101 CMR: EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES

101 CMR 320.00: RATES FOR CLINICAL LABORATORY SERVICES

Section

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320.01: General Provisions

(1) Scope and Purpose. 101 CMR 320.00 governs the payment rates for clinical laboratory services rendered to publicly aided individuals. The rates set forth in 101 CMR 320.00 do not apply to individuals covered by M.G.L. c. 152 (the Workers' Compensation Act). Rates for services rendered to such individuals are set forth in 114.3 CMR 40.00: *Rates for Services under M.G.L. c. 152, Workers' Compensation Act*.

(2) Applicable Dates of Service. Rates contained in 101 CMR 320.00 apply for dates of service provided on or after November 6, 2026.

(3) Coverage. The payment rates in 101 CMR 320.00 are full compensation for clinical laboratory services rendered to publicly aided individuals.

(4) Coding Updates and Corrections. EOHHS may publish procedure code updates and corrections in the form of an administrative bulletin. Updates may reference coding systems including, but not limited to, the American Medical Association's *Current Procedural Terminology (CPT)*. The publication of such updates and corrections lists

(a) codes for which only the code numbers changed, with the corresponding cross-references between existing and new codes;

(b) deleted codes for which there are no corresponding new codes; and

(c) codes for entirely new services that require pricing. EOHHS may list and price these codes according to the rate methodology used in setting clinical laboratory rates when Medicare fees are available (including, for codes relating to the 2019 coronavirus (COVID-19), at 100% of Medicare fees). When Medicare fees are not available, EOHHS may apply individual consideration (IC) in reimbursing for these codes until appropriate rates can be developed.

(5) Administrative Bulletins. EOHHS may issue administrative bulletins to:

(a) clarify its policy on and understanding of substantive provisions of 101 CMR 320.00;

(b) specify any clinical laboratory services subject to selective, volume purchase, preferred supplier, or preferred provider contract(s) between a vendor or provider and governmental unit(s), the governmental unit(s) and eligible vendor(s) or provider(s) subject to the contract; the duration of the contract, the prices at which such clinical laboratory services will be available to eligible providers (as defined by the contract, if applicable), the rates which eligible providers (as defined by the contract) will be paid by the relevant governmental

unit(s) for such clinical laboratory services, and any other information deemed necessary by EOHHS;
(c) specify any clinical laboratory services subject to rebate agreement(s) between a manufacturer and governmental unit(s), the governmental unit(s) and eligible providers subject to the agreement, the duration of the rebate agreement, the rates which will be paid to eligible providers (as defined by the applicable rebate agreement) by the relevant governmental unit(s) for the specified clinical laboratory services, and any other information deemed necessary by EOHHS.

(6) Disclaimer of Authorization of Services. 101 CMR 320.00 is neither authorization for nor approval of the substantive services for which rates are determined pursuant to 101 CMR 320.00. governmental units that purchase care are responsible for the definition, authorization, and approval of care and services extended to publicly aided individuals.

320.02: Definitions

As used in 101 CMR 320.00, unless the context requires otherwise, terms have the meanings in 101 CMR 320.02.

Allowable Fee. The amount of reimbursement that is paid by all governmental units for a laboratory service, as set forth in 101 CMR 320.04 and 101 CMR 320.05.

Bulk Purchase. A single purchase of a laboratory service (one or more tests) to be uniformly and concurrently performed on a minimum of 40 specimens of the same type. A single purchase of various, non-uniform laboratory services, such as by a physician, is not considered a bulk purchase, regardless of the number of specimens presented by such a purchaser to the laboratory.

Charge. The price of a laboratory service as determined by the clinical laboratory performing the service.

Clinical Laboratory. A laboratory where microbiological, chemical, hematological, biophysical, cytological, immuno-hematological, or pathological examinations are performed on materials derived from the human body to provide information for the diagnosis, prevention, or treatment of a disease or assessment of a medical condition.

Center. The Center for Health Information and Analysis established under M.G.L. c. 12C.

Eligible Provider of Laboratory Services. A person licensed by an appropriate Board of Registration to perform clinical laboratory services, such registration being in accordance with the provisions of M.G.L. c. 112; or an independent laboratory. Such persons and laboratories must meet all conditions of participation that have been or may be adopted by a governmental unit that purchases laboratory services. For purposes of 101 CMR 320.00, eligible providers of laboratory services do not include hospital laboratories.

EOHHS. The Executive Office of Health and Human Services established under M.G.L. c. 6A.

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Fee Schedule. (Description of Service and HCPCS/CPT Procedure Code). The Healthcare Common Procedure Coding System (HCPCS), which is based upon the American Medical Association (AMA) Current Procedural Terminology (CPT), is the basis by which all procedures are performed. The CPT handbook is updated by the AMA annually. All non-physician codes and terminology is defined by the Centers for Medicare & Medicaid Services (CMS) and set forth in the HCPCS file.

Governmental Unit. The Commonwealth, any department, division, agency, board, or commission of the Commonwealth and any political subdivision of the Commonwealth.

Independent Clinical Laboratory. A clinical laboratory that is operated independently from a hospital or from an attending or consulting physician's office. If the laboratory is operated or directed by one or more licensed physicians, it must offer its services to other physicians to qualify as an independent clinical laboratory. In cases where two or more distinct, physically separated laboratory facilities operate under the same name and the same director, each facility that performs clinical laboratory services is treated as a separate independent clinical laboratory.

Profile (or Panel) Tests. Any group of tests, whether performed manually, automated, or semi-automated, that is ordered for a specific patient on a specified day, and has at least one of the following characteristics.

(a) The group of tests is designated as a profile or panel by the clinical laboratory performing the tests.

(b) The group of tests is performed by the clinical laboratory and the customary charge is less than the sum of that clinical laboratory's usual and customary charges for the individual tests in that group.

Publicly Aided Individual. A person who receives medical care and services for which a governmental unit is liable, in whole or in part, under a statutory program of public assistance.

Rate. The lesser of the charge or the allowable fee, as defined in 101 CMR 320.02.

Usual and Customary Charge. The lowest fee charged by an independent clinical laboratory for any laboratory service (including individual and profile tests) specified by 101 CMR 320.00 or by such independent clinical laboratory, which fee is in effect at the time such laboratory service is performed, other than a fee offered for a bulk purchase, as defined in 101 CMR 320.02.

320.03: Covered and Excluded Billing Situations

(1) Covered Billing Situations. Except as provided in 101 CMR 320.03(2), the method of determining rates of payment contained in 101 CMR 320.00 apply to clinical laboratory services provided to publicly aided individuals, with the following conditions.

(a) If clinical laboratory services are performed by an independent clinical laboratory, then the independent clinical laboratory must bill the governmental unit directly. The independent clinical laboratory may not bill indirectly by having a physician or dentist bill either the payer or the patient for services performed by the independent clinical laboratory.

(b) If clinical laboratory services are performed by a registered physician or dentist, or by an agent under his or her direct supervision, in his or her private medical office or clinic, then the registered physician or dentist must bill the governmental unit directly.

(2) Excluded Billing Situations. 101 CMR 320.00 and the rates of payment contained in 101 CMR 320.00 do not govern the rates of payment for clinical laboratory services if

(a) the service is provided in state institutions by a state-employed physician, dentist, or dentist consultant;

(b) the service is provided by a physician or dentist whose salary from a hospital or affiliated medical school includes compensation for professional services rendered to patients; or

(c) the physician, dentist, or independent laboratory does not customarily bill private patients without health insurance under comparable circumstances.

(3) Professional and Technical Component Services. Some laboratory services have both professional and technical components. The professional component is set forth in 101 CMR 316.00: *Rates for Surgery and Anesthesia Services,* while the technical component is set forth in 101 CMR 320.00.

(a) The relevant codes for laboratory services containing both professional and technical components are 83020, 84165, 84166, 84181, 84182, 85390, 85576, 86255, 86256, 86320, 86325, 86334, 86335, 87164, 87207, and 89060.

(b) Surgical pathology services are excluded from 101 CMR 320.00 and instead included in 101 CMR 316.00: *Rates for Surgery and Anesthesia Services*. Surgical pathology services include codes 80503, 80504, 80505, 80506, 85060, 85097, 85396, 86077, 86078, 86079, 86153, 86486, 86510, 86580, 88104, 88106, 88108, 88112, 88120, 88121, 88125, 88141, 88160, 88161, 88162, 88172, 88173, 88177, 88182, 88184, 88185, 88187, 88188, 88189, 88199, 88291, 88299, 88300, 88302, 88304, 88305, 88307, 88309, 88311, 88312, 88313, 88314, 88319, 88321, 88323, 88325, 88329, 88331, 88332, 88333, 88334, 88341, 88344, 88346, 88348, 88350, 88355, 88356, 88358, 88360, 88361, 88362, 88363, 88365, 88366, 88367, 88368, 88369, 88374, 88375, 88377, 88380, 88381, 88387, 88399, 89049, 89220, 89230, and 89240.

320.04: General Rate Provisions and Maximum Fees

(1) Rate Determination. Payment rates are the lowest of

(a) the eligible provider's usual and customary charge to patients other than publicly aided individuals or industrial accident patients;

(b) the applicable listing from the schedule of allowable fees listed in 101 CMR 320.05; or

(c) the amount that is allowable under 42 U.S.C. § 1396b(i)(7).

(2) Individual Consideration (IC). Unlisted procedures and laboratory tests designated IC are individually considered items. The eligible provider's bill for such a test must be accompanied by a brief report of the procedure or test performed and the eligible provider's usual and customary charge for that procedure or test. Determination of appropriate payments for procedures and tests designated IC are in accordance with the following standards and criteria:

(a) time required to perform the procedure;

(b) degree of skill required in the procedure performed;

(c) severity or complexity of the patient's disease, disorder, or disability;

(d) policies, procedures, and practices of other third-party purchasers of care;
(e) prevailing medical-laboratory ethics and accepted custom of the medical-laboratory community; and
(f) such other standards and criteria as may be adopted by EOHHS. In no event may an eligible provider bill or be paid in excess of the usual and customary charge for the service.

(3) Administrative and Supervisory Duties. The rates of payment under 101 CMR 320.00 are full compensation for clinical laboratory services rendered to publicly aided individuals, as well as any related administrative or supervisory duties in connection with clinical laboratory services, without regard to where the service is rendered.

(4) Profile (or Panel) Tests. In no event may an eligible provider bill or be paid separately for each of the tests included within a profile test when a profile test has either been performed by the provider or requested by an authorized person.

(5) Limitations on Payment for Panel Tests.
(a) Any combination of the following tests when performed on a single patient on a single date of service is regarded as a single panel test:
80047 Basic Metabolic Panel—calcium, ionized (Consists of 82330, 82374, 82435, 82565, 82947, 84132, 84295, 84520): eight individual tests
80048 Basic Metabolic Panel—calcium, total (Consists of 82310, 82374, 82435, 82565, 82947, 84132, 84295, 84520): eight individual tests
80051 Electrolyte Panel (Consists of 82374, 82435, 84132, 84295): four individual tests
80053 Comprehensive Metabolic Panel (Consists of 82040, 82247, 82310, 82374, 82435, 82565, 82947, 84075, 84132, 84155, 84295, 84460, 84450, 84520): 14 individual tests
80061 Lipid Panel (Consists of 82465, 83718, 84478): three individual tests
80069 Renal Function Panel (Consists of 82040, 82310, 82374, 82435, 82565, 82947, 84100, 84132, 84295, 84520): ten individual tests
80076 Hepatic Function Panel (Consists of 82040, 82247, 82248, 84075, 84155, 84460, 84450): seven individual tests
82040 Albumin; serum
82247 Bilirubin; total
82248 Bilirubin; direct
82310 Calcium; total
82374 Carbon dioxide (bicarbonate)
82435 Chloride; blood
82465 Cholesterol, serum or whole blood, total
82550 Creatine kinase (CK), (CPK); total
82565 Creatinine; blood
82947 Glucose; quantitative
82977 Glutamyltransferase, gamma (GGT)
83615 Lactate dehydrogenase (LD), (LDH)
84075 Phosphatase, alkaline
84100 Phosphorus, inorganic (phosphate)
84132 Potassium; serum, plasma or whole blood
84155 Protein, total, except refractometry

84295 Sodium; serum, plasma or whole blood
84450 Transferase; aspatrate amino (AST) (SGOT)
84460 Transferase; alanine amino (ALT) (SGPT)
84478 Triglycerides
84520 Urea nitrogen; quantitative
84550 Uric acid; blood

(b) Panel tests are reimbursed according to the following schedule.

Code	Rate	Description
ATP02	$5.60	Auto Test Panel Pricing Code, 1–2 Tests
ATP03	$7.14	Auto Test Panel Pricing Code, 3 Tests
ATP04	$7.54	Auto Test Panel Pricing Code, 4 Tests
ATP05	$8.39	Auto Test Panel Pricing Code, 5 Tests
ATP06	$8.41	Auto Test Panel Pricing Code, 6 Tests
ATP07	$8.78	Auto Test Panel Pricing Code, 7 Tests
ATP08	$9.09	Auto Test Panel Pricing Code, 8 Tests
ATP09	$9.34	Auto Test Panel Pricing Code, 9 Tests
ATP10	$9.34	Auto Test Panel Pricing Code, 10 Tests
ATP11	$9.49	Auto Test Panel Pricing Code, 11 Tests
ATP12	$9.69	Auto Test Panel Pricing Code, 12 Tests
ATP13	$11.34	Auto Test Panel Pricing Code, 13 Tests
ATP14	$11.34	Auto Test Panel Pricing Code, 14 Tests
ATP15	$11.34	Auto Test Panel Pricing Code, 15 Tests
ATP16	$11.34	Auto Test Panel Pricing Code, 16 Tests
ATP17	$11.42	Auto Test Panel Pricing Code, 17 Tests
ATP18	$11.42	Auto Test Panel Pricing Code, 18 Tests
ATP19	$11.89	Auto Test Panel Pricing Code, 19 Tests
ATP20	$12.28	Auto Test Panel Pricing Code, 20 Tests
ATP21	$12.66	Auto Test Panel Pricing Code, 21 Tests
ATP22	$13.04	Auto Test Panel Pricing Code, 22 Tests
ATP23	$13.04	Auto Test Panel Pricing Code, 23 or more Tests

320.05: Allowable Fees

Code	Rate	Description
Organ and Disease Oriented Panels		
80047	$12.11	Basic metabolic panel (Calcium, ionized) This panel must include the following: Calcium, ionized (82330) Carbon dioxide (bicarbonate) (82374) Chloride (82435) Creatinine (82565) Glucose (82947) Potassium (84132) Sodium (84295) Urea Nitrogen (BUN) (84520)
80048	$7.46	Basic metabolic panel (Calcium, total) This panel must include the following: Calcium, total (82310) Carbon dioxide (bicarbonate) (82374) Chloride (82435) Creatinine (82565) Glucose (82947) Potassium (84132) Sodium (84295) Urea nitrogen (BUN) (84520)

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Code	Rate	Description
80050	$17.65	General health panel This panel must include the following: Comprehensive metabolic panel (80053) Blood count, complete (CBC), automated and automated differential WBC count (85025 or 85027 and 85004) OR Blood count, complete (CBC), automated (85027) and appropriate manual differential WBC count (85007 or 85009) Thyroid stimulating hormone (TSH) (84443)
80051	$6.18	Electrolyte panel This panel must include the following: Carbon dioxide (bicarbonate) (82374) Chloride (82435) Potassium (84132) Sodium (84295)
80053	$9.31	Comprehensive metabolic panel This panel must include the following: Albumin (82040) Bilirubin, total (82247) Calcium, total (82310) Carbon dioxide (bicarbonate) (82374) Chloride (82435) Creatinine (82565) Glucose (82947) Phosphatase, alkaline (84075) Potassium (84132) Protein, total (84155) Sodium (84295) Transferase, alanine amino (ALT) (SGPT) (84460) Transferase, aspartate amino (AST) (SGOT) (84450) Urea nitrogen (BUN) (84520)
80055	$42.16	Obstetric panel This panel must include the following: Blood count, complete (CBC), automated and automated differential WBC count (85025 or 85027 and 85004) OR Blood count, complete (CBC), automated (85027) and appropriate manual differential WBC count (85007 or 85009) Hepatitis B surface antigen (HBsAg) (87340) Antibody, rubella (86762) Syphilis test, non-treponemal antibody; qualitative (eg, VDRL, RPR, ART) (86592) Antibody screen, RBC, each serum technique (86850) Blood typing, ABO (86900) AND Blood typing, Rh (D) (86901)
80061	$11.81	Lipid panel This panel must include the following: Cholesterol, serum, total (82465) Lipoprotein, direct measurement, high density cholesterol (HDL cholesterol) (83718) Triglycerides (84478)
80069	$7.65	Renal function panel This panel must include the following: Albumin (82040) Calcium, total (82310) Carbon dioxide (bicarbonate) (82374) Chloride (82435) Creatinine (82565) Glucose (82947) Phosphorus inorganic (phosphate) (84100) Potassium (84132) Sodium (84295) Urea nitrogen (BUN) (84520)
80074	$42.00	Acute hepatitis panel This panel must include the following: Hepatitis A antibody (HAAb), IgM antibody (86709) Hepatitis B core antibody (HBcAb), IgM antibody (86705) Hepatitis B surface antigen (HBsAg) (87340) Hepatitis C antibody (86803)

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Code	Rate	Description
80076	$7.20	Hepatic function panel This panel must include the following: Albumin (82040) Bilirubin, total (82247) Bilirubin, direct (82248) Phosphatase, alkaline (84075) Protein, total (84155) Transferase, alanine amino (ALT) (SGPT) (84460) Transferase, aspartate amino (AST) (SGOT) (84450)
80081	$66.02	Obstetric panel (includes HIV testing)
Drug Testing and Therapeutic Assays		
80143	$16.44	Acetaminophen
80145	$34.01	Adalimumab
80150	$13.30	Amikacin
80151	$16.44	Amiodarone
80155	$34.01	Caffeine
80156	$12.85	Carbamazepine; total
80157	$11.68	Carbamazepine; free
80158	$15.92	Cyclosporine
80159	$17.77	Clozapine
80161	$16.44	Carbamazepine; -10,11-epoxide
80162	$11.71	Digoxin; total
80163	$11.71	Digoxin; free
80164	$11.94	Valproic acid (dipropylacetic acid); total
80165	$11.94	Valproic acid (dipropylacetic acid); free
80167	$16.44	Felbamate
80168	$14.41	Ethosuximide
80169	$12.11	Everolimus
80170	$14.45	Gentamicin
80171	$19.11	Gabapentin, whole blood, serum, or plasma
80173	$13.92	Haloperidol
80175	$11.68	Lamotrigine
80176	$12.95	Lidocaine
80177	$11.68	Levetiracetam
80178	$5.83	Lithium
80179	$16.44	Salicylate
80180	$15.92	Mycophenolate (mycophenolic acid)
80181	$16.44	Flecainide
80183	$11.68	Oxcarbazepine
80184	$13.49	Phenobarbital
80185	$11.68	Phenytoin; total
80186	$12.13	Phenytoin; free
80187	$23.91	Posaconazole
80188	$14.63	Primidone
80189	$23.91	Itraconazole
80190	$52.91	Procainamide
80192	$14.77	Procainamide; with metabolites (eg, n-acetyl procainamide)
80193	$34.01	Leflunomide

