHARGE		
81455			TEST FOR DETECTING GENES ASSOC	COST TO CHARGE		
81460			TEST FOR DETECTING GENES ASSOC	COST TO CHARGE		
81465			TEST FOR DETECTING GENES ASSOC	COST TO CHARGE		
81470			TEST FOR DETECTING GENES ASSOC	COST TO CHARGE		
81471			TEST FOR DETECTING GENES ASSOC	COST TO CHARGE		
81479			UNLISTED MOLECULAR PATHOLOGY P	COST TO CHARGE		
81490			TEST FOR DETECTING GENES ASSOC	COST TO CHARGE		
81493			TEST FOR DETECTING GENES ASSOC	COST TO CHARGE		
81500			ONCOLOGY (OVARIAN), BIOCHEMICA	COST TO CHARGE		
81503			ONCOLOGY (OVARIAN), BIOCHEMICA	COST TO CHARGE		
81504			GENETIC PROFILING ON ONCOLOGY	COST TO CHARGE		
81506			ENDOCRINOLOGY (TYPE 2 DIABETES	COST TO CHARGE		
81507			DNA ANALYSIS USING MATERNAL PL	COST TO CHARGE		
81508			FETAL CONGENITAL ABNORMALITIES	COST TO CHARGE		
81509			FETAL CONGENITAL ABNORMALITIES	COST TO CHARGE		
81510			FETAL CONGENITAL ABNORMALITIES	COST TO CHARGE		
81511			FETAL CONGENITAL ABNORMALITIES	COST TO CHARGE		

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81512			FETAL CONGENITAL ABNORMALITIES	COST TO CHARGE		
81519			TEST FOR DETECTING GENES ASSOC	COST TO CHARGE		
81525			GENE ANALYSIS (COLON RELATED C	COST TO CHARGE		
81528			GENE ANALYSIS (COLORECTAL CANC	\$409.94		
81535			CULTURE OF LIVE TUMOR CELLS AN	\$466.82		
81536			CULTURE OF LIVE TUMOR CELLS AN	\$143.04		
81538			TESTING OF LUNG TUMOR CELLS FO	COST TO CHARGE		
81539			MEASUREMENT OF PROTEINS ASSOCI	\$481.68		
81540			GENE ANALYSIS (CANCER)	COST TO CHARGE		
81545			GENE ANALYSIS (THYROID CANCER)	COST TO CHARGE		
81595			TEST FOR DETECTING GENES ASSOC	COST TO CHARGE		
81599			UNLISTED MULTIANALYTE ASSAY WI	COST TO CHARGE		
82009			ACETONE OR OTHER KETONE BODIES	\$5.00		
82010			ACETONE OR OTHER KETONE SERUM	\$9.90		
82013			ACETYLCHOLINESTERASE ASSAY	\$14.00		
82016			ACYLCARNITINES:QUAL EACH SPEC	\$12.90		
82017			ACYLCARNITINES:QUANT EACH SPEC	\$18.60		
82024			ACTH RADIOIMMUNE ASSAY	\$30.00		
82030			RIA ASSAY, BLOOD ADP & AMP	\$34.00		
82040			ASSAY SERUM ALBUMIN	\$1.80		
82042			ALBUMIN, URINE QUANT.	\$2.43		
82043			ALBUMIN:URINE MIRCO QUANTITATI	\$4.30		
82044			ALBUMIN:URINE MICRO SEMIQUANTI	\$1.00		
82045			ALBUMIN:ISCHEMIA MODIFIED	\$37.25		
82075			ASSAY BREATH ETHANOL	\$8.80		
82085			ALDOLASE	\$11.00		
82088			ALDOSTERONE	\$40.00		
82103			ALPHA-1-ANTITRYPSIN: TOTAL	\$7.80		
82104			ALPHA-1-ANTITRYPSIN: PHENOTYPE	\$7.80		
82105			ALPHA-FETOPROTEIN: SERUM	\$10.20		
82106			ALPHA-FETOPROTEIN: AMNIOTIC FL	\$10.20		
82107			ALPHA-FETOPROTEIN (AFP):AFP-L3	\$70.69		
82108			ALUMINUM,	\$28.17		
82120			AMINES VAG FLUID, QUAL	COST TO CHARGE		
82127			AMINO ACIDS:SINGLE,QUAL. EACH	\$12.90		

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82128			TEST FOR AMINO ACIDS	\$12.90		
82131			AMINO ACIDS FRACT & QUANT EACH	\$18.64		
82135			ASSAY, AMINOLEVULINIC ACID	\$20.00		
82136			AMINO ACIDS 2TO5 QUANT. EACH S	\$18.64		
82139			AMINO ACIDS 6 OR MORE QUANT EA	\$18.64		
82140			AMMONIA	\$6.00		
82143			AMNIOTIC FLUID SCAN	\$4.20		
82150			AMYLASE	\$4.50		
82154			ANDROSTANEDIOL GLUCURONIED	\$31.88		
82157			ANDROSTENDIONE	\$29.00		
82160			ANDROSTERONE:	\$27.65		
82163			ANGIOTENSIN II	\$21.00		
82164			ANGIOTENSIN-CONVERTING ENZYME	\$20.00		
82172			APOLIPOPROTEIN, EACH	\$20.00		
82173			ARGININE TOLERANCE TEST	\$11.20		
82175			ARSENIC	\$7.20		
82180			ASSAY OF ASCORBIC ACID	\$3.60		
82190			ATOMIC ABSORPTION SPECTR.,EACH	COST TO CHARGE		
82232			BETA-2 MICROGLOBULIN,	\$17.80		
82239			BILE ACIDS, TOTAL	\$20.00		
82240			CHOLYLGLYCINE	\$5.69		
82247			BILIRUBIN:TOTAL	\$3.00		
82248			BILIRUBIN:DIRECT	\$4.50		
82252			FECAL BILIRUBIN TEST	\$2.50		
82261			BIOTINIDASE EACH SPEC	\$18.64		
82270			TEST FECES FOR BLOOD	\$3.63		
82271			BLOOD OCCULT: OTHER SOURCE	\$3.57		
82272			BLLD OCCULT QUAL.DIGITA EXAM	\$3.57		
82274			BLOOD OCCULT HGB DETERMINATION	\$3.70		
82286			ASSAY OF BRADYKININ	\$7.60		
82300			CADMIUM	\$28.00		
82306			CALCIFEDIOL,(25-OH VIT D-3)	\$30.00		
82308			CALCTONIN	\$34.00		
82310			ASSAY CALCIUM IN BLOOD,TOTAL	\$3.00		
82330			ASSAY CALCIUM IN BLOOD	\$14.70		

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82331			ASSAY CALCIUM IN BLD:AFT CAL I	\$5.72		
82340			CALCIUM,URINE,QUANT.TIMED	\$3.60		
82355			CALCULUS (STONE) ANALYSIS,QUAL	\$9.00		
82360			CALCULUS (STONE) ASSAY, QUANT	\$12.00		
82365			CALCULUS (STONE) INFRARED SPEC	\$9.00		
82370			X-RAY ASSAY,CALCULUS (STONE)	\$9.00		
82373			CARBOHYDRATE DEFICIENT TRANSFE	\$7.95		
82374			CARBON DIOXIDE (BICARBONATE)	\$3.30		
82375			ASSAY BLOOD CARBON MONOXIDE	\$6.00		
82376			TEST FOR CARBON MONOXIDE QUAL.	\$3.00		
82378			CARCINOEMBRYONIC ANTIGEN (CEA)	\$22.40		
82379			CARNITINE T/F EACH SPEC	\$18.64		
82380			CAROTENE	\$6.00		
82382			URINE CATECHOLAMINES, TO	\$12.00		
82383			ASSAY BLOOD CATECHOLAMINES	\$12.00		
82384			ASSAY THREE CATECHOLAMINES	\$18.00		
82387			CATHEPSIN-D	\$24.00		
82390			BLOOD CERULOPLASMIN	\$6.00		
82397			CHEMILUMINESCENT ASSAY	\$15.42		
82415			BLOOD CHLORAMPHENICOL	\$15.00		
82435			CHLORIDES, BLOOD	\$3.00		
82436			CHLORIDES,URINE	\$3.00		
82438			ASSAY SPINAL FLUID CHLORIDES	\$3.00		
82441			TEST FOR CHLOROHYDROCARBONS	\$8.00		
82443			ASSAY OF THIAZIDE	\$22.00		
82465			ASSAY SERUM CHOLESTEROL	\$3.00		
82480			ASSAY SERUM CHOLINESTERASE	\$4.50		
82482			ASSAY RBC CHOLINESTERASE	\$10.00		
82485			ASSAY CHONDROITIN SULFATE	\$28.00		
82486			GAS/LIQUID CHROMATOGRAPHY	\$4.40		
82487			PAPER CHROMATOGRAPHY	\$4.00		
82488			PAPER CHROMATOGRAPHY	\$15.00		
82489			THIN LAYER CHROMATOGRAPHY	\$15.00		
82491			CHROM.QUANT.COLUMN ANALYTE NOT	\$21.50		
82492			CHROMATOGRAPHY,OUANT COL MULTI	\$21.50		

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CPT/ HCPCS/ CDT/ PRACTITIONER	MOD 1	MOD 2	SHORT - DESCRIPTION	MAXIMUM FEE ALLOWANCE SPECIALIST	MAXIMUM FEE ALLOWANCE NON- SPECIALIST	IND
82495			CHROMIUM	\$9.66		
82507			ASSAY CITRIC ACID	\$37.00		
82523			COLLAGEN CROSSLINK ANY METHOD	\$11.86		
82525			COPPER	\$9.00		
82528			CORTICOSTERONE	\$19.70		
82530			CORTISOL: FREE	\$17.00		
82533			CORTISOL,TOTAL	\$17.00		
82540			BLOOD	\$3.00		
82541			COL CHROM/MASS/SPEC/EG/GC/MS O	\$4.40		
82542			COL/CHROM/MASS/SPEC SINGL/S MP	\$21.50		
82543			STABLE ISOTOPE/DIL/SINGLE/ANAL	\$21.50		
82544			STABLE/ISO/DIL/MUTIPLE/ANA/QUA	\$21.50		
82550			CREATINE KINASE (CK),(CPK),TOT	\$4.80		
82552			ISOENZYMES	\$7.80		
82553			CREATINE KINASE MB FRACTION ON	\$7.50		
82554			CREATINE KINASE ISOFORMS	\$16.00		
82565			CREATININE	\$3.00		
82570			ASSAY URINE CREATININE	\$3.00		
82575			CREATININE CLEARANCE TEST	\$4.50		
82585			ASSAY BLOOD CRYOFIBRINOGEN	\$6.30		
82595			CRYOGLOBULIN	\$1.50		
82600			CYANIDE	\$25.00		
82607			CYANCOBALAMIN (VITAMIN B-12)	\$15.00		
82608			CYANOCOBALAMIN:UNSAT.BIND CAPA	\$15.00		
82610			CYSTATIN C	\$14.92		
82615			TEST FOR URINE CYSTINES	\$11.00		
82626			DEHYDROEPIANDROSTERONE, (DHEA)	\$29.60		
82627			DEHYDROEPIANDROSTERONE-SULFATE	\$29.00		
82633			DESOXYCORTICOSTERONE, RIA	\$38.52		
82634			DESOXYCORTISOL, 11-	\$25.72		
82638			DIBUCAINE NUMBER	\$15.20		
82652			DIHYDROXYVITAMIN D, 1,25-	\$47.87		
82656			ELASTASE,PANCREATIC FECAL QUAL	\$12.07		
82657			ENZYME,ACTIVITY N/R E/SPEC C/T	\$21.50		
82658			ENZYME ACT BL/C RADIO/EACH SPE	\$21.50		