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Code	Rate	Description
80194	$12.88	Quinidine
80195	$12.11	Sirolimus
80197	$12.11	Tacrolimus
80198	$12.47	Theophylline
80199	$23.91	Tiagabine
80200	$14.22	Tobramycin
80201	$10.51	Topiramate
80202	$11.94	Vancomycin
80203	$11.68	Zonisamide
80204	$34.01	Methotrexate
80210	$23.91	Rufinamide
80220	$16.44	Hydroxychloroquine
80230	$34.01	Infliximab
80235	$23.91	Lacosamide
80280	$34.01	Vedolizumab
80285	$23.91	Voriconazole
Evocative Suppression Testing		
80299	$16.44	Quantitation of therapeutic drug, not elsewhere specified
80305	$8.92	Drug test(s), presumptive, any number of drug classes, any number of devices or procedures; capable of being read by direct optical observation only (eg, utilizing immunoassay [eg, dipsticks, cups, cards, or cartridges]), includes sample validation when performed, per date of service
80306	$11.89	Drug test(s), presumptive, any number of drug classes, any number of devices or procedures; read by instrument assisted direct optical observation (eg, utilizing immunoassay [eg, dipsticks, cups, cards, or cartridges]), includes sample validation when performed, per date of service
80307	$47.55	Drug test(s), presumptive, any number of drug classes, any number of devices or procedures; by instrument chemistry analyzers (eg, utilizing immunoassay [eg, EIA, ELISA, EMIT, FPIA, IA, KIMS, RIA]), chromatography (eg, GC, HPLC), and mass spectrometry either with or without chromatography (eg, DART, DESI, GC-MS, GC-MS/MS, LC-MS, LC-MS/MS, LDTD, MALDI, TOF) includes sample validation when performed, per date of service
80400	$28.77	ACTH stimulation panel; for adrenal insufficiency This panel must include the following: Cortisol (82533 x 2)
80402	$76.69	ACTH stimulation panel; for 21 hydroxylase deficiency This panel must include the following: Cortisol (82533 x 2) 17 hydroxyprogesterone (83498 x 2)
80406	$69.02	ACTH stimulation panel; for 3 beta-hydroxydehydrogenase deficiency This panel must include the following: Cortisol (82533 x 2) 17 hydroxypregnenolone (84143 x 2)

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Code	Rate	Description
80408	$110.68	Aldosterone suppression evaluation panel (eg, saline infusion) This panel must include the following: Aldosterone (82088 x 2) Renin (84244 x 2)
80410	$70.88	Calcitonin stimulation panel (eg, calcium, pentagastrin) This panel must include the following: Calcitonin (82308 x 3)
80412	$706.93	Corticotropic releasing hormone (CRH) stimulation panel This panel must include the following: Cortisol (82533 x 6) Adrenocorticotropic hormone (ACTH) (82024 x 6)
80414	$45.54	Chorionic gonadotropin stimulation panel; testosterone response This panel must include the following: Testosterone (84403 x 2 on 3 pooled blood samples)
80415	$49.29	Chorionic gonadotropin stimulation panel; estradiol response This panel must include the following: Estradiol, total (82670 x 2 on 3 pooled blood samples)
80416	$184.59	Renal vein renin stimulation panel (eg, captopril) This panel must include the following: Renin (84244 x 6)
80417	$38.79	Peripheral vein renin stimulation panel (eg, captopril) This panel must include the following: Renin (84244 x 2)
80418	$511.03	Combined rapid anterior pituitary evaluation panel This panel must include the following: Adrenocorticotropic hormone (ACTH) (82024 x 4) Luteinizing hormone (LH) (83002 x 4) Follicle stimulating hormone (FSH) (83001 x 4) Prolactin (84146 x 4) Human growth hormone (HGH) (83003 x 4) Cortisol (82533 x 4) Thyroid stimulating hormone (TSH) (84443 x 4)
80420	$142.76	Dexamethasone suppression panel, 48 hour This panel must include the following: Free cortisol, urine (82530 x 2) Cortisol (82533 x 2) Volume measurement for timed collection (81050 x 2)
80422	$40.63	Glucagon tolerance panel; for insulinoma This panel must include the following: Glucose (82947 x 3) Insulin (83525 x 3)
80424	$44.53	Glucagon tolerance panel; for pheochromocytoma This panel must include the following: Catecholamines, fractionated (82384 x 2)
80426	$130.88	Gonadotropin releasing hormone stimulation panel This panel must include the following: Follicle stimulating hormone (FSH) (83001 x 4) Luteinizing hormone (LH) (83002 x 4)
80428	$58.82	Growth hormone stimulation panel (eg, arginine infusion, l-dopa administration) This panel must include the following: Human growth hormone (HGH) (83003 x 4)
80430	$114.05	Growth hormone suppression panel (glucose administration) This panel must include the following: Glucose (82947 x 3) Human growth hormone (HGH) (83003 x 4)

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Code	Rate	Description
80432	$146.05	Insulin-induced C-peptide suppression panel This panel must include the following: Insulin (83525) C-peptide (84681 x 5) Glucose (82947 x 5)
80434	$251.36	Insulin tolerance panel; for ACTH insufficiency This panel must include the following: Cortisol (82533 x 5) Glucose (82947 x 5)
80435	$90.83	Insulin tolerance panel; for growth hormone deficiency This panel must include the following: Glucose (82947 x 5) Human growth hormone (HGH) (83003 x 5)
80436	$80.39	Metyrapone panel This panel must include the following: Cortisol (82533 x 2) 11 deoxycortisol (82634 x 2)
80438	$44.46	Thyrotropin releasing hormone (TRH) stimulation panel; 1 hour This panel must include the following: Thyroid stimulating hormone (TSH) (84443 x 3)
80439	$59.27	Thyrotropin releasing hormone (TRH) stimulation panel; 2 hour This panel must include the following: Thyroid stimulating hormone (TSH) (84443 x 4)
Urinalysis		
81000	$3.55	Urinalysis, by dip stick or tablet reagent for bilirubin, glucose, hemoglobin, ketones, leukocytes, nitrite, pH, protein, specific gravity, urobilinogen, any number of these constituents; non-automated, with microscopy
81001	$2.80	Urinalysis, by dip stick or tablet reagent for bilirubin, glucose, hemoglobin, ketones, leukocytes, nitrite, pH, protein, specific gravity, urobilinogen, any number of these constituents; automated, with microscopy
81002	$3.07	Urinalysis, by dip stick or tablet reagent for bilirubin, glucose, hemoglobin, ketones, leukocytes, nitrite, pH, protein, specific gravity, urobilinogen, any number of these constituents; non-automated, without microscopy
81003	$1.98	Urinalysis, by dip stick or tablet reagent for bilirubin, glucose, hemoglobin, ketones, leukocytes, nitrite, pH, protein, specific gravity, urobilinogen, any number of these constituents; automated, without microscopy
81005	$1.91	Urinalysis; qualitative or semiquantitative, except immunoassays
81007	$26.44	Urinalysis; bacteriuria screen, except by culture or dipstick
81015	$2.69	Urinalysis; microscopic only
81020	$4.14	Urinalysis; 2 or 3 glass test
81025	$7.59	Urine pregnancy test, by visual color comparison methods
81050	$3.21	Volume measurement for timed collection, each
81099	IC	Unlisted urinalysis procedure

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Chemistry		
82009	$3.99	Ketone body(s) (eg, acetone, acetoacetic acid, beta-hydroxybutyrate); qualitative
82010	$7.20	Ketone body(s) (eg, acetone, acetoacetic acid, beta-hydroxybutyrate); quantitative
82013	$10.84	Acetylcholinesterase
82016	$14.54	Acylcarnitines; qualitative, each specimen
82017	$14.88	Acylcarnitines; quantitative, each specimen
82024	$34.06	Adrenocorticotropic hormone (ACTH)
82030	$22.75	Adenosine, 5-monophosphate, cyclic (cyclic AMP)
82040	$4.37	Albumin; serum, plasma or whole blood
82042	$6.86	Albumin; other source, quantitative, each specimen
82043	$5.10	Albumin; urine (eg, microalbumin), quantitative
82044	$5.49	Albumin; urine (eg, microalbumin), semiquantitative (eg, reagent strip assay)
82045	$29.93	Albumin; ischemia modified
82075	$26.46	Alcohol (ethanol); breath
82077	$15.23	Alcohol (ethanol); any specimen except urine and breath, immunoassay (eg, IA, EIA, ELISA, RIA, EMIT, FPIA) and enzymatic methods (eg, alcohol dehydrogenase)
82085	$8.56	Aldolase
82088	$35.94	Aldosterone
82103	$11.85	Alpha-1-antitrypsin; total
82104	$12.75	Alpha-1-antitrypsin; phenotype
82105	$14.79	Alpha-fetoprotein (AFP); serum
82106	$14.99	Alpha-fetoprotein (AFP); amniotic fluid
82107	$56.80	Alpha-fetoprotein (AFP); AFP-L3 fraction isoform and total AFP (including ratio)
82108	$22.47	Aluminum
82120	$5.28	Amines, vaginal fluid, qualitative
82127	$12.50	Amino acids; single, qualitative, each specimen
82128	$12.23	Amino acids; multiple, qualitative, each specimen
82131	$20.27	Amino acids; single, quantitative, each specimen
82135	$14.51	Aminolevulinic acid, delta (ALA)
82136	$17.29	Amino acids, 2 to 5 amino acids, quantitative, each specimen
82139	$14.88	Amino acids, 6 or more amino acids, quantitative, each specimen
82140	$12.85	Ammonia
82143	$8.25	Amniotic fluid scan (spectrophotometric)
82150	$5.71	Amylase
82154	$25.42	Androstanediol glucuronide
82157	$25.82	Androstenedione
82160	$22.53	Androsterone
82163	$18.10	Angiotensin II

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101 CMR 320.00: RATES FOR CLINICAL LABORATORY SERVICES

Code	Rate	Description
82164	$12.88	Angiotensin I—converting enzyme (ACE)
82166	$34.06	Anti-mullerian hormone (AMH)
82172	$18.60	Apolipoprotein, each
82175	$16.73	Arsenic
82180	$8.72	Ascorbic acid (Vitamin C), blood
82190	$14.02	Atomic absorption spectroscopy, each analyte
82232	$14.27	Beta-2 microglobulin
82233	$113.69	Beta-amyloid; 1-40 (Abeta 40)
82234	$113.69	Beta-amyloid; 1-42 (Abeta 42)
82239	$15.10	Bile acids; total
82240	$23.44	Bile acids; cholylglycine
82247	$4.43	Bilirubin; total
82248	$4.43	Bilirubin; direct
82252	$4.02	Bilirubin; feces, qualitative
82261	$14.88	Biotinidase, each specimen
82270	$3.86	Blood, occult, by peroxidase activity (eg, guaiac), qualitative; feces, consecutive collected specimens with single determination, for colorectal neoplasm screening (ie, patient was provided 3 cards or single triple card for consecutive collection)
82271	$4.69	Blood, occult, by peroxidase activity (eg, guaiac), qualitative; other sources
82272	$3.73	Blood, occult, by peroxidase activity (eg, guaiac), qualitative, feces, 1–3 simultaneous determinations, performed for other than colorectal neoplasm screening
82274	$14.04	Blood, occult, by fecal hemoglobin determination by immunoassay, qualitative, feces, 1–3 simultaneous determinations
82286	$4.55	Bradykinin
82300	$20.85	Cadmium
82306	$26.10	Vitamin D; 25 hydroxy, includes fraction(s), if performed
82308	$23.63	Calcitonin
82310	$4.55	Calcium; total
82330	$12.06	Calcium; ionized
82331	$11.76	Calcium; after calcium infusion test
82340	$5.32	Calcium; urine quantitative, timed specimen
82355	$10.21	Calculus; qualitative analysis
82360	$11.35	Calculus; quantitative analysis, chemical
82365	$11.38	Calculus; infrared spectroscopy
82370	$11.04	Calculus; X-ray diffraction
82373	$15.93	Carbohydrate deficient transferrin
82374	$4.30	Carbon dioxide (bicarbonate)
82375	$10.86	Carboxyhemoglobin; quantitative
82376	$12.41	Carboxyhemoglobin; qualitative
82378	$16.72	Carcinoembryonic antigen (CEA)

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101 CMR 320.00: RATES FOR CLINICAL LABORATORY SERVICES

Code	Rate	Description
82379	$14.88	Carnitine (total and free), quantitative, each specimen
82380	$8.13	Carotene
82382	$24.08	Catecholamines; total urine
82383	$25.64	Catecholamines; blood
82384	$22.27	Catecholamines; fractionated
82387	$15.93	Cathepsin-D
82390	$9.47	Ceruloplasmin
82397	$12.45	Chemiluminescent assay
82415	$11.17	Chloramphenicol
82435	$4.06	Chloride; blood
82436	$5.07	Chloride; urine
82438	$4.41	Chloride; other source
82441	$5.30	Chlorinated hydrocarbons, screen
82465	$3.84	Cholesterol, serum or whole blood, total
82480	$6.94	Cholinesterase; serum
82482	$8.65	Cholinesterase; RBC
82485	$18.21	Chondroitin B sulfate, quantitative
82495	$17.88	Chromium
82507	$24.52	Citrate
82523	$16.47	Collagen cross links, any method
82525	$10.94	Copper
82528	$19.86	Corticosterone
82530	$14.74	Cortisol; free
82533	$14.37	Cortisol; total
82540	$4.09	Creatine
82542	$21.24	Column chromatography, includes mass spectrometry, if performed (eg, HPLC, LC, LC/MS, LC/MS-MS, GC, GC/MS-MS, GC/MS, HPLC/MS), non-drug analyte(s) not elsewhere specified, qualitative or quantitative, each specimen
82550	$5.74	Creatine kinase (CK), (CPK); total
82552	$11.81	Creatine kinase (CK), (CPK); isoenzymes
82553	$10.19	Creatine kinase (CK), (CPK); MB fraction only
82554	$10.47	Creatine kinase (CK), (CPK); isoforms
82565	$4.52	Creatinine; blood
82570	$4.57	Creatinine; other source
82575	$8.34	Creatinine; clearance
82585	$12.47	Cryofibrinogen
82595	$5.71	Cryoglobulin, qualitative or semi-quantitative (eg, cryocrit)
82600	$17.11	Cyanide
82607	$13.30	Cyanocobalamin (Vitamin B-12);
82608	$12.63	Cyanocobalamin (Vitamin B-12); unsaturated binding capacity
82610	$16.33	Cystatin C
82615	$8.42	Cystine and homocystine, urine, qualitative
82626	$22.28	Dehydroepiandrosterone (DHEA)

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101 CMR 320.00: RATES FOR CLINICAL LABORATORY SERVICES

Code	Rate	Description
82627	$19.60	Dehydroepiandrosterone-sulfate (DHEA-S)
82633	$27.32	Desoxycorticosterone, 11-
82634	$25.82	Deoxycortisol, 11-
82638	$10.80	Dibucaine number
82642	$25.82	Dihydrotestosterone (DHT)
82652	$33.95	Vitamin D; 1, 25 dihydroxy, includes fraction(s), if performed
82653	$20.26	Elastase, pancreatic (EL-1), fecal; quantitative
82656	$10.17	Elastase, pancreatic (EL-1), fecal; qualitative or semi-quantitative
82657	$19.55	Enzyme activity in blood cells, cultured cells, or tissue, not elsewhere specified; nonradioactive substrate, each specimen
82658	$38.83	Enzyme activity in blood cells, cultured cells, or tissue, not elsewhere specified; radioactive substrate, each specimen
82664	$54.24	Electrophoretic technique, not elsewhere specified
82668	$16.57	Erythropoietin
82670	$24.64	Estradiol; total
82671	$28.48	Estrogens; fractionated
82672	$19.14	Estrogens; total
82677	$21.32	Estriol
82679	$22.00	Estrone
82681	$24.64	Estradiol; free, direct measurement (eg, equilibrium dialysis)
82693	$13.14	Ethylene glycol
82696	$23.14	Etiocholanolone
82705	$4.50	Fat or lipids, feces; qualitative
82710	$14.82	Fat or lipids, feces; quantitative
82715	$20.26	Fat differential, feces, quantitative
82725	$16.55	Fatty acids, nonesterified
82726	$17.42	Very long chain fatty acids
82728	$12.02	Ferritin
82731	$56.80	Fetal fibronectin, cervicovaginal secretions, semi-quantitative
82735	$16.35	Fluoride
82746	$12.96	Folic acid; serum
82747	$15.57	Folic acid; RBC
82757	$15.29	Fructose, semen
82759	$18.94	Galactokinase, RBC
82760	$9.88	Galactose
82775	$18.58	Galactose-1-phosphate uridyl transferase; quantitative
82776	$10.35	Galactose-1-phosphate uridyl transferase; screen
82777	$39.02	Galectin-3
82784	$8.20	Gammaglobulin (immunoglobulin); IgA, IgD, IgG, IgM, each
82785	$14.52	Gammaglobulin (immunoglobulin); IgE
82787	$7.07	Gammaglobulin (immunoglobulin); immunoglobulin subclasses (eg, IgG1, 2, 3, or 4), each
82800	$9.70	Gases, blood, pH only

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101 CMR 320.00: RATES FOR CLINICAL LABORATORY SERVICES

Code	Rate	Description
82803	$22.99	Gases, blood, any combination of pH, pCO2, pO2, CO2, HCO3 (including calculated O2 saturation)
82805	$69.47	Gases, blood, any combination of pH, pCO2, pO2, CO2, HCO3 (including calculated O2 saturation); with O2 saturation, by direct measurement, except pulse oximetry
82810	$8.62	Gases, blood, O2 saturation only, by direct measurement, except pulse oximetry
82820	$11.76	Hemoglobin-oxygen affinity (pO2 for 50% hemoglobin saturation with oxygen)
82930	$5.92	Gastric acid analysis, includes pH if performed, each specimen
82938	$15.60	Gastrin after secretin stimulation
82941	$15.55	Gastrin
82943	$12.60	Glucagon
82945	$3.47	Glucose, body fluid, other than blood
82946	$15.67	Glucagon tolerance test
82947	$3.47	Glucose; quantitative, blood (except reagent strip)
82948	$4.44	Glucose; blood, reagent strip
82950	$4.19	Glucose; post glucose dose (includes glucose)
82951	$11.35	Glucose; tolerance test (GTT), 3 specimens (includes glucose)
82952	$3.46	Glucose; tolerance test, each additional beyond 3 specimens (List separately in addition to code for primary procedure)
82955	$8.55	Glucose-6-phosphate dehydrogenase (G6PD); quantitative
82960	$5.34	Glucose-6-phosphate dehydrogenase (G6PD); screen
82962	$2.89	Glucose, blood by glucose monitoring device(s) cleared by the FDA specifically for home use
82963	$18.94	Glucosidase, beta
82965	$11.60	Glutamate dehydrogenase
82977	$6.35	Glutamyltransferase, gamma (GGT)
82978	$13.62	Glutathione
82979	$8.32	Glutathione reductase, RBC
82985	$14.78	Glycated protein
83001	$16.39	Gonadotropin; follicle stimulating hormone (FSH)
83002	$16.33	Gonadotropin; luteinizing hormone (LH)
83003	$14.70	Growth hormone, human (HGH) (somatotropin)
83006	$66.67	Growth stimulation expressed gene 2 (ST2, Interleukin 1 receptor like-1)
83009	$59.40	Helicobacter pylori, blood test analysis for urease activity, non-radioactive isotope (eg, C-13)
83010	$11.09	Haptoglobin; quantitative
83012	$23.71	Haptoglobin; phenotypes
83013	$59.40	Helicobacter pylori; breath test analysis for urease activity, non-radioactive isotope (eg, C-13)
83014	$6.93	Helicobacter pylori; drug administration
83015	$18.47	Heavy metal (eg, arsenic, barium, beryllium, bismuth, antimony, mercury); qualitative, any number of analytes

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Code	Rate	Description
83018	$19.37	Heavy metal (eg, arsenic, barium, beryllium, bismuth, antimony, mercury); quantitative, each, not elsewhere specified
83020	$11.35	Hemoglobin fractionation and quantitation; electrophoresis (eg, A2, S, C, and/or F)
83021	$15.93	Hemoglobin fractionation and quantitation; chromatography (eg, A2, S, C, and/or F)
83026	$3.54	Hemoglobin; by copper sulfate method, non-automated
83030	$9.47	Hemoglobin; F (fetal), chemical
83033	$7.06	Hemoglobin; F (fetal), qualitative
83036	$8.56	Hemoglobin; glycosylated (A1C)
83037	$8.56	Hemoglobin; glycosylated (A1C) by device cleared by FDA for home use
83045	$5.72	Hemoglobin; methemoglobin, qualitative
83050	$7.23	Hemoglobin; methemoglobin, quantitative
83051	$6.45	Hemoglobin; plasma
83060	$7.76	Hemoglobin; sulfhemoglobin, quantitative
83065	$7.94	Hemoglobin; thermolabile
83068	$8.35	Hemoglobin; unstable, screen
83069	$3.48	Hemoglobin; urine
83070	$4.19	Hemosiderin, qualitative
83080	$14.88	b-Hexosaminidase, each assay
83088	$26.04	Histamine
83090	$15.80	Homocysteine
83150	$19.76	Homovanillic acid (HVA)
83491	$15.79	Hydroxycorticosteroids, 17- (17-OHCS)
83497	$11.38	Hydroxyindolacetic acid, 5-(HIAA)
83498	$23.96	Hydroxyprogesterone, 17-d
83500	$19.97	Hydroxyproline; free
83505	$21.43	Hydroxyproline; total
83516	$10.17	Immunoassay for analyte other than infectious agent antibody or infectious agent antigen; qualitative or semiquantitative, multiple step method
83518	$8.50	Immunoassay for analyte other than infectious agent antibody or infectious agent antigen; qualitative or semiquantitative, single step method (eg, reagent strip)
83519	$16.23	Immunoassay for analyte other than infectious agent antibody or infectious agent antigen; quantitative, by radioimmunoassay (eg, RIA)
83520	$15.23	Immunoassay for analyte other than infectious agent antibody or infectious agent antigen; quantitative, not otherwise specified
83521	$15.23	Immunoglobulin light chains (ie, kappa, lambda), free, each
83525	$10.08	Insulin; total
83527	$11.42	Insulin; free
83528	$17.48	Intrinsic factor
83529	$15.23	Interleukin-6 (IL-6)

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101 CMR 320.00: RATES FOR CLINICAL LABORATORY SERVICES

Code	Rate	Description
83540	$5.71	Iron
83550	$7.71	Iron binding capacity
83570	$7.80	Isocitric dehydrogenase (IDH)
83582	$13.64	Ketogenic steroids, fractionation
83586	$11.29	Ketosteroids, 17- (17-KS); total
83593	$25.13	Ketosteroids, 17- (17-KS); fractionation
83605	$10.20	Lactate (lactic acid)
83615	$5.33	Lactate dehydrogenase (LD), (LDH);
83625	$11.28	Lactate dehydrogenase (LD), (LDH); isoenzymes, separation and quantitation
83630	$17.37	Lactoferrin, fecal; qualitative
83631	$17.31	Lactoferrin, fecal; quantitative
83632	$17.83	Lactogen, human placental (HPL) human chorionic somatomammotropin
83633	$9.92	Lactose, urine, qualitative
83655	$10.68	Lead
83661	$19.39	Fetal lung maturity assessment; lecithin sphingomyelin (L/S) ratio
83662	$16.68	Fetal lung maturity assessment; foam stability test
83663	$16.68	Fetal lung maturity assessment; fluorescence polarization
83664	$17.04	Fetal lung maturity assessment; lamellar body density
83670	$8.65	Leucine aminopeptidase (LAP)
83690	$6.08	Lipase
83695	$12.63	Lipoprotein (a)
83698	$40.84	Lipoprotein-associated phospholipase A2 (Lp-PLA2)
83700	$9.93	Lipoprotein, blood; electrophoretic separation and quantitation
83701	$29.86	Lipoprotein, blood; high resolution fractionation and quantitation of lipoproteins including lipoprotein subclasses when performed (eg, electrophoresis, ultracentrifugation)
83704	$30.15	Lipoprotein, blood; quantitation of lipoprotein particle number(s) (eg, by nuclear magnetic resonance spectroscopy), includes lipoprotein particle subclass(es), when performed
83718	$7.22	Lipoprotein, direct measurement; high density cholesterol (HDL cholesterol)
83719	$11.24	Lipoprotein, direct measurement; VLDL cholesterol
83721	$9.26	Lipoprotein, direct measurement; LDL cholesterol
83722	$30.15	Lipoprotein, direct measurement; small dense LDL cholesterol
83727	$15.16	Luteinizing releasing factor (LRH)
83735	$5.91	Magnesium
83775	$6.50	Malate dehydrogenase
83785	$23.50	Manganese
83789	$21.26	Mass spectrometry and tandem mass spectrometry (eg, MS, MS/MS, MALDI, MS-TOF, QTOF), non-drug analyte(s) not elsewhere specified, qualitative or quantitative, each specimen
83825	$14.34	Mercury, quantitative

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101 CMR 320.00: RATES FOR CLINICAL LABORATORY SERVICES

Code	Rate	Description
83835	$14.94	Metanephrines
83857	$9.47	Methemalbumin
83861	$19.82	Microfluidic analysis utilizing an integrated collection and analysis device, tear osmolarity
83864	$25.13	Mucopolysaccharides, acid, quantitative
83872	$5.17	Mucin, synovial fluid (Ropes test)
83873	$15.17	Myelin basic protein, cerebrospinal fluid
83874	$11.39	Myoglobin
83876	$44.85	Myeloperoxidase (MPO)
83880	$34.62	Natriuretic peptide
83883	$11.99	Nephelometry, each analyte not elsewhere specified
83884	$102.50	Neurofilament light chain (NfL)
83885	$21.61	Nickel
83915	$9.83	Nucleotidase 5'-
83916	$24.15	Oligoclonal immune (oligoclonal bands)
83918	$20.81	Organic acids; total, quantitative, each specimen
83919	$14.51	Organic acids; qualitative, each specimen
83921	$18.70	Organic acid, single, quantitative
83930	$5.83	Osmolality; blood
83935	$6.01	Osmolality; urine
83937	$26.32	Osteocalcin (bone g1a protein)
83945	$12.74	Oxalate
83950	$56.80	Oncoprotein; HER-2/neu
83951	$56.80	Oncoprotein; des-gamma-carboxy-prothrombin (DCP)
83970	$36.40	Parathormone (parathyroid hormone)
83986	$3.16	pH; body fluid, not otherwise specified
83987	$3.16	pH; exhaled breath condensate
83992	$15.79	Phencyclidine (PCP)
83993	$17.31	Calprotectin, fecal
84030	$4.85	Phenylalanine (PKU), blood
84035	$3.51	Phenylketones, qualitative
84060	$6.74	Phosphatase, acid; total
84066	$8.52	Phosphatase, acid; prostatic
84075	$4.57	Phosphatase, alkaline;
84078	$7.28	Phosphatase, alkaline; heat stable (total not included)
84080	$13.03	Phosphatase, alkaline; isoenzymes
84081	$14.57	Phosphatidylglycerol
84085	$8.32	Phosphogluconate, 6-, dehydrogenase, RBC
84087	$9.46	Phosphohexose isomerase
84100	$4.18	Phosphorus inorganic (phosphate);
84105	$5.10	Phosphorus inorganic (phosphate); urine
84106	$5.13	Porphobilinogen, urine; qualitative
84110	$7.44	Porphobilinogen, urine; quantitative

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101 CMR 320.00: RATES FOR CLINICAL LABORATORY SERVICES

Code	Rate	Description
84112	$86.52	Evaluation of cervicovaginal fluid for specific amniotic fluid protein(s) (eg, placental alpha microglobulin-1 [PAMG-1], placental protein 12 [PP12], alpha-fetoprotein), qualitative, each specimen
84119	$11.78	Porphyrins, urine; qualitative
84120	$12.97	Porphyrins, urine; quantitation and fractionation
84126	$34.49	Porphyrins, feces, quantitative
84132	$4.20	Potassium; serum, plasma or whole blood
84133	$4.17	Potassium; urine
84134	$12.87	Prealbumin
84135	$18.76	Pregnanediol
84138	$18.56	Pregnanetriol
84140	$18.23	Pregnenolone
84143	$20.12	17-hydroxypregnenolone
84144	$18.40	Progesterone
84145	$24.00	Procalcitonin (PCT)
84146	$17.09	Prolactin
84150	$36.84	Prostaglandin, each
84152	$16.22	Prostate specific antigen (PSA); complexed (direct measurement)
84153	$16.22	Prostate specific antigen (PSA); total
84154	$16.22	Prostate specific antigen (PSA); free
84155	$3.24	Protein, total, except by refractometry; serum, plasma or whole blood
84156	$3.24	Protein, total, except by refractometry; urine
84157	$3.53	Protein, total, except by refractometry; other source (eg, synovial fluid, cerebrospinal fluid)
84160	$4.95	Protein, total, by refractometry, any source
84163	$13.27	Pregnancy-associated plasma protein-A (PAPP-A)
84165	$9.47	Protein; electrophoretic fractionation and quantitation, serum
84166	$15.72	Protein; electrophoretic fractionation and quantitation, other fluids with concentration (eg, urine, CSF)
84181	$15.02	Protein; Western Blot, with interpretation and report, blood or other body fluid
84182	$25.76	Protein; Western Blot, with interpretation and report, blood or other body fluid, immunological probe for band identification, each
84202	$12.65	Protoporphyrin, RBC; quantitative
84203	$8.59	Protoporphyrin, RBC; screen
84206	$23.54	Proinsulin
84207	$24.78	Pyridoxal phosphate (Vitamin B-6)
84210	$12.77	Pyruvate
84220	$8.32	Pyruvate kinase
84228	$10.26	Quinine
84233	$77.50	Receptor assay; estrogen

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Code	Rate	Description
84234	$57.22	Receptor assay; progesterone
84235	$62.82	Receptor assay; endocrine, other than estrogen or progesterone (specify hormone)
84238	$32.25	Receptor assay; non-endocrine (specify receptor)
84244	$19.39	Renin
84252	$17.85	Riboflavin (Vitamin B-2)
84255	$22.51	Selenium
84260	$27.32	Serotonin
84270	$19.16	Sex hormone binding globulin (SHBG)
84275	$11.85	Sialic acid
84285	$22.23	Silica
84295	$4.24	Sodium; serum, plasma or whole blood
84300	$4.46	Sodium; urine
84302	$4.29	Sodium; other source
84305	$18.75	Somatomedin
84307	$16.12	Somatostatin
84311	$7.14	Spectrophotometry, analyte not elsewhere specified
84315	$2.89	Specific gravity (except urine)
84375	$34.39	Sugars, chromatographic, TLC or paper chromatography
84376	$4.85	Sugars (mono-, di-, and oligosaccharides); single qualitative, each specimen
84377	$4.85	Sugars (mono-, di-, and oligosaccharides); multiple qualitative, each specimen
84378	$10.17	Sugars (mono-, di-, and oligosaccharides); single quantitative, each specimen
84379	$10.17	Sugars (mono-, di-, and oligosaccharides); multiple quantitative, each specimen
84392	$4.84	Sulfate, urine
84393	$113.69	Tau, phosphorylated (eg, pTau 181, pTau 217), each
84394	$113.69	Tau, total (tTau)
84402	$22.46	Testosterone; free
84403	$22.76	Testosterone; total
84410	$45.22	Testosterone; bioavailable, direct measurement (eg, differential precipitation)
84425	$18.72	Thiamine (Vitamin B-1)
84430	$10.26	Thiocyanate
84431	$30.96	Thromboxane metabolite(s), including thromboxane if performed, urine
84432	$14.16	Thyroglobulin
84433	$19.55	Thiopurine S-methyltransferase (TPMT)
84436	$6.06	Thyroxine; total
84437	$5.71	Thyroxine; requiring elution (eg, neonatal)
84439	$7.95	Thyroxine; free
84442	$13.03	Thyroxine binding globulin (TBG)

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101 CMR 320.00: RATES FOR CLINICAL LABORATORY SERVICES

Code	Rate	Description
84443	$14.82	Thyroid stimulating hormone (TSH)
84445	$44.85	Thyroid stimulating immune globulins (TSI)
84446	$12.50	Tocopherol alpha (Vitamin E)
84449	$15.87	Transcortin (cortisol binding globulin)
84450	$4.57	Transferase; aspartate amino (AST) (SGOT)
84460	$4.67	Transferase; alanine amino (ALT) (SGPT)
84466	$11.25	Transferrin
84478	$5.06	Triglycerides
84479	$5.71	Thyroid hormone (T3 or T4) uptake or thyroid hormone binding ratio (THBR)
84480	$12.50	Triiodothyronine T3; total (TT-3)
84481	$14.94	Triiodothyronine T3; free
84482	$13.90	Triiodothyronine T3; reverse
84484	$11.00	Troponin, quantitative
84485	$6.35	Trypsin; duodenal fluid
84488	$6.44	Trypsin; feces, qualitative
84490	$8.76	Trypsin; feces, quantitative, 24-hour collection
84510	$9.37	Tyrosine
84512	$8.90	Troponin, qualitative
84520	$3.48	Urea nitrogen; quantitative
84525	$4.52	Urea nitrogen; semiquantitative (eg, reagent strip test)
84540	$4.90	Urea nitrogen, urine
84545	$6.35	Urea nitrogen, clearance
84550	$3.99	Uric acid; blood
84560	$4.48	Uric acid; other source
84577	$14.82	Urobilinogen, feces, quantitative
84578	$3.94	Urobilinogen, urine; qualitative
84580	$8.42	Urobilinogen, urine; quantitative, timed specimen
84583	$5.34	Urobilinogen, urine; semiquantitative
84585	$13.67	Vanillylmandelic acid (VMA), urine
84586	$31.16	Vasoactive intestinal peptide (VIP)
84588	$29.93	Vasopressin (antidiuretic hormone, ADH)
84590	$10.24	Vitamin A
84591	$15.04	Vitamin, not otherwise specified
84597	$12.10	Vitamin K
84600	$15.09	Volatiles (eg, acetic anhydride, diethylether)
84620	$11.39	Xylose absorption test, blood and/or urine
84630	$10.04	Zinc
84681	$18.35	C-peptide
84702	$13.27	Gonadotropin, chorionic (hCG); quantitative
84703	$6.63	Gonadotropin, chorionic (hCG); qualitative
84704	$13.48	Gonadotropin, chorionic (hCG); free beta chain
84830	$11.20	Ovulation tests, by visual color comparison methods for human luteinizing hormone

101 CMR: EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES

101 CMR 320.00: RATES FOR CLINICAL LABORATORY SERVICES

Code	Rate	Description
84999	$4.46	Unlisted chemistry procedure
Hematology and Coagulation		
85002	$4.25	Bleeding time
85004	$5.71	Blood count; automated differential WBC count
85007	$3.35	Blood count; blood smear, microscopic examination with manual differential WBC count
85008	$3.02	Blood count; blood smear, microscopic examination without manual differential WBC count
85009	$4.47	Blood count; manual differential WBC count, buffy coat
85013	$6.17	Blood count; spun microhematocrit
85014	$2.09	Blood count; hematocrit (Hct)
85018	$2.09	Blood count; hemoglobin (Hgb)
85025	$6.85	Blood count; complete (CBC), automated (Hgb, Hct, RBC, WBC and platelet count) and automated differential WBC count
85027	$5.71	Blood count; complete (CBC), automated (Hgb, Hct, RBC, WBC and platelet count)
85032	$3.80	Blood count; manual cell count (erythrocyte, leukocyte, or platelet) each
85041	$2.66	Blood count; red blood cell (RBC), automated
85044	$3.80	Blood count; reticulocyte, manual
85045	$3.52	Blood count; reticulocyte, automated
85046	$4.91	Blood count; reticulocytes, automated, including 1 or more cellular parameters (eg, reticulocyte hemoglobin content [CHr], immature reticulocyte fraction [IRF], reticulocyte volume [MRV], RNA content), direct measurement
85048	$2.24	Blood count; leukocyte (WBC), automated
85049	$3.95	Blood count; platelet, automated
85055	$31.52	Reticulated platelet assay
85130	$10.49	Chromogenic substrate assay
85170	$14.37	Clot retraction
85175	$17.96	Clot lysis time, whole blood dilution
85210	$11.45	Clotting; factor II, prothrombin, specific
85220	$15.57	Clotting; factor V (AcG or proaccelerin), labile factor
85230	$15.79	Clotting; factor VII (proconvertin, stable factor)
85240	$15.79	Clotting; factor VIII (AHG), 1-stage
85244	$18.01	Clotting; factor VIII related antigen
85245	$20.23	Clotting; factor VIII, VW factor, ristocetin cofactor
85246	$20.23	Clotting; factor VIII, VW factor antigen
85247	$20.23	Clotting; factor VIII, von Willebrand factor, multimetric analysis
85250	$16.79	Clotting; factor IX (PTC or Christmas)
85260	$15.79	Clotting; factor X (Stuart-Prower)
85270	$15.79	Clotting; factor XI (PTA)
85280	$17.06	Clotting; factor XII (Hageman)