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				Rates are proposed until CMS approval		
				MAXIMUM FEE ALLOWANCE SPECIALIST	MAXIMUM FEE ALLOWANCE NON- SPECIALIST	
82664			ELECTROPHORETIC TEST	\$13.60		
82668			ERYTHROPOIETIN	\$17.50		
82670			ESTRADIOL	\$25.00		
82671			ESTROGENS ASSAY	\$41.00		
82672			ESTROGEN ASSAY	\$25.00		
82677			RIA ASSAY OF ESTRIOL	\$28.00		
82679			RIA ASSAY OF ESTRONE	\$25.00		
82693			ETHYLENE GLYCOL	\$12.50		
82696			ASSAY OF ETIOCHOLANOLONE, RIA	\$22.00		
82705			FATS/LIPIDS,FECEs,SCREENING	\$0.70		
82710			FATS/LIPIDS, FECEs, QUANT.	\$7.80		
82715			FECAL FAT DIFF. QUANT.	\$7.80		
82725			ASSAY BLOOD FATTY ACIDS	\$15.50		
82726			VERY LONG CHAIN FATTY ACIDS	\$21.50		
82728			FERRITIN,	\$16.00		
82731			FETAL FIBRONECTIN /C/V SEC, S/	\$71.20		
82735			ASSAY BLOOD FLUROIDE	\$24.00		
82746			FOLIC ACID, SCREEN	\$10.50		
82747			FOLIC ACID: RBC	\$18.00		
82757			ASSAY SEMEN FRUCTOSE	\$22.50		
82759			RBC GALACTOKINASE ASSAY	\$11.50		
82760			BLOOD GALACTOSE	\$15.00		
82775			ASSAY GALACTOSE TRANSFERASE	\$3.74		
82776			GALACTOSE TRANSFERASE TEST QUA	\$8.90		
82777			GALECTIN-3	\$24.14		
82784			GAMMAGLOB.A,D,G,M,EACH	\$11.30		
82785			RIA ASSAY GAMMAGLOBULIN E	\$16.00		
82787			GAMM IMM SUBCLASSES (LGG1 2 3	\$8.82		
82800			BLOOD PH, BLOOD GASES	\$5.20		
82803			BLOOD GASES: PH, PO2 & PCO2	\$16.50		
82805			GASES BL.COMBO OF PH,PCO2,P02,	\$8.00		
82810			GASES BLD 02 SAT.OONLY BY DIR M	\$10.00		
82820			HEMOGLOBIN-OXYGEN AFFINITY	\$10.98		
82930			GASTRIC ACID ANALYSIS, INCLUDE	\$5.95		
82938			GASTRIN (SERUM) AFTER SECRETIN	\$22.00		

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82941			GASTRIN	\$16.00		
82943			GLUCAGON	\$19.00		
82945			GLUCOSE BODY FLUIDS OTHER BLOO	\$4.34		
82946			GLUCAGON TOLERANCE TEST	\$13.00		
82947			GLUCOSE	\$4.34		
82948			STICK ASSAY OF BLOOD GLUCOSE	\$1.50		
82950			GLUCOSE TEST,POST GLUC.	\$3.00		
82951			GLUCOSE TOLERANCE TEST (GTT),3	\$5.00		
82952			GTT-ADDED SAMPLES,EACH	\$1.00		
82955			ASSAY G6PD ENZYME	\$6.00		
82960			TEST FOR G6PD ENZYME,SCREEN	\$7.00		
82962			GLUCOSE BLOOD MON. DEVICES HOM	\$2.60		
82963			GLUCOSIDASE,BETA	\$26.50		
82965			GLUTAMATE DEHYDROGENASE	\$6.30		
82977			GGT ENZYME,GAMMA	\$4.80		
82978			GLUTATHIONE ASSAY	\$12.00		
82979			ASSAY RBC GLUTATHIONE ENZYME	\$9.00		
82985			GLYCATED PROTEIN	\$6.60		
83001			GONADOTROPIN,FOLLICLE STIM.HOR	\$17.00		
83002			PITUITARY GONADOTROPINS RIA	\$17.00		
83003			RIA ASSAY GROWTH HORMONE	\$16.00		
83004			GROWTH HORMONE,HUMAN (HIGH)	\$16.00		
83006			TEST FOR DETECTING GENES ASSOC	\$24.14		
83009			HELICOBACTER,BLOOD PYLORI,BLAN	\$47.65		
83010			HAPTOGLOBIN,QUANTITATIVE	\$12.00		
83012			HAPTOGLOBINS,PHENOTYPES	\$12.00		
83013			HELICOBACTER	\$48.00		
83014			HELICOBACTER PYLORI DRUG ADMIN	\$9.00		
83015			HEAVY METAL SCREENING	\$10.20		
83018			HEAVY,METALS: QUANTITATIVE	\$25.00		
83020			HEMOGLOBIN ELECT. (EG.A2,S,C)	\$6.00		
83021			HGB FRACT/QUANT CHROM/EG,A2,S,	\$21.50		
83026			HEMOGLOBIN COPPER SULF METH.NO	\$2.00		
83030			FETAL HEMOGLOBIN CHEMICAL	\$10.00		
83033			FETAL FECAL HEMOGLOBIN QUAL. (\$7.00		

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83036			GLYCOSYLATED	\$6.60		
83037				\$10.66		
83045			BLOOD METHEMOGLOBIN QUAL.	\$1.50		
83050			BLOOD METHEMOGLOBIN ASSAY	\$3.00		
83051			PLASMA	\$1.20		
83060			BLOOD SULFHEMOGLOBIN ASSAY	\$3.00		
83065			HEMOGLOBIN HEAT ASSAY	\$3.00		
83068			HEMOGLOBIN STABILITY SCREEN	\$3.00		
83069			ASSAY URINE HEMOGLOBIN	\$3.00		
83070			HEMOSIDERIN QUALITATIVE	\$6.00		
83080			B-HEXOSAMINIDASE,EACH ASSAY	\$19.20		
83088			ASSAY HISTAMINE	\$40.00		
83090			HOMEYSTINE	\$18.65		
83150			HVA	\$12.00		
83491			HYDROXYCORTICOSTEROIDS,17-RIA	\$12.60		
83497			ASSAY URINE 5-HIAA	\$6.00		
83498			HYDROXYPROGESTERONE, 17-D	\$30.50		
83499			HYDROXYPROGESTERONE,20	\$30.50		
83500			HYDROXYPROLINE, FREE	\$30.00		
83505			HYDROXYPROLINE, TOTAL	\$30.00		
83516			IMMUNOASSAY QUAL/SEMIQUAL FOR	\$9.00		
83518			IMM.ANALYTE ANTIBODY QUAL.SEMI	\$8.00		
83519			IMMUNO.ANALYTE BY RIA	\$15.00		
83520			IMM.ANALYTE:NOT OTHERWISE SPEC	COST TO CHARGE		
83525			RIA ASSAY OF INSULIN	\$12.00		
83526			1NSULIN TOLERANCE TEST	\$10.00		
83527			INSULIN:FREE	\$16.11		
83528			INTRINSIC FACTOR LEVEL	\$20.00		
83540			ASSAY SERUM IRON	\$4.50		
83550			SERUM IRON BINDING TEST	\$7.20		
83570			UV-ASSAY BLOOD IDH ENZYME	\$6.00		
83582			ASSAY URINE 17-KGS	\$6.00		
83586			ASSAY BLOOD 17-KETOSTEROIDS	\$7.50		
83593			CHROMATOGRAPH KETOSTEROIDS	\$6.00		
83605			LACTIC ACID ASSAY	\$13.50		

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83615			UV-ASSAY BLOOD LDH ENZYME	\$4.20		
83625			ASSAY BLOOD LDH ENZYMES	\$9.00		
83630			LACTOFERRIN,FECAL,QUAL	\$21.54		
83631			LACTOFERRIN,FECAL:QUANTITATIVE	\$21.54		
83632			RIA PLACENTAL LACTOGEN	\$16.00		
83633			TEST URINE FOR LACTOSE	\$6.30		
83655			LEAD	\$9.00		
83661			L/S RATIO	\$10.50		
83662			L/S RATIO:FOAM STABILITY TEST	\$5.00		
83663			FETAL LUNG FLUORESENCE POLARIZ	\$10.46		
83664			FETAL LVNG:FOAMSTABILITY TEST	\$5.23		
83670			UV-ASSAY BLOOD LAP ENZYME	\$2.10		
83690			ASSAY BLOOD LIPASE	\$4.50		
83695			LIPOPROTEIN (A)	\$14.21		
83698			LIPOPROTEIN-ASSOCIATED PHOSPHO	\$37.25		
83700			LIPOPROTEIN,BLOOD:ELECT SEP AN	\$12.35		
83701			LIPOPROTEIN,BL,HIGH RESO QUANT	\$27.24		
83704			LIPOPROTEIN,QUANT PART NUM AND	\$34.62		
83718			BLOOD LIPOPROTEIN ASSAY	\$8.00		
83719			LIPOPROTEIN,VLDL CHOLESTEROL	\$15.50		
83721			LIPOPROTEIN,DIRECT MEAS.LDL CH	\$10.66		
83727			LUTEINIZING RELEASING FACTOR,	\$17.00		
83735			ASSAY BLOOD MAGNESIUM	\$4.50		
83775			UV-ASSAY OF MD ENZYME	\$5.90		
83785			ASSAY OF MANGANESE	\$12.99		
83788			MASS/SPEC ANALYTE,QUAL,EA,SPEC	\$4.40		
83789			MASS/SPECTRO,ANALYTE QUANT EAC	\$4.40		
83825			ASSAY BLOOD MERCURY	\$8.40		
83835			ASSAY URINE METANEPHRINES	\$10.20		
83857			ASSAY METHEMALBUMIN	\$12.00		
83861			MICROFLUIDIC ANALYSIS W/INTEG	\$18.13		
83864			BLOOD MUCOPOLYSACCHARIDES	\$13.00		
83872			ASSAY SYNOVIAL FLUID MUCIN	\$3.20		
83873			MYELIN BASIC PROTEIN,CSF,RIA	\$20.00		
83874			MYOGLOBIN ELECTROPHORESIS	\$12.00		