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101 CMR 320.00: RATES FOR CLINICAL LABORATORY SERVICES

Code	Rate	Description
85290	$14.41	Clotting; factor XIII (fibrin stabilizing)
85291	$8.03	Clotting; factor XIII (fibrin stabilizing), screen solubility
85292	$16.69	Clotting; prekallikrein assay (Fletcher factor assay)
85293	$16.69	Clotting; high molecular weight kininogen assay (Fitzgerald factor assay)
85300	$10.45	Clotting inhibitors or anticoagulants; antithrombin III, activity
85301	$9.53	Clotting inhibitors or anticoagulants; antithrombin III, antigen assay
85302	$10.59	Clotting inhibitors or anticoagulants; protein C, antigen
85303	$12.21	Clotting inhibitors or anticoagulants; protein C, activity
85305	$10.24	Clotting inhibitors or anticoagulants; protein S, total
85306	$13.51	Clotting inhibitors or anticoagulants; protein S, free
85307	$13.51	Activated Protein C (APC) resistance assay
85335	$11.35	Factor inhibitor test
85337	$15.23	Thrombomodulin
85345	$4.14	Coagulation time; Lee and White
85347	$3.77	Coagulation time; activated
85348	$3.96	Coagulation time; other methods
85360	$7.42	Euglobulin lysis
85362	$6.08	Fibrin(ogen) degradation (split) products (FDP) (FSP); agglutination slide, semiquantitative
85366	$70.96	Fibrin(ogen) degradation (split) products (FDP) (FSP); paracoagulation
85370	$10.96	Fibrin(ogen) degradation (split) products (FDP) (FSP); quantitative
85378	$8.57	Fibrin degradation products, D-dimer; qualitative or semiquantitative
85379	$8.98	Fibrin degradation products, D-dimer; quantitative
85380	$8.98	Fibrin degradation products, D-dimer; ultrasensitive (eg, for evaluation for venous thromboembolism), qualitative or semiquantitative
85384	$8.57	Fibrinogen; activity
85385	$12.75	Fibrinogen; antigen
85390	$13.65	Fibrinolysins or coagulopathy screen, interpretation and report
85397	$27.21	Coagulation and fibrinolysis, functional activity, not otherwise specified (eg, ADAMTS-13), each analyte
85400	$6.80	Fibrinolytic factors and inhibitors; plasmin
85410	$6.80	Fibrinolytic factors and inhibitors; alpha-2 antiplasmin
85415	$15.16	Fibrinolytic factors and inhibitors; plasminogen activator
85420	$5.76	Fibrinolytic factors and inhibitors; plasminogen, except antigenic assay
85421	$8.98	Fibrinolytic factors and inhibitors; plasminogen, antigenic assay
85441	$3.70	Heinz bodies; direct
85445	$6.01	Heinz bodies; induced, acetyl phenylhydrazine

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101 CMR 320.00: RATES FOR CLINICAL LABORATORY SERVICES

Code	Rate	Description
85460	$6.82	Hemoglobin or RBCs, fetal, for fetomaternal hemorrhage; differential lysis (Kleihauer-Betke)
85461	$8.25	Hemoglobin or RBCs, fetal, for fetomaternal hemorrhage; rosette
85475	$7.82	Hemolysin, acid
85520	$11.54	Heparin assay
85525	$10.44	Heparin neutralization
85530	$11.54	Heparin-protamine tolerance test
85536	$6.07	Iron stain, peripheral blood
85540	$7.58	Leukocyte alkaline phosphatase with count
85547	$7.58	Mechanical fragility, RBC
85549	$16.54	Muramidase
85555	$6.59	Osmotic fragility, RBC; unincubated
85557	$11.78	Osmotic fragility, RBC; incubated
85576	$21.97	Platelet, aggregation (in vitro), each agent
85597	$15.86	Phospholipid neutralization; platelet
85598	$15.86	Phospholipid neutralization; hexagonal phospholipid
85610	$3.78	Prothrombin time
85611	$3.47	Prothrombin time; substitution, plasma fractions, each
85612	$15.42	Russell viper venom time (includes venom); undiluted
85613	$8.45	Russell viper venom time (includes venom); diluted
85635	$8.69	Reptilase test
85651	$3.77	Sedimentation rate, erythrocyte; non-automated
85652	$2.38	Sedimentation rate, erythrocyte; automated
85660	$4.86	Sickling of RBC, reduction
85670	$5.09	Thrombin time; plasma
85675	$6.04	Thrombin time; titer
85705	$8.49	Thromboplastin inhibition, tissue
85730	$5.30	Thromboplastin time, partial (PTT); plasma or whole blood
85732	$5.71	Thromboplastin time, partial (PTT); substitution, plasma fractions, each
85810	$10.29	Viscosity
85999	IC	Unlisted hematology and coagulation procedure
Immunology		
86000	$6.16	Agglutinins, febrile (eg, Brucella, Francisella, Murine typhus, Q fever, Rocky Mountain spotted fever, scrub typhus), each antigen
86001	$6.90	Allergen specific IgG quantitative or semiquantitative, each allergen
86003	$4.60	Allergen specific IgE; quantitative or semiquantitative, crude allergen extract, each
86005	$7.03	Allergen specific IgE; qualitative, multiallergen screen (eg, disk, sponge, card)
86008	$15.81	Allergen specific IgE; quantitative or semiquantitative, recombinant or purified component, each

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101 CMR 320.00: RATES FOR CLINICAL LABORATORY SERVICES

Code	Rate	Description
86015	$10.63	Actin (smooth muscle) antibody (ASMA), each
86021	$13.27	Antibody identification; leukocyte antibodies
86022	$16.20	Antibody identification; platelet antibodies
86023	$10.99	Antibody identification; platelet associated immunoglobulin assay
86036	$10.63	Antineutrophil cytoplasmic antibody (ANCA); screen, each antibody
86037	$10.63	Antineutrophil cytoplasmic antibody (ANCA); titer, each antibody
86038	$10.66	Antinuclear antibodies (ANA)
86039	$9.84	Antinuclear antibodies (ANA); titer
86041	$16.23	Acetylcholine receptor (AChR); binding antibody
86042	$16.23	Acetylcholine receptor (AChR); blocking antibody
86043	$10.63	Acetylcholine receptor (AChR); modulating antibody
86051	$10.17	Aquaporin-4 (neuromyelitis optica [NMO]) antibody; enzyme-linked immunosorbent immunoassay (ELISA)
86052	$10.63	Aquaporin-4 (neuromyelitis optica [NMO]) antibody; cell-based immunofluorescence assay (CBA), each
86053	$33.27	Aquaporin-4 (neuromyelitis optica [NMO]) antibody; flow cytometry (ie, fluorescence-activated cell sorting [FACS]), each
86060	$6.44	Antistreptolysin 0; titer
86063	$5.09	Antistreptolysin 0; screen
86140	$4.57	C-reactive protein;
86141	$11.42	C-reactive protein; high sensitivity (hsCRP)
86146	$22.44	Beta 2 Glycoprotein I antibody, each
86147	$22.44	Cardiolipin (phospholipid) antibody, each Ig class
86148	$14.17	Anti-phosphatidylserine (phospholipid) antibody
86152	$221.16	Cell enumeration using immunologic selection and identification in fluid specimen (eg, circulating tumor cells in blood)
86155	$14.10	Chemotaxis assay, specify method
86156	$7.12	Cold agglutinin; screen
86157	$7.11	Cold agglutinin; titer
86160	$10.58	Complement; antigen, each component
86161	$10.58	Complement; functional activity, each component
86162	$17.92	Complement; total hemolytic (CH50)
86171	$8.83	Complement fixation tests, each antigen
86200	$11.42	Cyclic citrullinated peptide (CCP), antibody
86215	$11.68	Deoxyribonuclease, antibody
86225	$12.12	Deoxyribonucleic acid (DNA) antibody; native or double stranded
86226	$10.68	Deoxyribonucleic acid (DNA) antibody; single stranded
86231	$10.66	Endomysial antibody (EMA), each immunoglobulin (Ig) class
86235	$15.81	Extractable nuclear antigen, antibody to, any method (eg, nRNP, SS-A, SS-B, Sm, RNP, Sc170, J01), each antibody

101 CMR: EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES

101 CMR 320.00: RATES FOR CLINICAL LABORATORY SERVICES

Code	Rate	Description
86255	$10.63	Fluorescent noninfectious agent antibody; screen, each antibody
86256	$10.63	Fluorescent noninfectious agent antibody; titer, each antibody
86258	$10.63	Gliadin (deamidated) (DGP) antibody, each immunoglobulin (Ig) class
86277	$13.88	Growth hormone, human (HGH), antibody
86280	$7.22	Hemagglutination inhibition test (HAI)
86294	$22.55	Immunoassay for tumor antigen, qualitative or semiquantitative (eg, bladder tumor antigen)
86300	$18.35	Immunoassay for tumor antigen, quantitative; CA 15-3 (27.29)
86301	$18.35	Immunoassay for tumor antigen, quantitative; CA 19-9
86304	$18.35	Immunoassay for tumor antigen, quantitative; CA 125
86305	$18.35	Human epididymis protein 4 (HE4)
86308	$4.57	Heterophile antibodies; screening
86309	$5.71	Heterophile antibodies; titer
86310	$6.50	Heterophile antibodies; titers after absorption with beef cells and guinea pig kidney
86316	$18.35	Immunoassay for tumor antigen, other antigen, quantitative (eg, CA 50, 72-4, 549), each
86317	$13.22	Immunoassay for infectious agent antibody, quantitative, not otherwise specified
86318	$15.95	Immunoassay for infectious agent antibody(ies), qualitative or semiquantitative, single-step method (eg, reagent strip)
86320	$26.39	Immunoelectrophoresis; serum
86325	$20.40	Immunoelectrophoresis; other fluids (eg, urine, cerebrospinal fluid) with concentration
86328	$45.28	Immunoassay for infectious agent antibody(ies), qualitative or semiquantitative, single step method (eg, reagent strip); severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19])
86329	$12.39	Immunodiffusion; not elsewhere specified
86331	$10.56	Immunodiffusion; gel diffusion, qualitative (Ouchterlony), each antigen or antibody
86332	$21.49	Immune complex assay
86334	$19.70	Immunofixation electrophoresis; serum
86335	$25.88	Immunofixation electrophoresis; other fluids with concentration (eg, urine, CSF)
86336	$13.75	Inhibin A
86337	$18.88	Insulin antibodies
86340	$13.30	Intrinsic factor antibodies
86341	$20.79	Islet cell antibody
86343	$10.99	Leukocyte histamine release test (LHR)
86344	$9.16	Leukocyte phagocytosis
86352	$119.81	Cellular function assay involving stimulation (eg, mitogen or antigen) and detection of biomarker (eg, ATP)

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101 CMR 320.00: RATES FOR CLINICAL LABORATORY SERVICES

Code	Rate	Description
86353	$43.24	Lymphocyte transformation, mitogen (phytomitogen) or antigen induced blastogenesis
86355	$33.27	B cells, total count
86356	$23.62	Mononuclear cell antigen, quantitative (eg, flow cytometry), not otherwise specified, each antigen
86357	$33.27	Natural killer (NK) cells, total count
86359	$33.27	T cells; total count
86360	$41.43	T cells; absolute CD4 and CD8 count, including ratio
86361	$23.62	T cells; absolute CD4 count
86362	$10.63	Myelin oligodendrocyte glycoprotein (MOG-IgG1) antibody; cell-based immunofluorescence assay (CBA), each
86363	$33.27	Myelin oligodendrocyte glycoprotein (MOG-IgG1) antibody; flow cytometry (ie, fluorescence-activated cell sorting [FACS]), each
86364	$10.17	Tissue transglutaminase, each immunoglobulin (Ig) class
86366	$16.23	Muscle-specific kinase (MuSK) antibody
86367	$68.59	Stem cells (ie, CD34), total count
86376	$12.83	Microsomal antibodies (eg, thyroid or liver-kidney), each
86381	$22.44	Mitochondrial antibody (eg, M2), each
86382	$14.91	Neutralization test, viral
86384	$12.00	Nitroblue tetrazolium dye test (NTD)
86386	$19.21	Nuclear Matrix Protein 22 (NMP22), qualitative
86403	$10.18	Particle agglutination; screen, each antibody
86406	$9.38	Particle agglutination; titer, each antibody
86408	$42.13	Neutralizing antibody, severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]); screen
86409	$105.33	Neutralizing antibody, severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]); titer
86413	$51.43	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) antibody, quantitative
86430	$5.41	Rheumatoid factor; qualitative
86431	$5.00	Rheumatoid factor; quantitative
86480	$54.66	Tuberculosis test, cell mediated immunity antigen response measurement; gamma interferon
86481	$88.19	Tuberculosis test, cell mediated immunity antigen response measurement; enumeration of gamma interferon-producing T-cells in cell suspension
86485	$25.15	Skin test; candida
86581	$81.16	Streptococcus pneumoniae antibody (IgG), serotypes, multiplex immunoassay, quantitative
86590	$11.16	Streptokinase, antibody
86592	$3.77	Syphilis test, non-treponemal antibody; qualitative (eg, VDRL, RPR, ART)

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101 CMR 320.00: RATES FOR CLINICAL LABORATORY SERVICES

Code	Rate	Description
86593	$3.88	Syphilis test, non-treponemal antibody; quantitative
86596	$10.63	Voltage-gated calcium channel antibody, each
86602	$8.98	Antibody; actinomyces
86603	$11.35	Antibody; adenovirus
86606	$13.27	Antibody; Aspergillus
86609	$11.36	Antibody; bacterium, not elsewhere specified
86611	$8.98	Antibody; Bartonella
86612	$11.38	Antibody; Blastomyces
86615	$11.63	Antibody; Bordetella
86617	$13.66	Antibody; Borrelia burgdorferi (Lyme disease) confirmatory test (eg, Western Blot or immunoblot)
86618	$15.02	Antibody; Borrelia burgdorferi (Lyme disease)
86619	$11.80	Antibody; Borrelia (relapsing fever)
86622	$7.88	Antibody; Brucella
86625	$11.57	Antibody; Campylobacter
86628	$10.59	Antibody; Candida
86631	$10.42	Antibody; Chlamydia
86632	$11.18	Antibody; Chlamydia, IgM
86635	$10.12	Antibody; Coccidioides
86638	$10.69	Antibody; Coxiella burnetii (Q fever)
86641	$12.71	Antibody; Cryptococcus
86644	$12.69	Antibody; cytomegalovirus (CMV)
86645	$14.86	Antibody; cytomegalovirus (CMV), IgM
86648	$13.41	Antibody; Diphtheria
86651	$11.63	Antibody; encephalitis, California (La Crosse)
86652	$11.63	Antibody; encephalitis, Eastern equine
86653	$11.63	Antibody; encephalitis, St. Louis
86654	$11.63	Antibody; encephalitis, Western equine
86658	$11.49	Antibody; enterovirus (eg, coxsackie, echo, polio)
86663	$11.57	Antibody; Epstein-Barr (EB) virus, early antigen (EA)
86664	$13.48	Antibody; Epstein-Barr (EB) virus, nuclear antigen (EBNA)
86665	$16.00	Antibody; Epstein-Barr (EB) virus, viral capsid (VCA)
86666	$8.98	Antibody; Ehrlichia
86668	$12.49	Antibody; Francisella tularensis
86671	$10.80	Antibody; fungus, not elsewhere specified
86674	$12.98	Antibody; Giardia lamblia
86677	$14.86	Antibody; Helicobacter pylori
86682	$11.47	Antibody; helminth, not elsewhere specified
86684	$13.97	Antibody; Haemophilus influenza
86687	$8.02	Antibody; HTLV-I
86688	$12.35	Antibody; HTLV-II
86689	$17.06	Antibody; HTLV or HIV antibody, confirmatory test (eg, Western Blot)
86692	$15.13	Antibody; hepatitis, delta agent

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101 CMR 320.00: RATES FOR CLINICAL LABORATORY SERVICES

Code	Rate	Description
86694	$12.69	Antibody; herpes simplex, non-specific type test
86695	$11.63	Antibody; herpes simplex, type 1
86696	$17.06	Antibody; herpes simplex, type 2
86698	$12.16	Antibody; histoplasma
86701	$7.84	Antibody; HIV-1
86702	$11.92	Antibody; HIV-2
86703	$12.09	Antibody; HIV-1 and HIV-2, single result
86704	$10.63	Hepatitis B core antibody (HBcAb); total
86705	$10.38	Hepatitis B core antibody (HBcAb); IgM antibody
86706	$9.47	Hepatitis B surface antibody (HBsAb)
86707	$10.20	Hepatitis Be antibody (HBeAb)
86708	$10.93	Hepatitis A antibody (HAAb)
86709	$9.93	Hepatitis A antibody (HAAb), IgM antibody
86710	$11.95	Antibody; influenza virus
86711	$14.89	Antibody; JC (John Cunningham) virus
86713	$13.49	Antibody; Legionella
86717	$10.80	Antibody; Leishmania
86720	$14.29	Antibody; Leptospira
86723	$11.63	Antibody; Listeria monocytogenes
86727	$11.35	Antibody; lymphocytic choriomeningitis
86732	$13.23	Antibody; mucormycosis
86735	$11.51	Antibody; mumps
86738	$11.68	Antibody; mycoplasma
86741	$11.63	Antibody; Neisseria meningitidis
86744	$14.10	Antibody; Nocardia
86747	$13.25	Antibody; parvovirus
86750	$11.63	Antibody; Plasmodium (malaria)
86753	$10.93	Antibody; protozoa, not elsewhere specified
86756	$14.01	Antibody; respiratory syncytial virus
86757	$17.06	Antibody; Rickettsia
86759	$16.08	Antibody; rotavirus
86762	$12.69	Antibody; rubella
86765	$11.36	Antibody; rubeola
86768	$11.63	Antibody; Salmonella
86769	$42.13	Antibody; severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19])
86771	$21.59	Antibody; Shigella
86774	$13.05	Antibody; tetanus
86777	$12.69	Antibody; Toxoplasma
86778	$12.71	Antibody; Toxoplasma, IgM
86780	$11.68	Antibody; Treponema pallidum
86784	$11.08	Antibody; Trichinella
86787	$11.36	Antibody; varicella-zoster
86788	$14.86	Antibody; West Nile virus, IgM