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83876			MYELOPEROXIDASE (MPO)	\$37.25		
83880			NATRIURETIC PEPTIDE	\$37.94		
83883			NEPHELOMETRY,EACH ANALYTE NOT	COST TO CHARGE		
83885			ASSAY URINE FOR NICKEL	\$19.00		
83915			ASSAY NUCLEOTIDASE	\$6.00		
83916			OLIGOCLONAL IMMUNE GLOBULIN,CS	\$20.00		
83918			ASSAY ORGANIC ACIDS	\$19.00		
83919			ORGANIC ACID:QUAL,EACH SPEC	\$19.00		
83921			ORGANIC ACID,SINGLE,QUANT.	\$19.00		
83930			ASSAY BLOOD OSMOLALITY	\$9.00		
83935			ASSAY URINE OSMOLALITY	\$9.00		
83937			OSTEOCALCIN	\$40.00		
83945			ASSAY URINE OXALATE	\$17.00		
83950			ONCOPROTEIN HER-2/NEU	\$71.20		
83951			ONCOPROTEIN: DES-GAMMA-CARBOXY	\$70.69		
83970			RIA ASSAY OF PARATHORMONE	\$54.00		
83986			ASSAY BODY FLUID ACIDITY	\$4.30		
83987			PH: EXHALED BREATH CONDENSATE	\$17.43		
83992			PHENCYCLIDINE (PCP)	\$18.00		
83993			CALPROTECTIN, FECAL	\$21.54		
84030			PKU,BLOOD	\$6.00		
84035			PHENLKETONES,QUAL.	\$4.90		
84060			PHOSPHATASE,ACID:TOTAL	\$3.60		
84061			PHOSPH.ACID:FORENSIC EXAMINATI	\$3.60		
84066			PHOSPHATASE,ACID:PROSTATIC	\$12.60		
84075			ASSAY ALKALINE PHOSPHATASE	\$3.60		
84078			ASSAY ALKALINE PHOSPHATASE	\$3.60		
84080			PHOSPHATASES,ALKALINE,ISOENZYM	\$3.60		
84081			PHOSPHATYDYLGLYCEROL	\$20.00		
84085			ASSAY RBC PG6D ENZYME	\$7.90		
84087			ASSAY PHOSPHOHEXOSE ENZYMES	\$13.50		
84100			ASSAY BLOOD PHOSPHORUS	\$3.00		
84105			ASSAY URINE PHOSPHORUS	\$3.00		
84106			PORPHOBILINOGEN,URINE,QUAL.	\$1.80		
84110			PORPHOBILINOGEN,QUANT.	\$7.50		

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84112			PLACENTAL ALPHA MICROGLOBULIN	\$70.69		
84119			PORPHYRINS:URINE:QUANT.NS	\$3.00		
84120			PORPHYRINS,URINE:QUANT. AND FR	\$7.50		
84126			FECES PORPHYRINS,QUANT.	\$34.50		
84132			ASSAY BLOOD POTASSIUM	\$3.90		
84133			ASSAY URINE POTASSIUM	\$3.90		
84134			PREALBUMIN	\$15.91		
84135			PREGNANEDIOL: RIA	\$12.00		
84138			PREGNANETRIOL:RIA	\$12.00		
84140			PREGNENOLONE	\$27.50		
84143			17-HYDROXYPREGNECLONE	\$30.00		
84144			ASSAY PROGESTERONE	\$20.00		
84145			PROCALCITONIN (PCT)	\$29.40		
84146			RIA ASSAY FOR PROLACTIN	\$20.00		
84150			PROSTAGLANDIN, EACH	\$30.00		
84152			PROSTATE SPECIFIC ANTIGEN PSA	\$24.50		
84153			PROSTATE SPECIFIC ANTIGEN (PSA	\$24.50		
84154			PROSTATE SPECIFIC ANTIGEN(PSA)F	\$24.50		
84155			PROTEIN: TOTAL,EXCEPT REF.	\$1.80		
84156			PROTEIN:TOTAL EXCEPT REFRACTOM	\$1.80		
84157			PROTEIN TOTAL OTHER (EG SYN FL	\$1.80		
84160			PROTEIN:TOTAL, REFRACT.	\$1.80		
84163			PREG-ASS.PLASMA PROTEIN PAPP-A	\$16.52		
84165			ASSAY SERUM PROTEINS	\$6.00		
84166			PROTEIN,ELECT.FRACT.AND.QUAT.O	\$19.57		
84181			PROTEIN:WEST.BLOT INT.&REP.BLO	\$20.00		
84182			PROTEIN:WEST.BLOT IMM.PROBE BA	\$23.50		
84202			ASSAY RBC PROTOPORPHYRIN	\$10.40		
84203			TEST RBC PROTOPORPHYRIN	\$3.00		
84206			PROINSULIN	\$19.00		
84207			(VITAMIN B-6) PYRIDOXAL PHOS.	\$32.00		
84210			ASSAY BLOOD PYRUVATE	\$12.80		
84220			PYRUVIC KINASE	\$10.30		
84228			QUININE	\$13.60		
84233			RECEPTOR ASSAY: ESTROGEN(ESTRA	\$16.00		

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84234			RECEPTOR ASSAY: PROGESTERONE	\$20.00		
84235			RECEPTOR ASSAY:ENDOCRINE:OTHER	\$63.20		
84238			RECEPTOR ASSAY, NON-ENDO	\$43.00		
84244			RIA ASSAY OF RENIN	\$25.00		
84252			ASSAY VITAMIN B-2	\$24.00		
84255			SELENIUM	\$29.60		
84260			ASSAY BLOOD SEROTONIN	\$35.20		
84270			SEX HORMONE BINDING GLOBULIN (\$25.00		
84275			ASSAY BLOOD SIALIC ACID	\$16.00		
84285			ASSAY SILICA	\$28.80		
84295			ASSAY BLOOD SODIUM	\$3.90		
84300			ASSAY URINE SODIUM	\$3.90		
84302			SODIUM:OTHER SOURCE	\$3.90		
84305			SOMATOMEDIN	\$16.00		
84307			SOMATOSTATIN	\$16.00		
84311			SPECTR.ANALYTE NOT ELSEW.SPECI	\$7.50		
84315			BODY FLUID SPECIFIC GRAVITY	\$3.00		
84375			CHROMATOGRAM ASSAY, SUGARS	\$23.20		
84376			SUGARS(MON-DI,OLI/:SIN-QUALT E	\$7.00		
84377			SUGAR/MON-DI/OLIGOSACC/M/QUAL	\$7.00		
84378			SUG/OLIGOSACCHARIDES S/QUANT/E	\$14.00		
84379			SUGARS/OLIGOSACCHARIOES/MULT/Q	\$14.00		
84392			SULFATE, URINE	\$5.60		
84402			TESTOSTERONE: FREE	\$30.40		
84403			RIA ASSAY BLOOD TESTOSTERONE	\$32.00		
84410			TESTASTERONE LEVEL	\$58.04		
84425			ASSAY VITAMIN B-1	\$29.00		
84430			THIOCYANATE	\$3.60		
84431			THRONBOXANE METABOLITE(S), INC	\$18.44		
84432			THYROGLOBULIN	\$13.00		
84436			THYROXINE, TRUE, RIA	\$6.00		
84437			THYROXINE, NEONATAL	\$6.00		
84439			THYROID PANEL	\$10.00		
84442			THYROID ACTIVITY (TBG) ASSAY	\$12.00		
84443			RIA ASSAY OF TS HORMONE	\$23.00		

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84445			RIA THYROTROPIN FACTOR	\$27.80		
84446			ASSAY VITAMIN E	\$16.80		
84449			TRASCORTIN	\$24.00		
84450			UV-ASSAY TRANSAMINASE (SGOT)	\$3.00		
84460			UV-ASSAY TRANSAMINASE (SGPT)	\$3.00		
84466			TRANSFERRIN	\$15.20		
84478			ASSAY BLOOD TRIGLYCERIDES	\$7.30		
84479			TRIIODOTHYRONINE, RESIN UPTAKE	\$6.00		
84480			RIA ASSAY, T-3	\$15.00		
84481			TRIIODOTHYRONINE, FREE RIA	\$15.00		
84482			TRIDOTHYRONINE(T-3);REVERSE	\$15.00		
84484			TROPONIN	\$9.51		
84485			ASSAY DUODENAL FLUID TRYPSIN	\$3.30		
84488			TEST FECES FOR TRYPSIN	\$3.30		
84490			ASSAY FECES FOR TRYPSIN	\$3.30		
84510			ASSAY BLOOD TYROSINE	\$12.70		
84512			TROPNIN-QUAL	COST TO CHARGE		
84520			ASSAY BUN	\$3.00		
84525			STICK-ASSAY BUN	\$3.00		
84540			ASSAY URINE UREA-N	\$3.00		
84545			UREA-N CLEARANCE TEST	\$6.00		
84550			ASSAY BLOOD URIC ACID	\$3.00		
84560			ASSAY URINE URIC ACID	\$3.00		
84577			UROBILINOGEN,FECES: QUANT.	\$6.00		
84578			TEST URINE UROBILINOGEN	\$0.40		
84580			UROBILINOGEN,URINE: QUANT.	\$2.10		
84583			UROBILINOGEN,URINE:SEMIQUANT.	\$2.10		
84585			ASSAY URINE VMA	\$12.00		
84586			VASOACTIVE INTEST. PEPTIDE(VIP	\$48.00		
84588			RIA ASSAY VASOPRESSIN	\$45.00		
84590			ASSAY BLOOD VITAMIN-A	\$6.00		
84591			VITAMIN,NOT OTHERWISE SPEC.	\$12.82		
84597			ASSAY VITAMIN-K	\$18.00		
84600			VOLATILES	\$18.00		
84620			XYLOSE TOLERANCE TEST, BLOOD	\$16.00		

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84630			ASSAY BLOOD ZINC	\$15.00		
84681			C-PEPTIDE, ANY METHOD	\$22.00		
84702			GONADOTROPIN,CHORIONIC:QUANTIT	\$11.39		
84703			GONADOTROPIN,CHORIONIC:QUALITA	\$3.00		
84704			GONADOTROPIN, CHORIONIC (HCG):	\$16.52		
84830			OVUL.TESTS,VISUAL COLOR COMP.M	\$3.00		
84999			UNLISTED CHEMISTRY/TOXICOLOGY	COST TO CHARGE		
85002			BLEEDING TIME TEST	\$1.20		
85004			SODIUM:OTHER SOURCE	\$7.20		
85007			DIFFERENTIAL WBC COUNT	\$2.40		
85008			BLOOD COUNT:MAN.SMEAR EX.WITHO	\$1.20		
85009			DIFFERENTIAL WBC COUNT	\$1.20		
85013			BLOOD COUNT:SPUN MICROHEMATOCR	\$1.50		
85014			HEMATOCRIT	\$1.50		
85018			HEMOGLOBIN, COLORIMETRIC	\$1.20		
85025			BLOOD COUNT:HEMO.PLAT.COUNT,AU	COST TO CHARGE		
85027			HEMOGRAM,AUTOMATED W/PLATELET	\$4.80		
85032			BLOOD:COUNT,MAN.ERY:LEUK:PLATE	\$3.00		
85041			RED BLOOD CELL (RBC) COUNT	\$1.20		
85044			RETICULOCYTE COUNT	\$3.00		
85045			BLOOD RETIC COUNT FLOW CYTOMET	\$4.00		
85046			BL/CT:RETIC,HGB CONCENTRATION	\$2.75		
85048			WHITE BLOOD CELL (WBC) COUNT	\$1.20		
85049			BLOOD COUNT:PLATELET:AUTO	\$5.00		
85055			RETICULATED PLATELET ASSAY	\$29.93		
85060			BLOOD SMEAR, PERIPHERAL, INTER	COST TO CHARGE		
85097			BONE MARROW SMEAR INTERPRET	COST TO CHARGE		
85130			CHROMOGENIC SUBSTRATE ASSAY	COST TO CHARGE		
85170			BLOOD CLOT RETRACTION SCREEN	\$0.60		
85175			BLOOD CLOT LYSIS TIME	\$3.90		
85210			BLOOD CLOT FACTOR II TEST	\$3.00		
85220			BLOOD CLOT FACTOR V TEST	\$24.00		
85230			BLOOD CLOT FACTOR VII TEST	\$24.00		
85240			BLOOD CLOT FACTOR VIII TEST	\$24.00		
85244			FACTOR VIII RELATED ANTIGEN QU	\$22.28		

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85245			CLOTTING:FACTOR VIII,VW RIST.C	\$10.00		
85246			CLOTTING:FACTOR VIII,VW ANTIGE	\$10.00		
85247			CLOTTING:FACTOR VIII VON WILLE	\$10.00		
85250			BLOOD CLOT FACTOR IX TEST(PTC/	\$26.00		
85260			BLOOD CLOT FACTOR X TEST(STUAR	\$24.00		
85270			BLOOD CLOT FACTOR XI TEST (PTA	\$24.00		
85280			BLOOD CLOT FACTOR XII TEST	\$26.00		
85290			BLOOD CLOT FACTOR XIII TEST	\$8.00		
85291			BLOOD CLOT FACTOR XIII TEST	\$7.00		
85292			CLOTTING: PREKALLIKRIEW ASSAY	\$20.67		
85293			CLOTTING:H-M-W KINNI NOGEN ASSA	\$20.67		
85300			ANTITHROMBIN III TEST ACTIVITY	\$15.00		
85301			CLOT. INHIB/ANTICOAG/ANTITHROM	\$14.00		
85302			CLOT INHIBIT/ANTICOAC/PROTEIN	\$16.00		
85303			CLOTTING INH.OR ANTIC.PROT.C,A	\$18.00		
85305			CLOTTING INHIBITORS PROTEIN S	\$12.66		
85306			CLOTTING INH.OR ANT:PROT.S FRE	\$18.00		
85307			ACTIVATED PROTEIN C(APC) RESIS	\$18.00		
85335			FACTOR INHIBITOR TEST	\$10.00		
85337			THROMBOMODULIN	\$10.00		
85345			COAGULATION TIME	\$1.80		
85347			COAGULATION TIME, ACTIVATED	\$3.00		
85348			COAGULATION TIME, OTHER METHOD	\$1.20		
85360			EUGLOBULIN LYSIS	\$11.00		
85362			FIBRIN DEGRADATION PRODUCTS,AG	\$3.00		
85366			FDP FSP: PARACOAGULATION	\$8.00		
85370			FDP FSP: QUANTITATIVE	\$3.57		
85378			FIBRIN DEGR.PRODUCTS,D-DIMER:S	\$5.00		
85379			FIBRIN DEGR.PRODUCTS,D-DIMER:Q	\$5.00		
85380			FIBRIN DE:VENOUS THROM:QUAL:OR	\$5.00		
85384			FIBRINOGEN:ACTIVITY	\$9.60		
85385			FIBRINOGEN: ANTIGEN	\$9.60		
85390			FIBRINOLYSINS SCREEN	\$7.00		
85396			COAGULATION/FIBRINOLYSIS ASSAY	\$11.63		
85397			COAGULATION & FIBRINOLYSIS FUN	\$25.18		

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85400			FIBRINOLYTIC FACTORS: PLASMIN	\$9.00		
85410			FIBRINOLYTIC ANTIPLASMIN-ALPHA	\$9.00		
85415			FIBR.FACTORS&INH.PLASM.ACTIVAT	\$10.00		
85420			FIBRINOLYTIC PLASMINOGEN	\$7.14		
85421			FIBRO MECH:PLASM.ANTIGENIC ASS	\$12.12		
85441			HEINZ BODIES: DIRECT	\$5.00		
85445			HEINZ BODIES: INDUCED	\$5.00		
85460			HEMOGLOBIN, FETAL	\$9.40		
85461			HGB/RBC ROSETTE	\$9.00		
85475			HEMOLYSIN: ACID	\$10.00		
85520			HEPARIN ASSAY	\$7.97		
85525			HEPARIN NEUTRALIZATION	\$16.00		
85530			HEPARIN-PROTAMINE TOLERANCE	\$16.00		
85536			IRON STAIN,PERIPHERAL BLOOD	\$5.00		
85540			WBC ALKALINE PHOSPHATASE	\$8.90		
85547			RBC MECHANICAL FRAGILITY	\$10.50		
85549			SERUM MURAMIDASE	\$25.00		
85555			RBC OSMOTIC FRAGILITY	\$4.80		
85557			RBC OSMOTIC FRAGILITY, INCUBAT	\$4.80		
85576			PLATELET:AGGREGATION (IN VITRO	\$24.01		
85597			PLATELET NEUTRALIZATION	\$20.00		
85598			PHOSPHOLIPID NEUTRALIZATION: H	\$19.73		
85610			PROTHROMBIN TIME	\$3.00		
85611			PROTH.TIME:SUBST.PLASMA FRACT.	\$4.50		
85612			VIPER VENOM PROTHROMBIN TIME	\$13.00		
85613			RUSSELL VIPER VENOM TIME: DILU	\$10.00		
85635			REPTILASE TEST	\$8.40		
85651			RBC SEDIMENTATION RATE, NON AU	\$1.50		
85652			SED RATE AUTOMATED	\$1.50		
85660			RBC SICKLE CELL TEST	\$3.00		
85670			THROMBIN TIME: PLASMA	\$8.00		
85675			THROMBIN TIME: TITER	\$6.00		
85705			THROMBOPLASTIN INHIBITION: TIS	\$7.90		
85730			THROMBOPLASTIN TIME, PARTIAL	\$3.00		
85732			THROMBOPLASTIN TIME, SUB PLASM	\$3.00		

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85810			BLOOD VISCOSITY EXAMINATION	\$15.00		
85999			UNLISTED HEMATOLOGY PROCEDURE	COST TO CHARGE		
86000			AGGLUTININS: FEBRILE, EACH ANT	\$0.96		
86001			ALLERGEN SPECIFIC IGG QUANT EA	\$4.00		
86003			ALLERGEN SPEC.IGE:QUANT.TO 12	\$4.00		
86005			ALLERGEN SPEC IGE: QUAL MULT S	\$3.24		
86021			WBC ANTIBODY IDENTIFICATION	\$9.00		
86022			PLATELET ANTIBODIES	\$9.00		
86023			ANTIBODY ID,PLAT.ASS. IMMUNOBL	\$15.00		
86038			ANTINUCLEAR ANTIBODIES (ANA),	\$7.80		
86039			ANTINUCLEAR ANTIBODIES,ANA:TIT	\$15.00		
86060			ANTISTREPTOLYSIN O TITER	\$3.60		
86063			ANTISTREPTOLYSIN O SCREEN	\$1.20		
86077			BLOOD BANK PHYSICIAN SERVICES:	COST TO CHARGE		
86078			BLOOD BANK PHYSICIAN SERVICES:	COST TO CHARGE		
86079			BLOOD BANK PHYSICIAN SERVICES:	COST TO CHARGE		
86140			C-REACTIVE PROTEIN	\$3.00		
86141			C-REACTIVE PROTEIN:HSCR	\$14.30		
86146			BETA 2 GLYCOPROTEIN I ANTIBODY	\$27.77		
86147			CARDIOLIPIN ANTIBODY	\$27.77		
86148			ANTI-PHOSPHATIDYLSERINE	\$22.00		
86152			CELL ENUMERATION USING IMMUNOL	COST TO CHARGE		
86153			CELL ENUMERATION USING IMMUNOL	\$29.60		
86155			CHEMOTAXIS ASSAY	\$14.00		
86156			COLD AGGLUTININ: SCREEN	\$3.00		
86157			COLD AGGLUTININ: TITER	\$9.00		
86160			COMPLEMENT:ANTIGEN,EACH COMPON	\$9.00		
86161			COMPLEMENT:FUNCTIONAL ACT.EACH	\$9.00		
86162			COMPLEMENT: TOTAL (CH 50)	\$15.60		
86171			COMPLEMENT FIXATION, EACH	\$4.50		
86185			COUNTERELECTROPHORESIS, EACH	\$7.90		
86200			CYCLIC CITRULLINATED PEPTIDE C	\$14.13		
86215			DEOXYRIBONUCLEASE, ANTIBODY	\$18.00		
86225			DNA ANTIBODY	\$13.00		
86226			DNA ANTIBODY:SINGLE STRANDED	\$15.00		