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101 CMR 320.00: RATES FOR CLINICAL LABORATORY SERVICES

Code	Rate	Description
86789	$12.69	Antibody; West Nile virus
86790	$11.36	Antibody; virus, not elsewhere specified
86793	$11.63	Antibody; Yersinia
86794	$14.86	Antibody; Zika virus, IgM
86800	$14.03	Thyroglobulin antibody
86803	$12.58	Hepatitis C antibody
86804	$13.66	Hepatitis C antibody; confirmatory test (eg, immunoblot)
86805	$167.12	Lymphocytotoxicity assay, visual crossmatch; with titration
86806	$41.97	Lymphocytotoxicity assay, visual crossmatch; without titration
86807	$69.36	Serum screening for cytotoxic percent reactive antibody (PRA); standard method
86808	$26.17	Serum screening for cytotoxic percent reactive antibody (PRA); quick method
86812	$22.76	HLA typing; A, B, or C (eg, A10, B7, B27), single antigen
86813	$51.15	HLA typing; A, B, or C, multiple antigens
86816	$26.61	HLA typing; DR/DQ, single antigen
86817	$93.60	HLA typing; DR/DQ, multiple antigens
86821	$32.24	HLA typing; lymphocyte culture, mixed (MLC)
86825	$96.56	Human leukocyte antigen (HLA) crossmatch, non-cytotoxic (eg, using flow cytometry); first serum sample or dilution
86826	$32.21	Human leukocyte antigen (HLA) crossmatch, non-cytotoxic (eg, using flow cytometry); each additional serum sample or sample dilution (List separately in addition to primary procedure)
86828	$56.61	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
86829	$56.61	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
86830	$84.24	Antibody to human leukocyte antigens (HLA), solid phase assays (eg, microspheres or beads, ELISA, Flow cytometry); antibody identification by qualitative panel using complete HLA phenotypes, HLA Class I
86831	$72.21	Antibody to human leukocyte antigens (HLA), solid phase assays (eg, microspheres or beads, ELISA, Flow cytometry); antibody identification by qualitative panel using complete HLA phenotypes, HLA Class II
86832	$285.51	Antibody to human leukocyte antigens (HLA), solid phase assays (eg, microspheres or beads, ELISA, Flow cytometry); high definition qualitative panel for identification of antibody specificities (eg, individual antigen per bead methodology), HLA Class I

101 CMR: EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES

101 CMR 320.00: RATES FOR CLINICAL LABORATORY SERVICES

Code	Rate	Description
86833	$287.31	Antibody to human leukocyte antigens (HLA), solid phase assays (eg, microspheres or beads, ELISA, Flow cytometry); high definition qualitative panel for identification of antibody specificities (eg, individual antigen per bead methodology), HLA Class II
86834	$315.32	Antibody to human leukocyte antigens (HLA), solid phase assays (eg, microspheres or beads, ELISA, Flow cytometry); semi-quantitative panel (eg, titer), HLA Class I
86835	$284.81	Antibody to human leukocyte antigens (HLA), solid phase assays (eg, microspheres or beads, ELISA, Flow cytometry); semi-quantitative panel (eg, titer), HLA Class II
86849	IC	Unlisted immunology procedure
Transformation		
86850	$8.62	Antibody screen, RBC, each serum technique
86860	IC	Antibody elution (RBC), each elution
86870	IC	Antibody identification, RBC antibodies, each panel for each serum technique
86880	$4.75	Antihuman globulin test (Coombs test); direct, each antiserum
86885	$5.04	Antihuman globulin test (Coombs test); indirect, qualitative, each reagent red cell
86886	$4.57	Antihuman globulin test (Coombs test); indirect, each antibody titer
86890	IC	Autologous blood or component, collection processing and storage; predeposited
86891	IC	Autologous blood or component, collection processing and storage; intra- or postoperative salvage
86900	$2.64	Blood typing, serologic; ABO
86901	$2.64	Blood typing, serologic; Rh (D)
86902	$5.60	Blood typing, serologic; antigen testing of donor blood using reagent serum, each antigen test
86904	$14.41	Blood typing, serologic; antigen screening for compatible unit using patient serum, per unit screened
86905	$3.38	Blood typing, serologic; RBC antigens, other than ABO or Rh (D), each
86906	$6.83	Blood typing, serologic; Rh phenotyping, complete
86920	IC	Compatibility test each unit; immediate spin technique
86921	IC	Compatibility test each unit; incubation technique
86922	IC	Compatibility test each unit; antiglobulin technique
86923	IC	Compatibility test each unit; electronic
86927	IC	Fresh frozen plasma, thawing, each unit
86930	IC	Frozen blood, each unit; freezing (includes preparation)
86931	IC	Frozen blood, each unit; thawing
86932	IC	Frozen blood, each unit; freezing (includes preparation) and thawing
86940	$7.73	Hemolysins and agglutinins; auto, screen, each

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Code	Rate	Description
86941	$10.68	Hemolysins and agglutinins; incubated
86945	$24.12	Irradiation of blood product, each unit
86960	IC	Volume reduction of blood or blood product (eg, red blood cells or platelets), each unit
86965	$24.12	Pooling of platelets or other blood products
86970	$19.27	Pretreatment of RBCs for use in RBC antibody detection, identification, and/or compatibility testing; incubation with chemical agents or drugs, each
86971	$19.27	Pretreatment of RBCs for use in RBC antibody detection, identification, and/or compatibility testing; incubation with enzymes, each
86976	$19.27	Pretreatment of serum for use in RBC antibody identification; by dilution
86977	$19.27	Pretreatment of serum for use in RBC antibody identification; incubation with inhibitors, each
86978	$19.27	Pretreatment of serum for use in RBC antibody identification; by differential red cell absorption using patient RBCs or RBCs of known phenotype, each absorption
86985	IC	Splitting of blood or blood products, each unit
86999	IC	Unlisted transfusion medicine procedure
Microbiology		
87003	$14.85	Animal inoculation, small animal, with observation and dissection
87015	$5.89	Concentration (any type), for infectious agents
87040	$9.10	Culture, bacterial; blood, aerobic, with isolation and presumptive identification of isolates (includes anaerobic culture, if appropriate)
87045	$8.32	Culture, bacterial; stool, aerobic, with isolation and preliminary examination (eg, KIA, LIA), Salmonella and Shigella species
87046	$8.32	Culture, bacterial; stool, aerobic, additional pathogens, isolation and presumptive identification of isolates, each plate
87070	$7.60	Culture, bacterial; any other source except urine, blood or stool, aerobic, with isolation and presumptive identification of isolates
87071	$8.72	Culture, bacterial; quantitative, aerobic with isolation and presumptive identification of isolates, any source except urine, blood or stool
87073	$8.52	Culture, bacterial; quantitative, anaerobic with isolation and presumptive identification of isolates, any source except urine, blood or stool
87075	$8.35	Culture, bacterial; any source, except blood, anaerobic with isolation and presumptive identification of isolates
87076	$7.13	Culture, bacterial; anaerobic isolate, additional methods required for definitive identification, each isolate
87077	$7.13	Culture, bacterial; aerobic isolate, additional methods required for definitive identification, each isolate

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Code	Rate	Description
87081	$5.85	Culture, presumptive, pathogenic organisms, screening only
87084	$23.87	Culture, presumptive, pathogenic organisms, screening only; with colony estimation from density chart
87086	$7.12	Culture, bacterial; quantitative colony count, urine
87088	$7.13	Culture, bacterial; with isolation and presumptive identification of each isolate, urine
87101	$6.80	Culture, fungi (mold or yeast) isolation, with presumptive identification of isolates; skin, hair, or nail
87102	$7.42	Culture, fungi (mold or yeast) isolation, with presumptive identification of isolates; other source (except blood)
87103	$18.04	Culture, fungi (mold or yeast) isolation, with presumptive identification of isolates; blood
87106	$9.10	Culture, fungi, definitive identification, each organism; yeast
87107	$9.10	Culture, fungi, definitive identification, each organism; mold
87109	$13.57	Culture, mycoplasma, any source
87110	$17.28	Culture, chlamydia, any source
87116	$9.52	Culture, tubercle or other acid-fast bacilli (eg, TB, AFB, mycobacteria) any source, with isolation and presumptive identification of isolates
87118	$12.88	Culture, mycobacterial, definitive identification, each isolate
87140	$4.91	Culture, typing; immunofluorescent method, each antiserum
87143	$11.04	Culture, typing; gas liquid chromatography (GLC) or high pressure liquid chromatography (HPLC) method
87147	$4.57	Culture, typing; immunologic method, other than immunofluorescence (eg, agglutination grouping), per antiserum
87149	$17.68	Culture, typing; identification by nucleic acid (DNA or RNA) probe, direct probe technique, per culture or isolate, each organism probed
87150	$30.94	Culture, typing; identification by nucleic acid (DNA or RNA) probe, amplified probe technique, per culture or isolate, each organism probed
87152	$6.83	Culture, typing; identification by pulse field gel typing
87153	$101.73	Culture, typing; identification by nucleic acid sequencing method, each isolate (eg, sequencing of the 16S rRNA gene)
87154	$192.30	Culture, typing; identification of blood pathogen and resistance typing, when performed, by nucleic acid (DNA or RNA) probe, multiplexed amplified probe technique including multiplex reverse transcription, when performed, per culture or isolate, 6 or more targets
87158	$6.83	Culture, typing; other methods
87164	$9.47	Dark field examination, any source (eg, penile, vaginal, oral, skin); includes specimen collection
87166	$9.97	Dark field examination, any source (eg, penile, vaginal, oral, skin); without collection

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Code	Rate	Description
87168	$3.77	Macroscopic examination; arthropod
87169	$3.80	Macroscopic examination; parasite
87172	$3.77	Pinworm exam (eg, cellophane tape prep)
87176	$5.19	Homogenization, tissue, for culture
87177	$7.85	Ova and parasites, direct smears, concentration and identification
87181	$4.19	Susceptibility studies, antimicrobial agent; agar dilution method, per agent (eg, antibiotic gradient strip)
87184	$6.60	Susceptibility studies, antimicrobial agent; disk method, per plate (12 or fewer agents)
87185	$4.19	Susceptibility studies, antimicrobial agent; enzyme detection (eg, beta lactamase), per enzyme
87186	$7.63	Susceptibility studies, antimicrobial agent; microdilution or agar dilution (minimum inhibitory concentration [MIC] or breakpoint), each multi-antimicrobial, per plate
87187	$35.42	Susceptibility studies, antimicrobial agent; microdilution or agar dilution, minimum lethal concentration (MLC), each plate (List separately in addition to code for primary procedure)
87188	$5.86	Susceptibility studies, antimicrobial agent; macrobroth dilution method, each agent
87190	$6.45	Susceptibility studies, antimicrobial agent; mycobacteria, proportion method, each agent
87197	$13.25	Serum bactericidal titer (Schlichter test)
87205	$3.77	Smear, primary source with interpretation; Gram or Giemsa stain for bacteria, fungi, or cell types
87206	$4.75	Smear, primary source with interpretation; fluorescent and/or acid fast stain for bacteria, fungi, parasites, viruses or cell types
87207	$5.28	Smear, primary source with interpretation; special stain for inclusion bodies or parasites (eg, malaria, coccidia, microsporidia, trypanosomes, herpes viruses)
87209	$15.86	Smear, primary source with interpretation; complex special stain (eg, trichrome, iron hemotoxylin) for ova and parasites
87210	$5.13	Smear, primary source with interpretation; wet mount for infectious agents (eg, saline, India ink, KOH preps)
87220	$3.77	Tissue examination by KOH slide of samples from skin, hair, or nails for fungi or ectoparasite ova or mites (eg, scabies)
87230	$17.41	Toxin or antitoxin assay, tissue culture (eg, Clostridium difficile toxin)
87250	$17.25	Virus isolation; inoculation of embryonated eggs, or small animal, includes observation and dissection
87252	$22.99	Virus isolation; tissue culture inoculation, observation, and presumptive identification by cytopathic effect
87253	$17.81	Virus isolation; tissue culture, additional studies or definitive identification (eg, hemabsorption, neutralization, immunofluorescence stain), each isolate

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Code	Rate	Description
87254	$17.25	Virus isolation; centrifuge enhanced (shell vial) technique, includes identification with immunofluorescence stain, each virus
87255	$29.86	Virus isolation; including identification by non-immunologic method, other than by cytopathic effect (eg, virus specific enzymatic activity)
87260	$12.73	Infectious agent antigen detection by immunofluorescent technique; adenovirus
87265	$10.56	Infectious agent antigen detection by immunofluorescent technique; Bordetella pertussis/parapertussis
87267	$11.83	Infectious agent antigen detection by immunofluorescent technique; Enterovirus, direct fluorescent antibody (DFA)
87269	$12.00	Infectious agent antigen detection by immunofluorescent technique; Giardia
87270	$10.56	Infectious agent antigen detection by immunofluorescent technique; Chlamydia trachomatis
87271	$11.83	Infectious agent antigen detection by immunofluorescent technique; Cytomegalovirus, direct fluorescent antibody (DFA)
87272	$10.56	Infectious agent antigen detection by immunofluorescent technique; cryptosporidium
87273	$10.56	Infectious agent antigen detection by immunofluorescent technique; Herpes simplex virus type 2
87274	$10.56	Infectious agent antigen detection by immunofluorescent technique; Herpes simplex virus type 1
87275	$10.80	Infectious agent antigen detection by immunofluorescent technique; influenza B virus
87276	$14.17	Infectious agent antigen detection by immunofluorescent technique; influenza A virus
87278	$13.76	Infectious agent antigen detection by immunofluorescent technique; Legionella pneumophila
87279	$14.49	Infectious agent antigen detection by immunofluorescent technique; Parainfluenza virus, each type
87280	$11.83	Infectious agent antigen detection by immunofluorescent technique; respiratory syncytial virus
87281	$10.56	Infectious agent antigen detection by immunofluorescent technique; Pneumocystis carinii
87283	$53.62	Infectious agent antigen detection by immunofluorescent technique; Rubeola
87285	$10.74	Infectious agent antigen detection by immunofluorescent technique; Treponema pallidum
87290	$11.83	Infectious agent antigen detection by immunofluorescent technique; Varicella zoster virus
87299	$14.20	Infectious agent antigen detection by immunofluorescent technique; not otherwise specified, each organism

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Code	Rate	Description
87300	$10.56	Infectious agent antigen detection by immunofluorescent technique, polyvalent for multiple organisms, each polyvalent antiserum
87301	$10.56	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; adenovirus enteric types 40/41
87305	$10.56	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; Aspergillus
87320	$13.23	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; Chlamydia trachomatis
87324	$10.56	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; Clostridium difficile toxin(s)
87327	$11.83	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; Cryptococcus neoformans
87328	$12.19	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; cryptosporidium
87329	$10.56	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; Giardia
87332	$10.56	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; cytomegalovirus

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Code	Rate	Description
87335	$11.16	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; Escherichia coli 0157
87336	$14.11	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; Entamoeba histolytica dispar group
87337	$10.56	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; Entamoeba histolytica group
87338	$12.68	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; Helicobacter pylori, stool
87339	$14.11	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; Helicobacter pylori
87340	$9.11	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; hepatitis B surface antigen (HBsAg)
87341	$9.11	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; hepatitis B surface antigen (HBsAg) neutralization
87350	$10.17	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; hepatitis Be antigen (HBeAg)
87380	$16.19	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; hepatitis, delta agent

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Code	Rate	Description
87385	$11.68	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; Histoplasma capsulatum
87389	$21.24	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; HIV-1 antigen(s), with HIV-1 and HIV-2 antibodies, single result
87390	$21.22	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; HIV-1
87391	$19.31	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; HIV-2
87400	$12.46	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; Influenza, A or B, each
87420	$12.27	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; respiratory syncytial virus
87425	$10.56	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; rotavirus
87426	$35.33	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 acute respiratory syndrome coronavirus (eg, SARS-CoV, SARS-CoV-2 [COVID-19])

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Code	Rate	Description
87427	$10.56	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; Shiga-like toxin
87428	$63.59	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 acute respiratory syndrome coronavirus (eg, SARS-CoV, SARS-CoV-2 [COVID-19]) and influenza virus types A and B
87430	$14.82	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; Streptococcus, group A
87449	$10.56	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; not otherwise specified, each organism
87451	$9.27	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; polyvalent for multiple organisms, each polyvalent antiserum
87467	$13.27	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; hepatitis B surface antigen (HBsAg), quantitative
87468	$30.94	Infectious agent detection by nucleic acid (DNA or RNA); Anaplasma phagocytophilum, amplified probe technique
87469	$30.94	Infectious agent detection by nucleic acid (DNA or RNA); Babesia microti, amplified probe technique
87471	$30.94	Infectious agent detection by nucleic acid (DNA or RNA); Bartonella henselae and Bartonella quintana, amplified probe technique
87472	$37.78	Infectious agent detection by nucleic acid (DNA or RNA); Bartonella henselae and Bartonella quintana, quantification
87475	$17.68	Infectious agent detection by nucleic acid (DNA or RNA); Borrelia burgdorferi, direct probe technique