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86235			ENA ANTIBODY	\$24.00		
86243			FC RECEPTOR ASSAY	\$15.90		
86255			FLUORESCENT ANTIBODY: SCREEN	\$7.80		
86256			FLUORESCENT ANTIBODY: TITER	\$12.50		
86277			GROWTH HORMONE,HUMAN,ANTIBODY	\$16.00		
86280			HEMAGGLUTINATION INHIBITION	\$5.40		
86294			IMMUNOASSAY FOR TUMOR ANTIGEN	\$12.00		
86300			IMMUNOASSAY FOR TUMOR ANTIGEN	\$23.00		
86301			CA 19-9	\$23.00		
86304			CA 125	\$23.00		
86305			HUMAN EPIDIDYMIS PROTEIN 4 (HE	\$22.84		
86308			HETEROPHILE ANTIBODIES: SCREEN	\$3.00		
86309			HETEROPHILE ANTIBODIES: TITER	\$5.00		
86310			HETEROPHILE ANTIBODIES	\$4.50		
86316			IMMUNOASSAY FOR TUMOR ANTIGEN	\$28.00		
86317			IMMUNOASSAY/INFECTIOUS AGENT..	\$8.00		
86318			IMMUNOASSAY TO INF. AGENT ANTI	\$7.00		
86320			SERUM IMMUNOELECTROPHORESIS	\$10.50		
86325			OTHER IMMUNOELECTROPHORESIS	\$25.00		
86327			IMMUNOELECTROPHORESIS: CROSSED	\$25.00		
86329			IMMUNODIFFUSION, EACH	\$19.00		
86331			IMMUNODIFFUSION OUCHTERLONY	\$4.50		
86332			IMMUNE COMPLEX ASSAY	\$33.00		
86334			IMMUNOFIXATION ELECTROPHORESIS	\$30.00		
86335			IMMUNO ELECT:OTHER FL,W CONCEN	\$32.21		
86336			INHIBIN A	COST TO CHARGE		
86337			INSULIN ANTIBODIES	\$13.71		
86340			INTRINSIC FACTOR ANTIBODIES	\$20.00		
86341			ISLET CELL ANTIBODY	\$25.00		
86343			LEUKOCYTE HISTAMINE RELEASE	\$6.00		
86344			LEUKOCYTE PHAGOCYTOSIS	\$10.86		
86352			CELLULAR FUNCTION ASSAY INVOLV	\$149.10		
86353			LYMPHOCYTE TRANSFORMATION	\$32.00		
86355			B CELL:TOTAL COUNT	\$41.40		
86356			MONONUCLEAR CELL ANTIGEN, QUAN	\$29.38		

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86357			NATURAL KILLER CELLS:TOTAL COU	\$41.40		
86359			T CELLS: TOTAL COUNT	\$40.00		
86360			T CELLS: T4 & T8, INCLUDING RA	\$55.00		
86361			T-CELL:ABSOLUTE CD4 COUNT	\$29.93		
86367			STEM CELLS (IE)CD34) TOTAL CEL	\$41.40		
86376			MICROSOMAL ANTIBODY (THYROID)	\$6.60		
86378			MIGRATION INHIBITORY FACTOR	\$26.00		
86382			NEUTRALIZATION TEST, VIRAL	\$20.00		
86384			NITROBLUE TETRAZOLIUM DYE	\$10.86		
86386			NUCLEAR MATRIX PROTEIN 22.QUAL	\$4.69		
86403			PRECIPITIN (EG, LATEX BEAD) OR	\$8.00		
86406			TITER/EACH ANTIBODY	\$6.60		
86430			RHEUMATOID FACTOR: QUAL.	\$1.80		
86431			RHEUMATOID FACTOR: QUANTITATIV	\$4.50		
86480			TBTEST CELL MED.MEAS.OF GG INT	\$68.02		
86481			TUBERCULOSIS TEST, CELL MEDIAT	\$82.23		
86485			SKIN TEST: CANDIDA	COST TO CHARGE		
86486			SKIN TEST: UNLISTED ANTIGEN, E	\$4.49		
86490			COCCIDIOIDOMYCOSIS SKIN TEST	COST TO CHARGE		
86510			HISTOPLASMOSIS SKIN TEST	COST TO CHARGE		
86580			TB PATCH OR INTRADERMAL TEST	COST TO CHARGE		
86590			STREPTOKINASE, ANTIBODY	\$8.00		
86592			SYPHILIS TEST(S),QUALITATIVE	\$1.50		
86593			SYPHILIS TEST, QUANTITATIVE	\$3.00		
86602			ANTIBODY: ACTINOMYCES	\$10.00		
86603			ANTIBODY: ADENOVIRUS	\$10.00		
86606			ANTIBODY: ASPIRGILLUS	\$10.00		
86609			ANTIBODY:BACTERIUM, NOT ELSEWH	\$10.00		
86611			BARTONELLA	\$11.20		
86612			ANTIBODY: BLASTOMYCES	\$10.00		
86615			ANTIBODY: BORDETELLA	\$10.00		
86617			LYME CONFIRM-WESTER/IMMUNBLOT	\$19.00		
86618			ANTIBODY:BORELLIA BUFGDORFERI(\$23.00		
86619			ANTIBODY:BORRELIA(RELAPSING FE	\$10.00		
86622			ANTIBODY: BRUCELLA	\$8.00		

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86625			ANTIBODY: CAMPYLOBACTER	\$10.00		
86628			ANTIBODY: CANDIDA	\$10.00		
86631			ANTIBODY: CHLAMYDIA	\$10.00		
86632			ANTIBODY: CHLAMYDIA, 1GM	\$15.00		
86635			ANTIBODY: COCCIDIODES	\$10.00		
86638			ANTIBODY:COXIELLA BRUNETII Q F	\$12.50		
86641			ANTIBODY: CRYPTOCOCCUS	\$12.50		
86644			ANTIBODY: CYTOMEGALOVIRUS (CMV)	\$12.00		
86645			ANTIBODY: (CMV), IGM	\$12.00		
86648			ANTIBODY: DIPHTHERIA	\$18.00		
86651			ANTIBODY:ENCEPHALITIS,CAL.LACR	\$12.00		
86652			ANTIBODY:ENCEPHALITIS,EAST. EQ	\$12.00		
86653			ANTIBODY:ENCEPHALITIS,ST. LOUI	\$12.00		
86654			ANTIBODY:ENCEPHALITIS,WEST. EQ	\$12.00		
86658			ANTIBODY:ENTEROVIRUS (EG,COXSA	\$12.00		
86663			ANTIBODY: EB VIRUS, EA	\$12.00		
86664			ANTIBODY: EB VIRUS, EBNA	\$16.70		
86665			ANTIBODY: EB VIRUS, VCA	\$19.80		
86666			EHRlichia	\$11.20		
86668			ANTIBODY:FRANCISELLA TULARENSI	\$12.00		
86671			ANTIBODY:FUNGUS,NOT ELSEWHERE	\$15.00		
86674			ANTIBODY:GIARDIA LAMBLIA	COST TO CHARGE		
86677			ANTIBODY:HELICOBACTER PYLORI	\$12.00		
86682			ANTIBODY:HELMINTH,NOT ELSEWHER	\$12.00		
86684			ANTIBODY:HEMOPHILUS INFLUENZA	\$15.00		
86687			HTLV I ANTI DET IMMUNOASSAY	\$9.23		
86688			ANTIBODY: HTLV-II	\$13.00		
86689			HTLV I ANTI DECT CONFIRM TEST	\$21.20		
86692			ANTIBODY:HEPATITIS,DELTA AGENT	\$20.00		
86694			ANTIBODY:HERPES SIMPLEX,NON-SP	\$12.80		
86695			ANTIBODY:HERPES SIMPLEX, TYPE	\$12.80		
86696			HERPES SIMPLEX TYPE 2	\$21.40		
86698			ANTIBODY:HISTOPLASMA	\$15.00		
86701			ANTIBODY: HIV-1	\$12.00		
86702			ANTIBODY: HIV-2	\$13.00		

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86703			ANTIBODY:HIV-1&2,SINGLE ASSAY	\$18.00		
86704			HEPATITIS B CORE(HBC-AB):IGG A	\$15.00		
86705			HEPATITIS B CORE ANTIBODY IGM	\$12.60		
86706			HEPATITIS B SURFACE HBS-AB	\$12.00		
86707			HEPATITIS BE ANTIBODY (HBE-AB)	\$12.00		
86708			HEPATITIS A ANTIBODY (HAAB):IG	\$12.00		
86709			HEPATITIS B SURFACE ANTIBODY H	\$12.60		
86710			ANTIBODY: INFLUENZA VIRUS	\$12.00		
86711			ANTIBODY: JC (JOHN CUNNINGHAM)	\$15.79		
86713			ANTIBODY: LEGIONELLA	\$20.00		
86717			ANTIBODY:LEISHMANIA	COST TO CHARGE		
86720			ANTIBODY:LEPTOSPIRA	\$15.00		
86723			ANTIBODY: LISTERIA MONOCYTOGENE	\$15.00		
86727			ANTIBODY:LYMPHOCYTIC CHORIOMEN	\$15.00		
86729			ANTIBODY:LYMPHOGRANULOMA VENER	\$12.00		
86732			ANTIBODY:MUCORMYCOSES	\$15.00		
86735			ANTIBODY: MUMPS	\$15.00		
86738			ANTIBODY:MICOPLASMA	\$12.00		
86741			ANTIBODY:NEISSERIA MENINGITIDI	\$12.00		
86744			ANTIBODY:NOCARDIA	\$12.00		
86747			ANTIBODY:PARVOVIRUS	\$12.00		
86750			ANTIBODY:PLASMODIUM (MALARIA)	\$12.00		
86753			ANTIBODY:PROTOZOA,NOT ELSEWHER	\$12.00		
86756			ANTIBODY:RESPIRATORY SYNCYTIAL	\$12.00		
86757			RICKETTSIA	\$21.40		
86759			ANTIBODY: ROTAVIRUS	\$12.00		
86762			ANTIBODY: RUBELLA	\$12.00		
86765			ANTIBODY: RUBEOLA	\$10.00		
86768			ANTIBODY: SALMONELLA	\$12.00		
86771			ANTIBODY: SHIGELLA	\$12.00		
86774			ANTIBODY:TETANUS	\$5.40		
86777			ANTIBODY: TOXOPLASMA	\$12.00		
86778			ANTIBODY:TOXOPLASMA,IGM	\$15.00		
86780			ANTIBODY: TREPONEMA PALLIDUM	\$14.53		
86784			ANTIBODY:TRICHINELLA	\$8.00		

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86787			ANTIBODY:VARICELLA-ZOSTER	\$12.60		
86788			ANTIBODY: WEST NILE VIRUS, IGM	\$18.49		
86789			ANTIBODY: WEST NILE VIRUS	\$15.79		
86790			ANTIBODY:VIRUS, NOT ELSEWHERE	COST TO CHARGE		
86793			ANITBODY:YERSINIA	\$8.00		
86800			THYROGLOBULIN ANTIBODY, RIA	\$13.00		
86803			HEPATITUS C ANTIBODY	\$19.00		
86804			HEPATITUS C ANTI CONFIRM.IMMON	\$20.00		
86805			LYMPHOCYTOTOXICITY ASSAY CROSS	\$22.00		
86806			LYMPHOCYTOTOXICITY ASSAY C TIT	\$22.00		
86807			SERUM SCR CYTOTOXIC % REACTIVE	\$54.00		
86808			QUICK METHOD CYTOXIC % ANTI-P	\$39.00		
86812			TISSUE TYPING:	\$12.60		
86813			TISSUE TYPING:	\$19.00		
86816			TISSUE TYPING:	\$19.00		
86817			TISSUE TYPING:	\$19.00		
86821			TISSUE TYPING:	\$68.00		
86822			TISSUE TYPING:	\$50.00		
86825			HUMAN LEUKOCYTE ANTIGEN (HLA)	\$88.14		
86826			HUMAN LEUKOCYTE ANTIGEN (HLA)	\$30.34		
86828			ANTIBODY TO HUMAN LEUKOCYTE AN	\$43.19		
86829			ANTIBODY TO HUMAN LEUKOCYTE AN	\$32.57		
86830			ANTIBODY TO HUMAN LEUKOCYTE AN	\$84.55		
86831			ANTIBODY TO HUMAN LEUKOCYTE AN	\$72.47		
86832			ANTIBODY TO HUMAN LEUKOCYTE AN	\$132.86		
86833			ANTIBODY TO HUMAN LEUKOCYTE AN	\$120.79		
86834			ANTIBODY TO HUMAN LEUKOCYTE AN	\$374.45		
86835			ANTIBODY TO HUMAN LEUKOCYTE AN	\$338.22		
86849			UNLISTED IMMUNOLOGY PROCEDURE	COST TO CHARGE		
86850			ANTIBODY SCREEN,RBC,EACH SERUM	COST TO CHARGE		
86860			ANTIBODY ELUTION (RBC), EACH E	COST TO CHARGE		
86870			ANTIBODY IDENT. RBC ANT. EACH	COST TO CHARGE		
86880			ANTI HUMAN GLOBULIN TEST:DIRECT	\$5.00		
86885			COOMBS TEST:IND.QUAL.EACH ANTI	\$6.80		
86886			ANTI HUMAN GLOBULIN TEST I DIRE	\$5.00		

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86890			AUTLOGOUS BLOOD OR COMPONENT,C	\$75.00		
86891			AUTOLOGOUS BLOOD:INTRA. OR POS	\$75.00		
86900			BLOOD TYPING' ABO	COST TO CHARGE		
86901			BLOOD TYPING: RH (D)	COST TO CHARGE		
86902			BLOOD TYPING: ANTIGEN TESTING	\$4.18		
86904			BLOOD TYPING:ANT.SCR.COMP.UNIT	COST TO CHARGE		
86905			BLOOD TYPING,RBC ANT.OTHER THA	\$3.00		
86906			BLOOD TYPING,RH PHENOTYPING,CO	\$2.00		
86910			BLOOD TYPING,PAT.TEST.ABO,RH &	\$12.60		
86911			BLOOD TYPING PATERNITY(EACH AD	\$5.00		
86920			COMP.TEST EACH,IMM.SPIN TECHNI	COST TO CHARGE		
86921			COMP.TEST EACH,INCUBATION TECH	COST TO CHARGE		
86922			COMP.TEST EACH,ANTIGLOBULIN TE	COST TO CHARGE		
86923			COMPATIBILITY TEST EACH UNIT E	\$12.00		
86927			FRESH FROZEN PLASMA, THAWING,E	COST TO CHARGE		
86930			FROZEN BLOOD,PREP.FOR FREEZING	COST TO CHARGE		
86931			FROZEN BLOOD,PREP. FREEZ.& THA	COST TO CHARGE		
86932			FROZEN BLOOD,PREP.W.FREEZ&THAW	COST TO CHARGE		
86940			HEMOLYSINS & AGGLUTININS,AUTO,	\$9.50		
86941			HEM.& AGGL.AUTO,SCREEN,EACH:IN	\$12.50		
86945			IRRADIATION BLOOD PRODUCT,EACH	COST TO CHARGE		
86950			LEUKOCYTE TRANSFUSION	COST TO CHARGE		
86960			VOLUME REDUCTION BLOOD:PLALELE	\$25.00		
86965			POOLING PLALELETS OR OTHER BLO	COST TO CHARGE		
86970			PRET. RBC'S USE RBC ANT. DET.	COST TO CHARGE		
86971			PRET.RBC'S USE RBC INC.ENZYMES	COST TO CHARGE		
86972			PRET.RBC'S USE RBC DENSITY GRA	COST TO CHARGE		
86975			PRET.SERUM USE RBC, INC. DRUGS	COST TO CHARGE		
86976			PRET.SERUM USE RBC:BY DILUTION	COST TO CHARGE		
86977			PRET.SERUM USE RBC:INC. WITH I	COST TO CHARGE		
86978			PRET.SERUM USE RBC:DIF.RED CEL	COST TO CHARGE		
86985			SPLITTING BLOOD OR PRODUCTS,EA	COST TO CHARGE		
86999			UNLISTED TRANSF. PROCEDURE	COST TO CHARGE		
87003			SMALL ANIMAL INOCULATION	\$15.00		
87015			SPECIMEN CONCENTRATION	\$5.10		

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87040			BLOOD CULTURE FOR BACTERIA	\$9.00		
87045			STOOL CULTURE FOR BACTERIA	\$9.00		
87046			STOOL ADD PATH ISOLATION AND P	\$3.00		
87070			CULTURE SPECIMEN, BACTERIA	\$9.00		
87071			QUANTITATIVE,AEROBIC ISOLATES	\$6.00		
87073			QUANT,ANEROBIC W ISOL ANY SOUR	\$6.00		
87075			CULTURE SPECIMEN, BACTERIA	\$9.00		
87076			BACTERIA IDENTIFICATION	\$6.00		
87077			AEROBIC ISOLATE CULTURE EACH I	\$9.00		
87081			BACTERIA CULTURE SCREEN	\$9.00		
87084			PRESUM PATHOG CUL SCR:W/COLONY	\$3.00		
87086			URINE CULTURE, COLONY COUNT	\$6.00		
87088			URINE BACTERIA CULTURE	\$2.70		
87101			SKIN FUNGUS CULTURE	\$8.00		
87102			FUNGUS ISOLATION CULTURE	\$8.00		
87103			CULTURE,FUNGI,ISOLATION BLOOD	\$8.00		
87106			FUNGUS IDENTIFICATION	\$8.00		
87107			CULTURE MOLD	\$11.42		
87109			MYCOPLASMA CULTURE	\$14.00		
87110			CULTURE,CHLAMYDIA	\$15.00		
87116			MYCOBACTERIA CULTURE	\$6.00		
87118			MYCOBACTERIA IDENTIFICATION	\$12.00		
87140			CULTURE TYPING, FLUORESCENT	\$3.00		
87143			CULTURE TYPING, GLC METHOD	\$3.00		
87147			CULTURE TYPING, SEROLOGIC	\$3.00		
87149			IDENTIFICATION BY NUCLEIC ACID	\$22.00		
87150			CULTURE, TYPING: ID BY NUCLEIC	\$38.51		
87152			IDENTIFICATION BY PULSE FIELD	\$5.79		
87153			CULTURE, TYPING: ID BY NUCLEIC	\$126.59		
87158			CULTURE TYPING, ADDED METHOD	\$3.00		
87164			DARK FIELD EXAMINATION	\$6.00		
87166			DARK FIELD EXAMINATION	\$6.00		
87168			MACROSCOPIC EXAM ARTHROPOD	\$4.72		
87169			MACROSCOPIC EXAM:PARASITE	\$4.72		
87172			PINWORM EXAM(EG CELLOPHANE TAP	\$4.72		

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87176			ENDOTOXIN, BACTERIAL	\$6.40		
87177			OVA AND PARASITES SMEARS	\$5.10		
87181			ANTIBIOTIC SENSITIVITY, EACH	\$5.80		
87184			ANTIBIOTIC SENSITIVITY, EACH	\$9.00		
87185			ENZYME MICROBE SUSCEPTIBLE	\$5.25		
87186			ANTIBIOTIC SENSITIVITY, MIC	\$11.00		
87187			SUSCEPTIBILITY STUD MICRODIL E	\$13.00		
87188			ANTIBIOTIC SENSITIVITY, EACH	\$6.00		
87190			TB ANTIBIOTIC SENSITIVITY	\$0.78		
87197			SERUM BACTERICIDAL TITER	\$15.00		
87205			SMEAR, STAIN & INTERPRET, ROUT	\$4.20		
87206			SMEAR, STAIN & INTERPRET	\$4.20		
87207			SMEAR, STAIN & INTERPRET, SPEC	\$3.00		
87209			SMEAR PRIM.SOURCE COMPLEX SP.	\$19.23		
87210			SMEAR, STAIN & INTERPRET, WET	\$2.40		
87220			TISSUE EXAMINATION FOR FUNGI	\$2.40		
87230			TOXIN/ANTITOXIN ASSAY, TISSUE C	\$27.00		
87250			VIRUS INOCULATION FOR TEST	\$25.50		
87252			VIRUS ID:TISSUE CULT.INOCULATI	\$29.50		
87253			VIRUS ID:TISS CULT,ADD STDY,@	\$6.00		
87254			VIRUS ISOLATION:SHELL VIAL EAC	\$5.41		
87255			VIRUS ISOLATION:ID-NON IMMUNO	\$30.00		
87260			INFECTIOUSAGENT ANTIGEN:ADENOV	\$10.00		
87265			BORDETELLA PERTUSSIS	\$10.00		
87267			INFECT:AG:ANTIGEN:ENTERO:VIRUS	\$10.00		
87269			GIARDIA/INF AG ANTIGEN IMMUNO	\$10.00		
87270			CHLAMYDIA TRACHOMATIS	\$10.00		
87271			INFECT:AG:ANTI:CYTOMEGLOVIRUS	\$10.00		
87272			CRYPTOSPORIDIUM GIARDIA	\$12.00		
87273			HERPES SIMPLEX 2 AG	\$12.18		
87274			HERPES SIMPLEX VIRUS	\$12.80		
87275			INFLUENZA B VIRUS	\$12.18		
87276			INFLUENZA A VIRUS	\$12.00		
87277			LEGIONELLA MICDADEI	\$12.18		
87278			LEGIONELLA PNEUMOPHILA	\$15.00		