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Code	Rate	Description
87476	$30.94	Infectious agent detection by nucleic acid (DNA or RNA); Borrelia burgdorferi, amplified probe technique
87478	$30.94	Infectious agent detection by nucleic acid (DNA or RNA); Borrelia miyamotoi, amplified probe technique
87480	$17.68	Infectious agent detection by nucleic acid (DNA or RNA); Candida species, direct probe technique
87481	$30.94	Infectious agent detection by nucleic acid (DNA or RNA); Candida species, amplified probe technique
87482	$49.16	Infectious agent detection by nucleic acid (DNA or RNA); Candida species, quantification
87483	$367.55	Infectious agent detection by nucleic acid (DNA or RNA); central nervous system pathogen (eg, Neisseria meningitidis, Streptococcus pneumoniae, Listeria, Haemophilus influenzae, E. coli, Streptococcus agalactiae, enterovirus, human parechovirus, herpes simplex virus type 1 and 2, human herpesvirus 6, cytomegalovirus, varicella zoster virus, Cryptococcus), includes multiplex reverse transcription, when performed, and multiplex amplified probe technique, multiple types or subtypes, 12–25 targets
87484	$30.94	Infectious agent detection by nucleic acid (DNA or RNA); Ehrlichia chaffeensis, amplified probe technique
87485	$17.68	Infectious agent detection by nucleic acid (DNA or RNA); Chlamydia pneumoniae, direct probe technique
87486	$30.94	Infectious agent detection by nucleic acid (DNA or RNA); Chlamydia pneumoniae, amplified probe technique
87487	$37.78	Infectious agent detection by nucleic acid (DNA or RNA); Chlamydia pneumoniae, quantification
87490	$20.06	Infectious agent detection by nucleic acid (DNA or RNA); Chlamydia trachomatis, direct probe technique
87491	$30.94	Infectious agent detection by nucleic acid (DNA or RNA); Chlamydia trachomatis, amplified probe technique
87492	$47.15	Infectious agent detection by nucleic acid (DNA or RNA); Chlamydia trachomatis, quantification
87493	$32.87	Infectious agent detection by nucleic acid (DNA or RNA); Clostridium difficile, toxin gene(s), amplified probe technique
87495	$26.48	Infectious agent detection by nucleic acid (DNA or RNA); cytomegalovirus, direct probe technique
87496	$30.94	Infectious agent detection by nucleic acid (DNA or RNA); cytomegalovirus, amplified probe technique
87497	$37.78	Infectious agent detection by nucleic acid (DNA or RNA); cytomegalovirus, quantification
87498	$30.94	Infectious agent detection by nucleic acid (DNA or RNA); enterovirus, amplified probe technique, includes reverse transcription when performed

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Code	Rate	Description
87500	$30.94	Infectious agent detection by nucleic acid (DNA or RNA); vancomycin resistance (eg, enterococcus species van A, van B), amplified probe technique
87501	$45.25	Infectious agent detection by nucleic acid (DNA or RNA); influenza virus, includes reverse transcription, when performed, and amplified probe technique, each type or subtype
87502	$84.48	Infectious agent detection by nucleic acid (DNA or RNA); influenza virus, for multiple types or sub-types, includes multiplex reverse transcription, when performed, and multiplex amplified probe technique, first 2 types or sub-types
87503	$25.77	Infectious agent detection by nucleic acid (DNA or RNA); influenza virus, for multiple types or sub-types, includes multiplex reverse transcription, when performed, and multiplex amplified probe technique, each additional influenza virus type or sub-type beyond 2 (List separately in addition to code for primary procedure)
87505	$113.14	Infectious agent detection by nucleic acid (DNA or RNA); gastrointestinal pathogen (eg, Clostridium difficile, E. coli, Salmonella, Shigella, norovirus, Giardia), includes multiplex reverse transcription, when performed, and multiplex amplified probe technique, multiple types or subtypes, 3–5 targets
87506	$231.92	Infectious agent detection by nucleic acid (DNA or RNA); gastrointestinal pathogen (eg, Clostridium difficile, E. coli, Salmonella, Shigella, norovirus, Giardia), includes multiplex reverse transcription, when performed, and multiplex amplified probe technique, multiple types or subtypes, 6–11 targets
87507	$367.55	Infectious agent detection by nucleic acid (DNA or RNA); gastrointestinal pathogen (eg, Clostridium difficile, E. coli, Salmonella, Shigella, norovirus, Giardia), includes multiplex reverse transcription, when performed, and multiplex amplified probe technique, multiple types or subtypes, 12–25 targets
87510	$17.68	Infectious agent detection by nucleic acid (DNA or RNA); Gardnerella vaginalis, direct probe technique
87511	$30.94	Infectious agent detection by nucleic acid (DNA or RNA); Gardnerella vaginalis, amplified probe technique
87512	$36.83	Infectious agent detection by nucleic acid (DNA or RNA); Gardnerella vaginalis, quantification
87513	$30.95	Infectious agent detection by nucleic acid (DNA or RNA); Helicobacter pylori (H. pylori), clarithromycin resistance, amplified probe technique
87516	$30.94	Infectious agent detection by nucleic acid (DNA or RNA); hepatitis B virus, amplified probe technique
87517	$37.78	Infectious agent detection by nucleic acid (DNA or RNA); hepatitis B virus, quantification

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Code	Rate	Description
87520	$27.53	Infectious agent detection by nucleic acid (DNA or RNA); hepatitis C, direct probe technique
87521	$30.94	Infectious agent detection by nucleic acid (DNA or RNA); hepatitis C, amplified probe technique, includes reverse transcription when performed
87522	$37.78	Infectious agent detection by nucleic acid (DNA or RNA); hepatitis C, quantification, includes reverse transcription when performed
87523	$37.78	Infectious agent detection by nucleic acid (DNA or RNA); hepatitis D (delta), quantification, including reverse transcription, when performed
87525	$26.28	Infectious agent detection by nucleic acid (DNA or RNA); hepatitis G, direct probe technique
87526	$34.62	Infectious agent detection by nucleic acid (DNA or RNA); hepatitis G, amplified probe technique
87527	$36.83	Infectious agent detection by nucleic acid (DNA or RNA); hepatitis G, quantification
87528	$17.68	Infectious agent detection by nucleic acid (DNA or RNA); Herpes simplex virus, direct probe technique
87529	$30.94	Infectious agent detection by nucleic acid (DNA or RNA); Herpes simplex virus, amplified probe technique
87530	$37.78	Infectious agent detection by nucleic acid (DNA or RNA); Herpes simplex virus, quantification
87531	$51.15	Infectious agent detection by nucleic acid (DNA or RNA); Herpes virus-6, direct probe technique
87532	$30.94	Infectious agent detection by nucleic acid (DNA or RNA); Herpes virus-6, amplified probe technique
87533	$36.83	Infectious agent detection by nucleic acid (DNA or RNA); Herpes virus-6, quantification
87534	$19.33	Infectious agent detection by nucleic acid (DNA or RNA); HIV-1, direct probe technique
87535	$30.94	Infectious agent detection by nucleic acid (DNA or RNA); HIV-1, amplified probe technique, includes reverse transcription when performed
87536	$75.05	Infectious agent detection by nucleic acid (DNA or RNA); HIV-1, quantification, includes reverse transcription when performed
87537	$19.33	Infectious agent detection by nucleic acid (DNA or RNA); HIV-2, direct probe technique
87538	$30.94	Infectious agent detection by nucleic acid (DNA or RNA); HIV-2, amplified probe technique, includes reverse transcription when performed
87539	$51.70	Infectious agent detection by nucleic acid (DNA or RNA); HIV-2, quantification, includes reverse transcription when performed

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Code	Rate	Description
87540	$17.68	Infectious agent detection by nucleic acid (DNA or RNA); Legionella pneumophila, direct probe technique
87541	$30.94	Infectious agent detection by nucleic acid (DNA or RNA); Legionella pneumophila, amplified probe technique
87542	$36.83	Infectious agent detection by nucleic acid (DNA or RNA); Legionella pneumophila, quantification
87550	$17.68	Infectious agent detection by nucleic acid (DNA or RNA); Mycobacteria species, direct probe technique
87551	$42.54	Infectious agent detection by nucleic acid (DNA or RNA); Mycobacteria species, amplified probe technique
87552	$37.78	Infectious agent detection by nucleic acid (DNA or RNA); Mycobacteria species, quantification
87555	$23.70	Infectious agent detection by nucleic acid (DNA or RNA); Mycobacteria tuberculosis, direct probe technique
87556	$36.76	Infectious agent detection by nucleic acid (DNA or RNA); Mycobacteria tuberculosis, amplified probe technique
87557	$37.78	Infectious agent detection by nucleic acid (DNA or RNA); Mycobacteria tuberculosis, quantification
87560	$24.07	Infectious agent detection by nucleic acid (DNA or RNA); Mycobacteria avium-intracellulare, direct probe technique
87561	$30.94	Infectious agent detection by nucleic acid (DNA or RNA); Mycobacteria avium-intracellulare, amplified probe technique
87562	$37.78	Infectious agent detection by nucleic acid (DNA or RNA); Mycobacteria avium-intracellulare, quantification
87563	$30.94	Infectious agent detection by nucleic acid (DNA or RNA); Mycoplasma genitalium, amplified probe technique
87564	$67.70	Infectious agent detection by nucleic acid (DNA or RNA); Mycobacterium tuberculosis, rifampin resistance, amplified probe technique
87580	$17.68	Infectious agent detection by nucleic acid (DNA or RNA); Mycoplasma pneumoniae, direct probe technique
87581	$30.94	Infectious agent detection by nucleic acid (DNA or RNA); Mycoplasma pneumoniae, amplified probe technique
87582	$266.87	Infectious agent detection by nucleic acid (DNA or RNA); Mycoplasma pneumoniae, quantification
87590	$23.70	Infectious agent detection by nucleic acid (DNA or RNA); Neisseria gonorrhoeae, direct probe technique
87591	$30.94	Infectious agent detection by nucleic acid (DNA or RNA); Neisseria gonorrhoeae, amplified probe technique
87592	$37.78	Infectious agent detection by nucleic acid (DNA or RNA); Neisseria gonorrhoeae, quantification
87593	$30.95	Infectious agent detection by nucleic acid (DNA or RNA); orthopoxvirus (eg, monkeypox virus, cowpox virus, vaccinia virus), amplified probe technique, each

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Code	Rate	Description
87594	$30.95	Infectious agent detection by nucleic acid (DNA or RNA); Pneumocystis jirovecii, amplified probe technique
87623	$30.94	Infectious agent detection by nucleic acid (DNA or RNA); Human Papillomavirus (HPV), low-risk types (eg, 6, 11, 42, 43, 44)
87624	$30.94	Infectious agent detection by nucleic acid (DNA or RNA); Human Papillomavirus (HPV), high-risk types (eg, 16, 18, 31, 33, 35, 39, 45, 51, 52, 56, 58, 59, 68)
87625	$35.76	Infectious agent detection by nucleic acid (DNA or RNA); Human Papillomavirus (HPV), types 16 and 18 only, includes type 45, if performed
87626	$61.91	Infectious agent detection by nucleic acid (DNA or RNA); Human Papillomavirus (HPV), separately reported high-risk types (*e.g.*, 16, 18, 31, 45, 51, 52) and high-risk pooled result(s)
87631	$125.78	Infectious agent detection by nucleic acid (DNA or RNA); respiratory virus (eg, adenovirus, influenza virus, coronavirus, metapneumovirus, parainfluenza virus, respiratory syncytial virus, rhinovirus), includes multiplex reverse transcription, when performed, and multiplex amplified probe technique, multiple types or subtypes, 3–5 targets
87632	$192.30	Infectious agent detection by nucleic acid (DNA or RNA); respiratory virus (eg, adenovirus, influenza virus, coronavirus, metapneumovirus, parainfluenza virus, respiratory syncytial virus, rhinovirus), includes multiplex reverse transcription, when performed, and multiplex amplified probe technique, multiple types or subtypes, 6–11 targets
87633	$367.55	Infectious agent detection by nucleic acid (DNA or RNA); respiratory virus (eg, adenovirus, influenza virus, coronavirus, metapneumovirus, parainfluenza virus, respiratory syncytial virus, rhinovirus), includes multiplex reverse transcription, when performed, and multiplex amplified probe technique, multiple types or subtypes, 12–25 targets
87634	$61.91	Infectious agent detection by nucleic acid (DNA or RNA); respiratory syncytial virus, amplified probe technique
87635	$51.31	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
87636	$142.63	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

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101 CMR 320.00: RATES FOR CLINICAL LABORATORY SERVICES

Code	Rate	Description
87637	$142.63	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 technique
87640	$30.94	Infectious agent detection by nucleic acid (DNA or RNA); Staphylococcus aureus, amplified probe technique
87641	$30.94	Infectious agent detection by nucleic acid (DNA or RNA); Staphylococcus aureus, methicillin resistant, amplified probe technique
87650	$17.68	Infectious agent detection by nucleic acid (DNA or RNA); Streptococcus, group A, direct probe technique
87651	$30.94	Infectious agent detection by nucleic acid (DNA or RNA); Streptococcus, group A, amplified probe technique
87652	$36.83	Infectious agent detection by nucleic acid (DNA or RNA); Streptococcus, group A, quantification
87653	$30.94	Infectious agent detection by nucleic acid (DNA or RNA); Streptococcus, group B, amplified probe technique
87660	$17.68	Infectious agent detection by nucleic acid (DNA or RNA); Trichomonas vaginalis, direct probe technique
87661	$30.94	Infectious agent detection by nucleic acid (DNA or RNA); Trichomonas vaginalis, amplified probe technique
87662	$45.25	Infectious agent detection by nucleic acid (DNA or RNA); Zika virus, amplified probe technique
87797	$26.48	Infectious agent detection by nucleic acid (DNA or RNA), not otherwise specified; direct probe technique, each organism
87798	$30.94	Infectious agent detection by nucleic acid (DNA or RNA), not otherwise specified; amplified probe technique, each organism
87799	$37.78	Infectious agent detection by nucleic acid (DNA or RNA), not otherwise specified; quantification, each organism
87800	$38.51	Infectious agent detection by nucleic acid (DNA or RNA), multiple organisms; direct probe(s) technique
87801	$61.91	Infectious agent detection by nucleic acid (DNA or RNA), multiple organisms; amplified probe(s) technique
87802	$11.23	Infectious agent antigen detection by immunoassay with direct optical (ie, visual) observation; Streptococcus, group B
87803	$14.11	Infectious agent antigen detection by immunoassay with direct optical (ie, visual) observation; Clostridium difficile toxin A
87804	$14.60	Infectious agent antigen detection by immunoassay with direct optical (ie, visual) observation; Influenza
87806	$28.90	Infectious agent antigen detection by immunoassay with direct optical (ie, visual) observation; HIV-1 antigen(s), with HIV-1 and HIV-2 antibodies
87807	$11.55	Infectious agent antigen detection by immunoassay with direct optical (ie, visual) observation; respiratory syncytial virus

Code	Rate	Description
87808	$13.48	Infectious agent antigen detection by immunoassay with direct optical (ie, visual) observation; Trichomonas vaginalis
87809	$19.19	Infectious agent antigen detection by immunoassay with direct optical (ie, visual) observation; adenovirus
87810	$31.12	Infectious agent antigen detection by immunoassay with direct optical (ie, visual) observation; Chlamydia trachomatis
87811	$41.38	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])
87850	$21.66	Infectious agent antigen detection by immunoassay with direct optical (ie, visual) observation; Neisseria gonorrhoeae
87880	$14.58	Infectious agent antigen detection by immunoassay with direct optical (ie, visual) observation; Streptococcus, group A
87899	$14.17	Infectious agent antigen detection by immunoassay with direct optical (ie, visual) observation; not otherwise specified
87900	$114.95	Infectious agent drug susceptibility phenotype prediction using regularly updated genotypic bioinformatics
87901	$227.04	Infectious agent genotype analysis by nucleic acid (DNA or RNA); HIV-1, reverse transcriptase and protease regions
87902	$227.04	Infectious agent genotype analysis by nucleic acid (DNA or RNA); Hepatitis C virus
87903	$430.94	Infectious agent phenotype analysis by nucleic acid (DNA or RNA) with drug resistance tissue culture analysis, HIV 1; first through 10 drugs tested
87904	$22.99	Infectious agent phenotype analysis by nucleic acid (DNA or RNA) with drug resistance tissue culture analysis, HIV 1; each additional drug tested (List separately in addition to code for primary procedure)
87905	$10.78	Infectious agent enzymatic activity other than virus (eg, sialidase activity in vaginal fluid)
87906	$113.52	Infectious agent genotype analysis by nucleic acid (DNA or RNA); HIV-1, other region (eg, integrase, fusion)
87910	$227.04	Infectious agent genotype analysis by nucleic acid (DNA or RNA); cytomegalovirus
87912	$227.04	Infectious agent genotype analysis by nucleic acid (DNA or RNA); Hepatitis B virus
87913	$257.45	Infectious agent genotype analysis by nucleic acid (DNA or RNA); severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]), mutation identification in targeted region(s)
87999	IC	Unlisted microbiology procedure
Anatomic Pathology		
88000	IC	Necropsy (autopsy), gross examination only; without CNS
88005	IC	Necropsy (autopsy), gross examination only; with brain

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Code	Rate	Description
88007	IC	Necropsy (autopsy), gross examination only; with brain and spinal cord
88012	IC	Necropsy (autopsy), gross examination only; infant with brain
88014	IC	Necropsy (autopsy), gross examination only; stillborn or newborn with brain
88016	IC	Necropsy (autopsy), gross examination only; macerated stillborn
88020	IC	Necropsy (autopsy), gross and microscopic; without CNS
88025	IC	Necropsy (autopsy), gross and microscopic; with brain
88027	IC	Necropsy (autopsy), gross and microscopic; with brain and spinal cord
88028	IC	Necropsy (autopsy), gross and microscopic; infant with brain
88029	IC	Necropsy (autopsy), gross and microscopic; stillborn or newborn with brain
88036	IC	Necropsy (autopsy), limited, gross and/or microscopic; regional
88037	IC	Necropsy (autopsy), limited, gross and/or microscopic; single organ
88040	IC	Necropsy (autopsy); forensic examination
88045	IC	Necropsy (autopsy); coroner's call
88099	IC	Unlisted necropsy (autopsy) procedure
Cytopathology		
88130	$15.86	Sex chromatin identification; Barr bodies
88140	$7.05	Sex chromatin identification; peripheral blood smear, polymorphonuclear drumsticks
88142	$17.87	Cytopathology, cervical or vaginal (any reporting system), collected in preservative fluid, automated thin layer preparation; manual screening under physician supervision
88143	$20.32	Cytopathology, cervical or vaginal (any reporting system), collected in preservative fluid, automated thin layer preparation; with manual screening and rescreening under physician supervision
88147	$44.59	Cytopathology smears, cervical or vaginal; screening by automated system under physician supervision
88148	$15.27	Cytopathology smears, cervical or vaginal; screening by automated system with manual rescreening under physician supervision
88150	$15.27	Cytopathology, slides, cervical or vaginal; manual screening under physician supervision
88152	$24.38	Cytopathology, slides, cervical or vaginal; with manual screening and computer-assisted rescreening under physician supervision
88153	$21.19	Cytopathology, slides, cervical or vaginal; with manual screening and rescreening under physician supervision

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Code	Rate	Description
88155	$12.92	Cytopathology, slides, cervical or vaginal, definitive hormonal evaluation (eg, maturation index, karyopyknotic index, estrogenic index) (List separately in addition to code[s] for other technical and interpretation services)
88164	$15.27	Cytopathology, slides, cervical or vaginal (the Bethesda System); manual screening under physician supervision
88165	$37.23	Cytopathology, slides, cervical or vaginal (the Bethesda System); with manual screening and rescreening under physician supervision
88166	$15.27	Cytopathology, slides, cervical or vaginal (the Bethesda System); with manual screening and computer-assisted rescreening under physician supervision
88167	$15.27	Cytopathology, slides, cervical or vaginal (the Bethesda System); with manual screening and computer-assisted rescreening using cell selection and review under physician supervision
88174	$22.37	Cytopathology, cervical or vaginal (any reporting system), collected in preservative fluid, automated thin layer preparation; screening by automated system, under physician supervision
88175	$23.47	Cytopathology, cervical or vaginal (any reporting system), collected in preservative fluid, automated thin layer preparation; with screening by automated system and manual rescreening or review, under physician supervision
Cytogenic Studies		
88230	$102.73	Tissue culture for non-neoplastic disorders; lymphocyte
88233	$124.11	Tissue culture for non-neoplastic disorders; skin or other solid tissue biopsy
88235	$132.55	Tissue culture for non-neoplastic disorders; amniotic fluid or chorionic villus cells
88237	$126.77	Tissue culture for neoplastic disorders; bone marrow, blood cells
88239	$130.09	Tissue culture for neoplastic disorders; solid tumor
88240	$11.53	Cryopreservation, freezing and storage of cells, each cell line
88241	$10.66	Thawing and expansion of frozen cells, each aliquot
88245	$152.71	Chromosome analysis for breakage syndromes; baseline Sister Chromatid Exchange (SCE), 20–25 cells
88248	$152.71	Chromosome analysis for breakage syndromes; baseline breakage, score 50–100 cells, count 20 cells, 2 karyotypes (eg, for ataxia telangiectasia, Fanconi anemia, fragile X)
88249	$152.71	Chromosome analysis for breakage syndromes; score 100 cells, clastogen stress (eg, diepoxybutane, mitomycin C, ionizing radiation, UV radiation)
88261	$233.11	Chromosome analysis; count 5 cells, 1 karyotype, with banding
88262	$110.67	Chromosome analysis; count 15–20 cells, 2 karyotypes, with banding

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Code	Rate	Description
88263	$132.54	Chromosome analysis; count 45 cells for mosaicism, 2 karyotypes, with banding
88264	$127.53	Chromosome analysis; analyze 20–25 cells
88267	$166.30	Chromosome analysis, amniotic fluid or chorionic villus, count 15 cells, 1 karyotype, with banding
88269	$153.15	Chromosome analysis, in situ for amniotic fluid cells, count cells from 6–12 colonies, 1 karyotype, with banding
88271	$18.89	Molecular cytogenetics; DNA probe, each (eg, FISH)
88272	$35.89	Molecular cytogenetics; chromosomal in situ hybridization, analyze 3–5 cells (eg, for derivatives and markers)
88273	$30.70	Molecular cytogenetics; chromosomal in situ hybridization, analyze 10–30 cells (eg, for microdeletions)
88274	$37.37	Molecular cytogenetics; interphase in situ hybridization, analyze 25–99 cells
88275	$45.14	Molecular cytogenetics; interphase in situ hybridization, analyze 100–300 cells
88280	$29.52	Chromosome analysis; additional karyotypes, each study
88283	$60.50	Chromosome analysis; additional specialized banding technique (eg, NOR, C-banding)
88285	$23.73	Chromosome analysis; additional cells counted, each study
88289	$30.36	Chromosome analysis; additional high resolution study
88371	$19.60	Protein analysis of tissue by Western Blot, with interpretation and report
88372	$23.12	Protein analysis of tissue by Western Blot, with interpretation and report; immunological probe for band identification, each
***In vivo* (*e.g.*, Transcutaneous) Laboratory Procedures**		
88720	$4.43	Bilirubin, total, transcutaneous
88738	$4.43	Hemoglobin (Hgb), quantitative, transcutaneous
88740	$8.26	Hemoglobin, quantitative, transcutaneous, per day; carboxyhemoglobin
88741	$8.26	Hemoglobin, quantitative, transcutaneous, per day; methemoglobin
Other Procedures		
89050	$4.16	Cell count, miscellaneous body fluids (eg, cerebrospinal fluid, joint fluid), except blood
89051	$4.94	Cell count, miscellaneous body fluids (eg, cerebrospinal fluid, joint fluid), except blood; with differential count
89055	$3.77	Leukocyte assessment, fecal, qualitative or semiquantitative
89060	$6.46	Crystal identification by light microscopy with or without polarizing lens analysis, tissue or any body fluid (except urine)
89125	$5.19	Fat stain, feces, urine, or respiratory secretions
89160	$4.28	Meat fibers, feces
89190	$5.11	Nasal smear for eosinophils
Reproductive Medicine Procedures		
89250	IC	Culture of oocyte(s)/embryo(s), less than 4 days

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Code	Rate	Description
89251	IC	Culture of oocyte(s)/embryo(s), less than 4 days; with co-culture of oocyte(s)/embryos
89253	IC	Assisted embryo hatching, microtechniques (any method)
89254	IC	Oocyte identification from follicular fluid
89255	IC	Preparation of embryo for transfer (any method)
89257	IC	Sperm identification from aspiration (other than seminal fluid)
89258	IC	Cryopreservation; embryo(s)
89259	IC	Cryopreservation; sperm
89264	IC	Sperm identification from testis tissue, fresh or cryopreserved
89268	IC	Insemination of oocytes
89272	IC	Extended culture of oocyte(s)/embryo(s), 4–7 days
89280	IC	Assisted oocyte fertilization, microtechnique; less than or equal to 10 oocytes
89281	IC	Assisted oocyte fertilization, microtechnique; greater than 10 oocytes
89290	IC	Biopsy, oocyte polar body or embryo blastomere, microtechnique (for pre-implantation genetic diagnosis); less than or equal to 5 embryos
89291	IC	Biopsy, oocyte polar body or embryo blastomere, microtechnique (for pre-implantation genetic diagnosis); greater than 5 embryos
89300	$8.68	Semen analysis; presence and/or motility of sperm including Huhner test (post coital)
89310	$7.59	Semen analysis; motility and count (not including Huhner test)
89320	$10.86	Semen analysis; volume, count, motility, and differential
89321	$10.63	Semen analysis; sperm presence and motility of sperm, if performed
89322	$13.67	Semen analysis; volume, count, motility, and differential using strict morphologic criteria (eg, Kruger)
89325	$9.41	Sperm antibodies
89329	$17.28	Sperm evaluation; hamster penetration test
89330	$9.15	Sperm evaluation; cervical mucus penetration test, with or without spinnbarkeit test
89331	$17.28	Sperm evaluation, for retrograde ejaculation, urine (sperm concentration, motility, and morphology, as indicated)
89335	IC	Cryopreservation, reproductive tissue, testicular
89342	IC	Storage (per year); embryo(s)
89343	IC	Storage (per year); sperm/semen
89344	IC	Storage (per year); reproductive tissue, testicular/ovarian
89346	IC	Storage (per year); oocyte(s)
89352	IC	Thawing of cryopreserved; embryo(s)
89353	IC	Thawing of cryopreserved; sperm/semen, each aliquot
89354	IC	Thawing of cryopreserved; reproductive tissue, testicular/ovarian
89356	IC	Thawing of cryopreserved; oocytes, each aliquot

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Code	Rate	Description
89398	IC	Unlisted reproductive medicine laboratory procedure
Other Pathology and Laboratory		
36415	$7.56	Collection of venous blood by venipuncture
78267	$9.75	Urea breath test, C-14 (isotopic); acquisition for analysis
78268	$83.26	Urea breath test, C-14 (isotopic); analysis
81105	$107.78	Human Platelet Antigen 1 genotyping (HPA-1), ITGB3 (integrin, beta 3 [platelet glycoprotein IIIa], antigen CD61 [GPIIIa]) (eg, neonatal alloimmune thrombocytopenia [NAIT], post-transfusion purpura), gene analysis, common variant, HPA-1a/b (L33P)
81106	$107.78	Human Platelet Antigen 2 genotyping (HPA-2), GP1BA (glycoprotein Ib [platelet], alpha polypeptide [GPIba]) (eg, neonatal alloimmune thrombocytopenia [NAIT], post-transfusion purpura), gene analysis, common variant, HPA-2a/b (T145M)
81107	$107.78	Human Platelet Antigen 3 genotyping (HPA-3), ITGA2B (integrin, alpha 2b [platelet glycoprotein IIb of IIb/IIIa complex], antigen CD41 [GPIIb]) (eg, neonatal alloimmune thrombocytopenia [NAIT], post-transfusion purpura), gene analysis, common variant, HPA-3a/b (I843S)
81108	$107.78	Human Platelet Antigen 4 genotyping (HPA-4), ITGB3 (integrin, beta 3 [platelet glycoprotein IIIa], antigen CD61 [GPIIIa]) (eg, neonatal alloimmune thrombocytopenia [NAIT], post-transfusion purpura), gene analysis, common variant, HPA-4a/b (R143Q)
81109	$107.78	Human Platelet Antigen 5 genotyping (HPA-5), ITGA2 (integrin, alpha 2 [CD49B, alpha 2 subunit of VLA-2 receptor] [GPIa]) (eg, neonatal alloimmune thrombocytopenia [NAIT], post-transfusion purpura), gene analysis, common variant (eg, HPA-5a/b (K505E))
81110	$107.78	Human Platelet Antigen 6 genotyping (HPA-6w), ITGB3 (integrin, beta 3 [platelet glycoprotein IIIa, antigen CD61] [GPIIIa]) (eg, neonatal alloimmune thrombocytopenia [NAIT], post-transfusion purpura), gene analysis, common variant, HPA-6a/b (R489Q)
81111	$107.78	Human Platelet Antigen 9 genotyping (HPA-9w), ITGA2B (integrin, alpha 2b [platelet glycoprotein IIb of IIb/IIIa complex, antigen CD41] [GPIIb]) (eg, neonatal alloimmune thrombocytopenia [NAIT], post-transfusion purpura), gene analysis, common variant, HPA-9a/b (V837M)
81112	$107.78	Human Platelet Antigen 15 genotyping (HPA-15), CD109 (CD109 molecule) (eg, neonatal alloimmune thrombocytopenia [NAIT], post-transfusion purpura), gene analysis, common variant, HPA-15a/b (S682Y)

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Code	Rate	Description
81120	$170.42	IDH1 (isocitrate dehydrogenase 1 [NADP+], soluble) (eg, glioma), common variants (eg, R132H, R132C)
81121	$260.85	IDH2 (isocitrate dehydrogenase 2 [NADP+], mitochondrial) (eg, glioma), common variants (eg, R140W, R172M)
81161	$246.04	DMD (dystrophin) (eg, Duchenne/Becker muscular dystrophy) deletion analysis, and duplication analysis, if performed
81162	$1,609.32	BRCA1 (BRCA1, DNA repair associated), BRCA2 (BRCA2, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; full sequence analysis and full duplication/deletion analysis (ie, detection of large gene rearrangements)
81163	$412.72	BRCA1 (BRCA1, DNA repair associated), BRCA2 (BRCA2, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; full sequence analysis
81164	$515.22	BRCA1 (BRCA1, DNA repair associated), BRCA2 (BRCA2, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; full duplication/deletion analysis (ie, detection of large gene rearrangements)
81165	$249.46	BRCA1 (BRCA1, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; full sequence analysis
81166	$265.75	BRCA1 (BRCA1, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; full duplication/deletion analysis (ie, detection of large gene rearrangements)
81167	$249.46	BRCA2 (BRCA2, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; full duplication/deletion analysis (ie, detection of large gene rearrangements)
81168	$182.82	CCND1/IGH (t(11;14)) (eg, mantle cell lymphoma) translocation analysis, major breakpoint, qualitative and quantitative, if performed
81170	$264.56	ABL1 (ABL proto-oncogene 1, non-receptor tyrosine kinase) (eg, acquired imatinib tyrosine kinase inhibitor resistance), gene analysis, variants in the kinase domain
81171	$120.82	AFF2 (ALF transcription elongation factor 2 [FMR2]) (eg, fragile X intellectual disability 2 [FRAXE]) gene analysis; evaluation to detect abnormal (eg, expanded) alleles
81172	$242.37	AFF2 (ALF transcription elongation factor 2 [FMR2]) (eg, fragile X intellectual disability 2 [FRAXE]) gene analysis; characterization of alleles (eg, expanded size and methylation status)
81173	$265.75	AR (androgen receptor) (eg, spinal and bulbar muscular atrophy, Kennedy disease, X chromosome inactivation) gene analysis; full gene sequence
81174	$163.32	AR (androgen receptor) (eg, spinal and bulbar muscular atrophy, Kennedy disease, X chromosome inactivation) gene analysis; known familial variant

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Code	Rate	Description
81175	$596.59	ASXL1 (additional sex combs like 1, transcriptional regulator) (eg, myelodysplastic syndrome, myeloproliferative neoplasms, chronic myelomonocytic leukemia), gene analysis; full gene sequence
81176	$213.33	ASXL1 (additional sex combs like 1, transcriptional regulator) (eg, myelodysplastic syndrome, myeloproliferative neoplasms, chronic myelomonocytic leukemia), gene analysis; targeted sequence analysis (eg, exon 12)
81177	$120.82	ATN1 (atrophin 1) (eg, dentatorubral-pallidoluysian atrophy) gene analysis, evaluation to detect abnormal (eg, expanded) alleles
81178	$120.82	ATXN1 (ataxin 1) (eg, spinocerebellar ataxia) gene analysis, evaluation to detect abnormal (eg, expanded) alleles
81179	$120.82	ATXN2 (ataxin 2) (eg, spinocerebellar ataxia) gene analysis, evaluation to detect abnormal (eg, expanded) alleles
81180	$120.82	ATXN3 (ataxin 3) (eg, spinocerebellar ataxia, Machado-Joseph disease) gene analysis, evaluation to detect abnormal (eg, expanded) alleles
81181	$120.82	ATXN7 (ataxin 7) (eg, spinocerebellar ataxia) gene analysis, evaluation to detect abnormal (eg, expanded) alleles
81182	$120.82	ATXN8OS (ATXN8 opposite strand [non-protein coding]) (eg, spinocerebellar ataxia) gene analysis, evaluation to detect abnormal (eg, expanded) alleles
81183	$120.82	ATXN10 (ataxin 10) (eg, spinocerebellar ataxia) gene analysis, evaluation to detect abnormal (eg, expanded) alleles
81184	$120.82	CACNA1A (calcium voltage-gated channel subunit alpha1 A) (eg, spinocerebellar ataxia) gene analysis; evaluation to detect abnormal (eg, expanded) alleles
81185	$746.30	CACNA1A (calcium voltage-gated channel subunit alpha1 A) (eg, spinocerebellar ataxia) gene analysis; full gene sequence
81186	$163.32	CACNA1A (calcium voltage-gated channel subunit alpha1 A) (eg, spinocerebellar ataxia) gene analysis; known familial variant
81187	$120.82	CNBP (CCHC-type zinc finger nucleic acid binding protein) (eg, myotonic dystrophy type 2) gene analysis, evaluation to detect abnormal (eg, expanded) alleles
81188	$120.82	CSTB (cystatin B) (eg, Unverricht-Lundborg disease) gene analysis; evaluation to detect abnormal (eg, expanded) alleles
81189	$242.37	CSTB (cystatin B) (eg, Unverricht-Lundborg disease) gene analysis; full gene sequence
81190	$163.32	CSTB (cystatin B) (eg, Unverricht-Lundborg disease) gene analysis; known familial variant(s)
81191	$182.82	NTRK1 (neurotrophic receptor tyrosine kinase 1) (eg, solid tumors) translocation analysis

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Code	Rate	Description
81192	$182.82	NTRK2 (neurotrophic receptor tyrosine kinase 2) (eg, solid tumors) translocation analysis
81193	$182.82	NTRK3 (neurotrophic receptor tyrosine kinase 3) (eg, solid tumors) translocation analysis
81194	$457.06	NTRK (neurotrophic receptor tyrosine kinase 1, 2, and 3) (eg, solid tumors) translocation analysis
81200	$41.67	ASPA (aspartoacylase) (eg, Canavan disease) gene analysis, common variants (eg, E285A, Y231X)
81201	$687.86	APC (adenomatous polyposis coli) (eg, familial adenomatosis polyposis [FAP], attenuated FAP) gene analysis; full gene sequence
81202	$246.93	APC (adenomatous polyposis coli) (eg, familial adenomatosis polyposis [FAP], attenuated FAP) gene analysis; known familial variants
81203	$176.38	APC (adenomatous polyposis coli) (eg, familial adenomatosis polyposis [FAP], attenuated FAP) gene analysis; duplication/deletion variants
81204	$120.82	AR (androgen receptor) (eg, spinal and bulbar muscular atrophy, Kennedy disease, X chromosome inactivation) gene analysis; characterization of alleles (eg, expanded size or methylation status)
81205	$83.77	BCKDHB (branched-chain keto acid dehydrogenase E1, beta polypeptide) (eg, maple syrup urine disease) gene analysis, common variants (eg, R183P, G278S, E422X)
81206	$144.59	BCR/ABL1 (t(9;22)) (eg, chronic myelogenous leukemia) translocation analysis; major breakpoint, qualitative or quantitative
81207	$127.73	BCR/ABL1 (t(9;22)) (eg, chronic myelogenous leukemia) translocation analysis; minor breakpoint, qualitative or quantitative
81208	$189.27	BCR/ABL1 (t(9;22)) (eg, chronic myelogenous leukemia) translocation analysis; other breakpoint, qualitative or quantitative
81209	$34.67	BLM (Bloom syndrome, RecQ helicase-like) (eg, Bloom syndrome) gene analysis, 2281del6ins7 variant
81210	$154.68	BRAF (B-Raf proto-oncogene, serine/threonine kinase) (eg, colon cancer, melanoma), gene analysis, V600 variant(s)
81212	$388.03	BRCA1 (BRCA1, DNA repair associated), BRCA2 (BRCA2, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; 185delAG, 5385insC, 6174delT variants
81215	$330.92	BRCA1 (BRCA1, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; known familial variant
81216	$163.25	BRCA2 (BRCA2, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; full sequence analysis