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87279			PARAINFLUENZA,AG,IF	\$12.18		
87280			RESPIRATORY SYNCYTIAL VIRUS	\$12.00		
87281			PNEUMOCYSTIS CARINI	\$12.18		
87283			RUBEOLA	\$12.18		
87285			TREPONEMA PALLIDUM	\$12.00		
87290			VARICELLA ZOSTER VIRUS	\$12.60		
87299			INFECTIOUS AGENT ANTIGEN BY FL	\$12.00		
87300			AG DETECTION POLYVAL EACH	\$6.00		
87301			INFECT.ANTIGEN ADENOVIRUS ENTE	\$12.00		
87305			INFECTIOUS AGENT ANTIGEN DETEC	\$12.02		
87320			CHLAMYDIA TRACHOMATIS	\$12.50		
87324			CLOSTRIDIUM DIFFICILE TOXIN A	\$12.50		
87327			CRPTOCOCCUS NEOFORMANS	\$12.18		
87328			CRYPTOSPORIDUM/GIARDIA	\$12.50		
87329			GIARDIA/INFECTION AG ANTIGEN ENZYM	\$12.00		
87332			CYTOMEGALOVIRUS	\$12.00		
87335			ESCHERICHIA COLI	\$12.00		
87336			ENTAMOEBIA HISTOLYTICA DISPAR G	\$12.18		
87337			ENTAMOEBIA HISTOLYTICA GROUP	\$12.18		
87338			INFECT AGENT ANT:HELI PYLORI:ST	COST TO CHARGE		
87339			HELI COBACTER PYLORI	\$12.18		
87340			HEPATITIS B SURFACE ANTIGEN HB	\$14.00		
87341			HEPATITIS B SURFACE ANTIGEN HB	\$11.42		
87350			HEPATITIS BE ANTIGEN HBEAG	\$14.00		
87380			HEPATITIS DELTA AGENT	\$20.00		
87385			HISTOPLASMA CAPSULATUM	\$15.00		
87389			INFECTIOUS AGENT ANTIGEN DETEC	\$26.29		
87390			HIV-1	\$15.00		
87391			HIV-2	\$15.00		
87400			INFLUENZA ALB,AG,EIA EACH	\$6.00		
87420			RESPIRATORY SYNCYTIAL VIRUS	\$12.00		
87425			ROTAVIRUS	\$12.00		
87427			SHIGA-LIKE TOXIN AG,EIA	\$12.18		
87430			STREPTOCOCCUS GROUP A	\$12.00		
87449			INF.AGENT ANTINOTOTHERWISE SPE	\$12.00		

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87450			INFECT AGENT ANTI NOSP SINGLE	\$10.00		
87451			AG DETECT POLYVAL,EIA,MULT	\$10.60		
87470			INFECT.AGENT DNA OR RNA DIRECT	\$20.00		
87471			QUINTANA AMPLIFIED PROBE TECH	\$30.00		
87472			BARTONELLA QUANTIFICATION	\$20.00		
87475			BORELIA BURGDORFERI NUCLEA ACI	\$25.00		
87476			BORRELIA BURGDORFERI NACID AMP	\$38.00		
87477			BORRELA BURGDORFERI NACID QUAN	\$20.00		
87480			CANDIDA SPECIES DIRECT PROBE N	\$25.00		
87481			CANDIDA SPECIES AMPLIFIED	\$38.00		
87482			CANDIDA SPECIES QUANTITATIVE	\$20.00		
87483			TEST FOR DETECTING NUCLEIC ACI	\$613.81		
87485			CHLAMYDIA PNEUMONIAE DIRECT PR	\$25.00		
87486			CHLAMYDIA PNEUMONIAE DIRECT PR	\$38.00		
87487			CLAMYDIA PNEUMONIAE QUANTIFICA	\$20.00		
87490			CHLAMYDIA TRACHOMATIS DIRECT P	\$20.00		
87491			CHLAMYDIA TRACHOMATIS AMPLIFIE	\$38.00		
87492			CHLAMYDIA TRACHOMATIS QUANTIFA	\$20.00		
87493			INFECTIOUS AGENT DETECTION BY	\$38.51		
87495			CYTOMEGALOVIRUS DIRECT PROBE	\$25.00		
87496			CYTOMEGALOVIRUS AMPLIFIED PROB	\$38.00		
87497			CYTOMEGALOVIRUS QUANTIFICATION	\$20.00		
87498			INFECTIOUS AGENT DETECTION BY	\$38.51		
87500			INFECTIOUS AGENT DETECTION BY	\$38.51		
87501			INFECTIOUS AGENT DETECTION BY	\$56.31		
87502			INFECTIOUS AGENT DETECTION BY	\$93.38		
87503			INFECTIOUS AGENT DETECTION BY	\$22.79		
87505			DETECTION TEST FOR DIGESTIVE T	\$140.78		
87506			DETECTION TEST FOR DIGESTIVE T	\$234.22		
87507			DETECTION TEST FOR DIGESTIVE T	\$457.38		
87510			GARDNERELLA VAGINALIS DIRECT P	\$25.00		
87511			GARDNERELLA VAGINALIS AMPLIFIE	\$28.00		
87512			GARDNERELLA VAGINALIS QUANTIFI	\$20.00		
87515			HEPATITUS B VIRUS DIRECT	\$25.00		
87516			HEPATITUS B VIRUS AMPLIFIED	\$38.00		

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87517			HEPATITUS B VIRUS QUANTIFICATI	\$20.00		
87520			HEPATITUS C DIRECR	\$25.00		
87521			HEPATITIS C AMPLIFIED PROBE	\$38.00		
87522			HEPATITUS C QUANTITATIVE	\$20.00		
87525			HEPATITIS G DIRECT PROBE	\$25.00		
87526			HEPATITIS G AMPLIFIED	\$38.00		
87527			HEPATIITS G QUANTIFICATION	\$20.00		
87528			HERPES SIMPLEX VIRUS DIRECT PR	\$25.00		
87529			HERPES SIMPLEX VIRUS AMPLIFIED	\$38.00		
87530			HERPES SIMPLEX QUANTIFICATION	\$20.00		
87531			HERPES VIRUS-6-DIRECT PROBE	\$25.00		
87532			HERPES VIRUS-6-AMPLIFIED PROBE	\$38.00		
87533			HERPES VIRUS-6-QUANTIFICATION	\$20.00		
87534			HIV-1 DIRECT PROBE	\$25.00		
87535			HIV-1-AMPLIFIED PROBE	\$38.00		
87536			HIV VIRAL LOAD TEST	\$92.87		
87537			HIV-2-DIRECT PROBE	\$25.00		
87538			HIV-2-AMPLIFIED PROBE	\$38.00		
87539			HIV-2-QUANTIFICATION	\$20.00		
87540			LEGIONELLA PNEUMOPHILIA	\$25.00		
87541			LEGIONELLA PNEUMOPHILIA	\$38.00		
87542			LEGIONELLA PNEUMOPHILA QUANTIF	\$20.00		
87550			MYCOBACTERIA SPECIES DIRECT PR	\$25.00		
87551			MYCOBACTERIA SPECIES DIRECT PR	\$38.00		
87552			MYCOBACTERIA SPECIES QUANTIFIC	\$20.00		
87555			MYCOBACTERIA TUBERCULOSIS DIRE	\$25.00		
87556			MYCOBACTERIA TUBERCULOLSIS AMP	\$38.00		
87557			MYCOBACTERIA TUBERCULOSIS QUAN	\$20.00		
87560			MYCOBACTERIA AVIUM INTRA. DIRE	\$25.00		
87561			MYCOBACTERIA AVIUM INTRA. AMPL	\$38.00		
87562			MYCOBACTERIA AVIUM INTRACELLUL	\$20.00		
87580			MYCOPLASMA PNEUMONIA DIRECT PR	\$25.00		
87581			MYCOPLASMA PNEUMONIA AMPLIFIED	\$38.00		
87582			MYCOPLASMA PNEUMONIA QUANTIFIE	\$20.00		
87590			NEISSERIA GONORRHOEAE DIRECT P	\$25.00		

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87591			NEISSERIA GONORRHOEAE AMPLIFIE	\$38.00		
87592			NEISSERIA GONORRHOEAE QUANTIFI	\$20.00		
87623			DETECTION TEST FOR HUMAN PAPIL	\$38.51		
87624			DETECTION TEST FOR HUMAN PAPIL	\$38.51		
87625			DETECTION TEST FOR HUMAN PAPIL	\$38.51		
87631			INFECTIOUS AGENT DETECTION BY	\$140.78		
87632			INFECTIOUS AGENT DETECTION BY	\$234.22		
87633			INFECTIOUS AGENT DETECTION BY	\$457.38		
87640			INFECTIOUS AGENT DETECTION BY	\$38.51		
87641			INFECTIOUS AGENT DETECTION BY	\$38.51		
87650			STREPTOCOCCUS GROUP A DIRECT P	\$25.00		
87651			STREPTOCOCCUS GROUP A AMPLIFIE	\$38.00		
87652			STREPTOCOCCUS GROUP A QUANTIFI	\$20.00		
87653			INFECTIOUS AGENT DETECTION BY	\$38.51		
87660			TRICHMONAS/VAG/DIRECT PROBE TE	\$25.00		
87661			INFECTIOUS AGENT DETECTION BY	\$38.51		
87797			INFECTIOUS AGENT BY DNA NOT SP	\$25.00		
87798			INFECTIOUS AGENT BY DNA SPECIF	\$38.00		
87799			INFECTIOUS AGENT BY DNA NOT SP	\$20.00		
87800			DETECT ANGT MULT,DNA/RNA DIREC	\$25.00		
87801			DETECT AGNT MULT,DNA,AMPLIFIED	\$38.00		
87802			INFECTIOUS AG ANTIGEN STREP B	\$12.17		
87803			INFECTIOUS AGENT ANTIGEN CLOST	\$12.17		
87804			INFECTIOUS AG ANTIGEN INFLUENZ	\$12.17		
87806			DETECTION TEST FOR HIV-1	\$26.42		
87807			INFECTIOUS AG ANTIGEN DET IMMU	\$12.02		
87808			INFECTIOUS AGENT ANTIGEN DETEC	\$12.02		
87809			INFECTIOUS AGENT ANTIGEN DETEC	\$12.02		
87810			INF.AGENT CHLAMYDIA IMMUNOASSA	\$12.00		
87850			NESSERIA GONORRHOEAE	\$12.00		
87880			STREP A	\$12.00		
87899			NOT OTHERWISE SP	\$12.00		
87900			INFECT AG. DRUG SUS PHENOTYPE	\$143.04		
87901			GENOTYPE	\$287.75		
87902			INFECTIOUS AGENT GENOTYPE HEP	\$287.75		

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87903			PHENOTYPE (FIRST TEN DRUGS TES	\$546.18		
87904			PHENOTYPE EACH ADDITIONAL DRUG	\$28.66		
87905			INFECTIOUS AGENT ENZYMATIC ACT	\$13.34		
87906			INFECTIOUS AGENT GENOTYPE ANAL	\$141.26		
87910			INFECTIOUS AGENT GENOTYPE ANAL	\$282.52		
87912			INFECTIOUS AGENT GENOTYPE ANAL	\$282.52		
87999			UNLISTED MICROBIOLOGY PROCEDUR	COST TO CHARGE		
88104			CYTOPATHOLOGY	COST TO CHARGE		
88106			CYTOPATHOLOGY	COST TO CHARGE		
88108			CYTOPATHOLOGY, FLUIDS, WASHING	COST TO CHARGE		
88112			CYTOPATH/LIQUID BASE SLIDE PRE	\$18.00		
88120			CYTOPATHOLOGY, IN SITU HYBRIDI	\$553.65		
88121			CYTOPATHOLOGY, IN SITU HYBRIDI	\$495.01		
88125			FORENSIC CYTOPATHOLOGY	COST TO CHARGE		
88130			SEX CHROMATIN IDENTIFICATION	\$9.65		
88140			SEX CHROMATIN IDENTIFICATION	\$4.20		
88141			CYTOPATH.CERVICAL AND VAGINAL	\$6.00		
88142			CYTOPATH.CERVICAL/VAGINAL PROF	\$18.00		
88143			CYTOPATH/C/VAG T/LAYER C/RESCR	\$18.00		
88147			CYTO/PATH C/VAG AUTOMATED PHYS	\$13.48		
88148			CYTO/PATH C/VAG AUTO RESCREENI	\$13.48		
88150			CYTOPATHOLOGY, PAP SMEAR	\$6.00		
88152			CYTOPATH CERVICAL VAGINAL MANU	\$6.00		
88153			CYTO/PATH,SLIDES C/V RESCREEN	\$6.00		
88154			CYTOPATH C/VAG SELECT C/PHYS S	\$6.00		
88155			CYTOPATH,(PAP):W/ DEF.HORMONAL	\$6.00		
88160			CYTOPATHOLOGY	COST TO CHARGE		
88161			CYTOPATH.....:PREP,SCREEN,INTER	COST TO CHARGE		
88162			CYTOPATH...:EXT.STUDY,+5 SLIDES	COST TO CHARGE		
88164			CYTOPATH SLIDES C/VAG BETHESDA	\$6.00		
88165			CYTOPATH SLIDES C/VAG BETHESDA	\$6.00		
88166			CYTOPATH TBS SYS C/VAG AUTO	\$6.00		
88167			CYTOPATH TBS C/VAG SELECT	\$6.00		
88172			IMMEDIATE EVAL/ASPIRATE,SPEC A	COST TO CHARGE		
88173			FINE NEEDLE ASPIRATE...:INTERP/	COST TO CHARGE		

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CPT/ HCPCS/ CDT/ PRACTITIONER	MOD 1	MOD 2	SHORT - DESCRIPTION	MAXIMUM FEE ALLOWANCE SPECIALIST	MAXIMUM FEE ALLOWANCE NON- SPECIALIST	IND
88174			CYTOPATH:ANYREPORT SYS AUTO TH	\$23.50		
88175			CYTOW/SER:BY,AUTO,THIN LAYER P	\$28.50		
88177			CYTOPATHOLOGY, EVALUATION OF F	\$26.53		
88182			FLOW CYTOMETRY EACH CELL SURFA	\$64.98		
88184			FLOW.CYTOMETRY-CELL FIRST MARK	\$55.47		
88185			FLOW CYTOMETRY-CELL SURFACE TC	\$33.89		
88187			FLOW CYTOMETRY,INTREP:2-8 MARK	\$51.02		
88188			FLOW-CYTOMETRY INTERP:9-15 MAR	\$64.17		
88189			FLOW-CYTOMETRY,INTERP:16 OR MO	\$78.18		
88199			UNLISTED CYTOPATHOLOGY PROCEDU	COST TO CHARGE		
88230			TISSUE CULT. CHROM ANA LYMP	\$90.00		
88233			TISSUE CULT. CHROM ANAL SKIN O	\$90.00		
88235			TISSUE CULT CHROM ANALYSIS	\$90.00		
88237			TISSU CULT CHROM:BONE MARROW C	\$90.00		
88239			TISSUE CULT ANAL:OTHER TISSUE	\$90.00		
88240			CRYO P/STORAGE OF CELLS EACH C	\$7.75		
88241			FROZEN CELL PREPARATION	\$7.75		
88245			CHROM ANAL/BREAKAGE SYND:25 CE	\$184.00		
88248			CHROM ANAL/BREAKAGE SYND,100 C	\$230.00		
88249			CHROMOSOME ANALYSIS SCORE 100	\$230.00		
88262			CHROMOSOME COUNT: 1-20 CELLS	\$136.03		
88263			CHROM ANAL:45 CELL-MOSAICISM,.	\$184.00		
88264			CHROMOSOME ANALYSIS:ANALYZE 20	\$136.03		
88267			CHROMOSOME COUNT: AMNIOTIC	\$230.00		
88271			CYTOGENETICS DNA PROBE FISH EA	\$16.00		
88273			CYTOGENETICS 10-30	\$35.00		
88274			CYTOGENETICS 25-99	\$45.00		
88275			CYTOGENETICS 100-300	\$55.00		
88280			CHROMOSOME COUNT: ADDITIONAL	\$34.00		
88283			CHROM ANAL:ADD SPEC BANDING TE	\$46.00		
88285			CHROMOSOME COUNT: ADDITIONAL	\$21.23		
88289			CHROM ANAL:ADD HI RESOLUTION S	\$40.00		
88291			CYTO/MOLECULAR REPORT	\$26.82		
88299			UNLISTED CYTOGENIC STUDY	COST TO CHARGE		
88300			SURGICAL PATHOLOGY, GROSS	COST TO CHARGE		

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88302			SURGICAL PATHOLOGY, COMPLETE	COST TO CHARGE		
88304			SURGICAL PATHOLOGY, COMPLETE	COST TO CHARGE		
88305			SURGICAL PATHOLOGY, COMPLETE	COST TO CHARGE		
88307			SURGICAL PATHOLOGY, COMPLETE	COST TO CHARGE		
88309			SURGICAL PATHOLOGY, COMPLETE	COST TO CHARGE		
88311			SURGICAL PATHOLOGY: DECALCIFIC	COST TO CHARGE		
88312			SPECIAL STAINS	COST TO CHARGE		
88313			SPECIAL STAINS	COST TO CHARGE		
88314			GROSS & MICROSCOPIC EXAM 3 SPE	COST TO CHARGE		
88319			DETERMINATIVE HISTOCHEMISTRY T	COST TO CHARGE		
88321			MICROSLIDE CONSULTATION	COST TO CHARGE		
88323			MICROSLIDE CONSULTATION	COST TO CHARGE		
88325			COMPREHENSIVE REVIEW OF DATA	COST TO CHARGE		
88329			CONSULTATION DURING SURGERY	COST TO CHARGE		
88331			CONSULTATION DURING SURGERY	COST TO CHARGE		
88332			CONSULTATION DURING SURGERY	COST TO CHARGE		
88333			CYTOLOGIC EXAM (TOUCHPREP,SQUA	\$82.30		
88334			CYTOLOGIC EXAM EACH ADD SITE	\$52.05		
88341			SPECIAL STAINED SPECIMEN SLIDE	\$81.31		
88342			IMMUNOCYTOCHEMISTRY (INCLUDING	COST TO CHARGE		
88344			SPECIAL STAINED SPECIMEN SLIDE	\$154.88		
88346			IMMUNOFLUORESCENT ST EA DIRECT	\$40.00		
88347			IMMUNOFLUORESCENT ST EA ANT IN	\$45.00		
88348			ELECTRON MICROSCOPY	COST TO CHARGE		
88350			ANTIBODY EVALUATION	COST TO CHARGE		
88355			MORPHOMETRIC ANALYSIS:SKELETAL	COST TO CHARGE		
88356			SKELETAL MUSCLE NERVE:MORPHOME	COST TO CHARGE		
88358			MORPHOMETRIC ANALYSIS TUMOR	COST TO CHARGE		
88360			TUMOR-IMMUNO-EG,HER-2/NEU ESTR	\$124.58		
88361			TUMOR HER 2/NEU QUANT/OR SEMIQ	\$94.00		
88362			NERVE TEASING PREPARATIONS	COST TO CHARGE		
88363			EXAMINATION AND SELECTION OF R	\$20.50		
88364			CELL EXAMINATION	\$117.64		
88365			TISSUE IN SITU HYBRIDIZATION I	\$47.25		
88366			CELL EXAMINATION	\$230.31		

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88367			IN-SITU HYBIRD-QUANT-SEMI QUAT	\$94.35		
88368			IN SITU HYBIRD QUANT SEMI EACH	\$103.93		
88369			MICROSCOPIC GENETIC EXAMINATIO	\$95.41		
88371			PROTEIN ANAL TISSUE,INT & REPO	COST TO CHARGE		
88372			PROTEIN ANAL TISSUE:IMM PROBE	COST TO CHARGE		
88373			MICROSCOPIC GENETIC EXAMINATIO	\$70.29		
88374			MICROSCOPIC GENETIC EXAMINATIO	\$306.10		
88377			MICROSCOPIC GENETIC EXAMINATIO	\$364.75		
88380			MICRODISSECTION	COST TO CHARGE		
88381			MICRODISSECTION (IE, SAMPLE PR	\$109.09		
88387			MACROSCOPIC EXAMINATION,DISSEC	\$32.99		
88388			MACROSCOPIC EXAMINATION,DISSEC	\$30.28		
88399			UNLISTED SURGICAL PATHOLOGY PR	COST TO CHARGE		
88720			BILIRUBIN TOTAL TRANSCUTANEOUS	\$5.47		
88738			HEMOGLOBIN (HGB), QUANTITATIVE	\$5.50		
88740			HEMOGLOBIN QUANTITATIVE TRANSC	\$5.47		
88741			HEMOGLOBIN QUANTITATIVE TRANSC	\$5.47		
88749			UNLISTED IN VIVO (EG TRANSCUTA	COST TO CHARGE		
89049			CAFFEINE HALOTHAWE INTREP AND	\$239.00		
89050			BODY FLUID CELL COUNT	\$0.90		
89051			BODY FLUID CELL COUNT	\$0.90		
89055			LEUKOCYTE COUNT,FECAL	\$4.76		
89060			CRYSTAL IDENTIFICATION BY COMP	\$8.50		
89125			SPECIMEN FAT STAIN	\$0.60		
89160			EXAM FECES FOR MEAT FIBERS	\$2.10		
89190			NASAL SMEAR FOR EOSINOPHILS	\$2.20		
89205			OCCULT BLOOD,ANY SOURCE EXCEPT	\$1.20		
89220			SPUTUM OBTAINING SPEC AEROSOL	\$8.00		
89230			SWEAT COLLECTION IONTOPHORESIS	\$2.12		
89310			SEMEN ANALYSIS	\$4.80		
89320			COMPLETE SEMEN ANALYSIS	\$9.00		
89321			SEMEN ANALYSIS	\$9.00		
89322			SEMEN ANALYSIS: VOLUME, COUNT,	\$17.01		
89325			SPERM ANTIBODIES	\$13.00		
89331			SPERM EVALUATION, FOR RETROGRA	\$21.50		

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				ALLOWANCE SPECIALIST	ALLOWANCE NON- SPECIALIST	
89398			UNLISTED REPRODUCTIVE MEDICINE	COST TO CHARGE		