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Code	Rate	Description
81217	$330.92	BRCA2 (BRCA2, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; known familial variant
81218	$213.33	CEBPA (CCAAT/enhancer binding protein [C/EBP], alpha) (eg, acute myeloid leukemia), gene analysis, full gene sequence
81219	$107.26	CALR (calreticulin) (eg, myeloproliferative disorders), gene analysis, common variants in exon 9
81220	$490.85	CFTR (cystic fibrosis transmembrane conductance regulator) (eg, cystic fibrosis) gene analysis; common variants (eg, ACMG/ACOG guidelines)
81221	$85.74	CFTR (cystic fibrosis transmembrane conductance regulator) (eg, cystic fibrosis) gene analysis; known familial variants
81222	$383.68	CFTR (cystic fibrosis transmembrane conductance regulator) (eg, cystic fibrosis) gene analysis; duplication/deletion variants
81223	$440.06	CFTR (cystic fibrosis transmembrane conductance regulator) (eg, cystic fibrosis) gene analysis; full gene sequence
81224	$148.82	CFTR (cystic fibrosis transmembrane conductance regulator) (eg, cystic fibrosis) gene analysis; intron 8 poly-T analysis (eg, male infertility)
81225	$256.94	CYP2C19 (cytochrome P450, family 2, subfamily C, polypeptide 19) (eg, drug metabolism), gene analysis, common variants (eg, *2, *3, *4, *8, *17)
81226	$397.65	CYP2D6 (cytochrome P450, family 2, subfamily D, polypeptide 6) (eg, drug metabolism), gene analysis, common variants (eg, *2, *3, *4, *5, *6, *9, *10, *17, *19, *29, *35, *41, *1XN, *2XN, *4XN)
81227	$154.16	CYP2C9 (cytochrome P450, family 2, subfamily C, polypeptide 9) (eg, drug metabolism), gene analysis, common variants (eg, *2, *3, *5, *6)
81228	$793.69	Cytogenomic (genome-wide) analysis for constitutional chromosomal abnormalities; interrogation of genomic regions for copy number variants, comparative genomic hybridization [CGH] microarray analysis
81229	$1,022.98	Cytogenomic (genome-wide) analysis for constitutional chromosomal abnormalities; interrogation of genomic regions for copy number and single nucleotide polymorphism (SNP) variants, comparative genomic hybridization (CGH) microarray analysis
81230	$154.16	CYP3A4 (cytochrome P450 family 3 subfamily A member 4) (eg, drug metabolism), gene analysis, common variant(s) (eg, *2, *22)
81231	$154.16	CYP3A5 (cytochrome P450 family 3 subfamily A member 5) (eg, drug metabolism), gene analysis, common variants (eg, *2, *3, *4, *5, *6, *7)

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Code	Rate	Description
81232	$154.16	DPYD (dihydropyrimidine dehydrogenase) (eg, 5-fluorouracil/5-FU and capecitabine drug metabolism), gene analysis, common variant(s) (eg, *2A, *4, *5, *6)
81233	$154.68	BTK (Bruton's tyrosine kinase) (eg, chronic lymphocytic leukemia) gene analysis, common variants (eg, C481S, C481R, C481F)
81234	$120.82	DMPK (DM1 protein kinase) (eg, myotonic dystrophy type 1) gene analysis; evaluation to detect abnormal (expanded) alleles
81235	$286.24	EGFR (epidermal growth factor receptor) (eg, non-small cell lung cancer) gene analysis, common variants (eg, exon 19 LREA deletion, L858R, T790M, G719A, G719S, L861Q)
81236	$249.46	EZH2 (enhancer of zeste 2 polycomb repressive complex 2 subunit) (eg, myelodysplastic syndrome, myeloproliferative neoplasms) gene analysis, full gene sequence
81237	$154.68	EZH2 (enhancer of zeste 2 polycomb repressive complex 2 subunit) (eg, diffuse large B-cell lymphoma) gene analysis, common variant(s) (eg, codon 646)
81238	$529.13	F9 (coagulation factor IX) (eg, hemophilia B), full gene sequence
81239	$242.37	DMPK (DM1 protein kinase) (eg, myotonic dystrophy type 1) gene analysis; characterization of alleles (eg, expanded size)
81240	$57.93	F2 (prothrombin, coagulation factor II) (eg, hereditary hypercoagulability) gene analysis, 20210G>A variant
81241	$64.70	F5 (coagulation factor V) (eg, hereditary hypercoagulability) gene analysis, Leiden variant
81242	$32.29	FANCC (Fanconi anemia, complementation group C) (eg, Fanconi anemia, type C) gene analysis, common variant (eg, IVS4+4A>T)
81243	$50.30	FMR1 (fragile X messenger ribonucleoprotein 1) (eg, fragile X syndrome, X-linked intellectual disability [XLID]) gene analysis; evaluation to detect abnormal (eg, expanded) alleles
81244	$39.59	FMR1 (fragile X messenger ribonucleoprotein 1) (eg, fragile X syndrome, X-linked intellectual disability [XLID]) gene analysis; characterization of alleles (eg, expanded size and promoter methylation status)
81245	$145.96	FLT3 (fms-related tyrosine kinase 3) (eg, acute myeloid leukemia), gene analysis; internal tandem duplication (ITD) variants (ie, exons 14, 15)
81246	$73.20	FLT3 (fms-related tyrosine kinase 3) (eg, acute myeloid leukemia), gene analysis; tyrosine kinase domain (TKD) variants (eg, D835, I836)
81247	$154.16	G6PD (glucose-6-phosphate dehydrogenase) (eg, hemolytic anemia, jaundice), gene analysis; common variant(s) (eg, A, A-)
81248	$330.92	G6PD (glucose-6-phosphate dehydrogenase) (eg, hemolytic anemia, jaundice), gene analysis; known familial variant(s)

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Code	Rate	Description
81249	$529.13	G6PD (glucose-6-phosphate dehydrogenase) (eg, hemolytic anemia, jaundice), gene analysis; full gene sequence
81250	$51.58	G6PC (glucose-6-phosphatase, catalytic subunit) (eg, glycogen storage disease, type 1a, von Gierke disease) gene analysis, common variants (eg, R83C, Q347X)
81251	$41.67	GBA (glucosidase, beta, acid) (eg, Gaucher disease) gene analysis, common variants (eg, N370S, 84GG, L444P, IVS2+1G>A)
81252	$89.18	GJB2 (gap junction protein, beta 2, 26kDa, connexin 26) (eg, nonsyndromic hearing loss) gene analysis; full gene sequence
81253	$54.25	GJB2 (gap junction protein, beta 2, 26kDa, connexin 26) (eg, nonsyndromic hearing loss) gene analysis; known familial variants
81254	$30.87	GJB6 (gap junction protein, beta 6, 30kDa, connexin 30) (eg, nonsyndromic hearing loss) gene analysis, common variants (eg, 309kb [del(GJB6-D13S1830)] and 232kb [del(GJB6-D13S1854)])
81255	$45.37	HEXA (hexosaminidase A [alpha polypeptide]) (eg, Tay-Sachs disease) gene analysis, common variants (eg, 1278insTATC, 1421+1G>C, G269S)
81256	$57.64	HFE (hemochromatosis) (eg, hereditary hemochromatosis) gene analysis, common variants (eg, C282Y, H63D)
81257	$90.18	HBA1/HBA2 (alpha globin 1 and alpha globin 2) (eg, alpha thalassemia, Hb Bart hydrops fetalis syndrome, HbH disease), gene analysis; common deletions or variant (eg, Southeast Asian, Thai, Filipino, Mediterranean, alpha3.7, alpha4.2, alpha20.5, Constant Spring)
81258	$330.92	HBA1/HBA2 (alpha globin 1 and alpha globin 2) (eg, alpha thalassemia, Hb Bart hydrops fetalis syndrome, HbH disease), gene analysis; known familial variant
81259	$529.13	HBA1/HBA2 (alpha globin 1 and alpha globin 2) (eg, alpha thalassemia, Hb Bart hydrops fetalis syndrome, HbH disease), gene analysis; full gene sequence
81260	$34.67	IKBKAP (inhibitor of kappa light polypeptide gene enhancer in B-cells, kinase complex-associated protein) (eg, familial dysautonomia) gene analysis, common variants (eg, 2507+6T>C, R696P)
81261	$174.60	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)
81262	$60.45	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)

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Code	Rate	Description
81263	$259.73	IGH@ (Immunoglobulin heavy chain locus) (eg, leukemia and lymphoma, B-cell), variable region somatic mutation analysis
81264	$152.33	IGK@ (Immunoglobulin kappa light chain locus) (eg, leukemia and lymphoma, B-cell), gene rearrangement analysis, evaluation to detect abnormal clonal population(s)
81265	$205.54	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 donor testing, twin zygosity testing, or maternal cell contamination of fetal cells)
81266	$268.80	Comparative analysis using Short Tandem Repeat (STR) markers; each additional specimen (eg, additional cord blood donor, additional fetal samples from different cultures, or additional zygosity in multiple birth pregnancies) (List separately in addition to code for primary procedure)
81267	$182.95	Chimerism (engraftment) analysis, post transplantation specimen (eg, hematopoietic stem cell), includes comparison to previously performed baseline analyses; without cell selection
81268	$229.98	Chimerism (engraftment) analysis, post transplantation specimen (eg, hematopoietic stem cell), includes comparison to previously performed baseline analyses; with cell selection (eg, CD3, CD33), each cell type
81269	$178.49	HBA1/HBA2 (alpha globin 1 and alpha globin 2) (eg, alpha thalassemia, Hb Bart hydrops fetalis syndrome, HbH disease), gene analysis; duplication/deletion variants
81270	$80.83	JAK2 (Janus kinase 2) (eg, myeloproliferative disorder) gene analysis, p.Val617Phe (V617F) variant
81271	$120.82	HTT (huntingtin) (eg, Huntington disease) gene analysis; evaluation to detect abnormal (eg, expanded) alleles
81272	$290.59	KIT (v-kit Hardy-Zuckerman 4 feline sarcoma viral oncogene homolog) (eg, gastrointestinal stromal tumor [GIST], acute myeloid leukemia, melanoma), gene analysis, targeted sequence analysis (eg, exons 8, 11, 13, 17, 18)
81273	$110.12	KIT (v-kit Hardy-Zuckerman 4 feline sarcoma viral oncogene homolog) (eg, mastocytosis), gene analysis, D816 variant(s)
81274	$242.37	HTT (huntingtin) (eg, Huntington disease) gene analysis; characterization of alleles (eg, expanded size)
81275	$170.42	KRAS (Kirsten rat sarcoma viral oncogene homolog) (eg, carcinoma) gene analysis; variants in exon 2 (eg, codons 12 and 13)
81276	$170.42	KRAS (Kirsten rat sarcoma viral oncogene homolog) (eg, carcinoma) gene analysis; additional variant(s) (eg, codon 61, codon 146)

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Code	Rate	Description
81277	$1,022.98	Cytogenomic neoplasia (genome-wide) microarray analysis, interrogation of genomic regions for copy number and loss-of-heterozygosity variants for chromosomal abnormalities
81278	$182.82	IGH@/BCL2 (t(14;18)) (eg, follicular lymphoma) translocation analysis, major breakpoint region (MBR) and minor cluster region (mcr) breakpoints, qualitative or quantitative
81279	$163.32	JAK2 (Janus kinase 2) (eg, myeloproliferative disorder) targeted sequence analysis (eg, exons 12 and 13)
81283	$64.70	IFNL3 (interferon, lambda 3) (eg, drug response), gene analysis, rs12979860 variant
81284	$120.82	FXN (frataxin) (eg, Friedreich ataxia) gene analysis; evaluation to detect abnormal (expanded) alleles
81285	$242.37	FXN (frataxin) (eg, Friedreich ataxia) gene analysis; characterization of alleles (eg, expanded size)
81286	$242.37	FXN (frataxin) (eg, Friedreich ataxia) gene analysis; full gene sequence
81287	$109.92	MGMT (O-6-methylguanine-DNA methyltransferase) (eg, glioblastoma multiforme) promoter methylation analysis
81288	$169.60	MLH1 (mutL homolog 1, colon cancer, nonpolyposis type 2) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; promoter methylation analysis
81289	$163.32	FXN (frataxin) (eg, Friedreich ataxia) gene analysis; known familial variant(s)
81290	$34.67	MCOLN1 (mucolipin 1) (eg, Mucolipidosis, type IV) gene analysis, common variants (eg, IVS3-2A>G, del6.4kb)
81291	$57.62	MTHFR (5,10-methylenetetrahydrofolate reductase) (eg, hereditary hypercoagulability) gene analysis, common variants (eg, 677T, 1298C)
81292	$595.62	MLH1 (mutL homolog 1, colon cancer, nonpolyposis type 2) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; full sequence analysis
81293	$291.90	MLH1 (mutL homolog 1, colon cancer, nonpolyposis type 2) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; known familial variants
81294	$178.49	MLH1 (mutL homolog 1, colon cancer, nonpolyposis type 2) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; duplication/deletion variants
81295	$336.61	MSH2 (mutS homolog 2, colon cancer, nonpolyposis type 1) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; full sequence analysis
81296	$297.84	MSH2 (mutS homolog 2, colon cancer, nonpolyposis type 1) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; known familial variants

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Code	Rate	Description
81297	$188.10	MSH2 (mutS homolog 2, colon cancer, nonpolyposis type 1) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; duplication/deletion variants
81298	$566.03	MSH6 (mutS homolog 6 [E. coli]) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; full sequence analysis
81299	$271.62	MSH6 (mutS homolog 6 [E. coli]) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; known familial variants
81300	$209.89	MSH6 (mutS homolog 6 [E. coli]) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; duplication/deletion variants
81301	$307.39	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
81302	$465.52	MECP2 (methyl CpG binding protein 2) (eg, Rett syndrome) gene analysis; full sequence analysis
81303	$105.83	MECP2 (methyl CpG binding protein 2) (eg, Rett syndrome) gene analysis; known familial variant
81304	$132.28	MECP2 (methyl CpG binding protein 2) (eg, Rett syndrome) gene analysis; duplication/deletion variants
81305	$154.68	MYD88 (myeloid differentiation primary response 88) (eg, Waldenstrom's macroglobulinemia, lymphoplasmacytic leukemia) gene analysis, p.Leu265Pro (L265P) variant
81306	$256.94	NUDT15 (nudix hydrolase 15) (eg, drug metabolism) gene analysis, common variant(s) (eg, *2, *3, *4, *5, *6)
81307	$596.59	PALB2 (partner and localizer of BRCA2) (eg, breast and pancreatic cancer) gene analysis; full gene sequence
81308	$265.75	PALB2 (partner and localizer of BRCA2) (eg, breast and pancreatic cancer) gene analysis; known familial variant
81309	$242.37	PIK3CA (phosphatidylinositol-4, 5-biphosphate 3-kinase, catalytic subunit alpha) (eg, colorectal and breast cancer) gene analysis, targeted sequence analysis (eg, exons 7, 9, 20)
81310	$217.40	NPM1 (nucleophosmin) (eg, acute myeloid leukemia) gene analysis, exon 12 variants
81311	$260.85	NRAS (neuroblastoma RAS viral [v-ras] oncogene homolog) (eg, colorectal carcinoma), gene analysis, variants in exon 2 (eg, codons 12 and 13) and exon 3 (eg, codon 61)
81312	$120.82	PABPN1 (poly[A] binding protein nuclear 1) (eg, oculopharyngeal muscular dystrophy) gene analysis, evaluation to detect abnormal (eg, expanded) alleles
81313	$224.92	PCA3/KLK3 (prostate cancer antigen 3 [non-protein coding]/kallikrein-related peptidase 3 [prostate specific antigen]) ratio (eg, prostate cancer)

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Code	Rate	Description
81314	$290.59	PDGFRA (platelet-derived growth factor receptor, alpha polypeptide) (eg, gastrointestinal stromal tumor [GIST]), gene analysis, targeted sequence analysis (eg, exons 12, 18)
81315	$182.82	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
81316	$182.82	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
81317	$596.59	PMS2 (postmeiotic segregation increased 2 [S. cerevisiae]) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; full sequence analysis
81318	$291.90	PMS2 (postmeiotic segregation increased 2 [S. cerevisiae]) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; known familial variants
81319	$179.46	PMS2 (postmeiotic segregation increased 2 [S. cerevisiae]) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; duplication/deletion variants
81320	$256.94	PLCG2 (phospholipase C gamma 2) (eg, chronic lymphocytic leukemia) gene analysis, common variants (eg, R665W, S707F, L845F)
81321	$529.13	PTEN (phosphatase and tensin homolog) (eg, Cowden syndrome, PTEN hamartoma tumor syndrome) gene analysis; full sequence analysis
81322	$41.10	PTEN (phosphatase and tensin homolog) (eg, Cowden syndrome, PTEN hamartoma tumor syndrome) gene analysis; known familial variant
81323	$264.56	PTEN (phosphatase and tensin homolog) (eg, Cowden syndrome, PTEN hamartoma tumor syndrome) gene analysis; duplication/deletion variant
81324	$668.78	PMP22 (peripheral myelin protein 22) (eg, Charcot-Marie-Tooth, hereditary neuropathy with liability to pressure palsies) gene analysis; duplication/deletion analysis
81325	$678.67	PMP22 (peripheral myelin protein 22) (eg, Charcot-Marie-Tooth, hereditary neuropathy with liability to pressure palsies) gene analysis; full sequence analysis
81326	$41.10	PMP22 (peripheral myelin protein 22) (eg, Charcot-Marie-Tooth, hereditary neuropathy with liability to pressure palsies) gene analysis; known familial variant
81327	$169.32	SEPT9 (Septin9) (eg, colorectal cancer) promoter methylation analysis

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Code	Rate	Description
81328	$154.16	SLCO1B1 (solute carrier organic anion transporter family, member 1B1) (eg, adverse drug reaction), gene analysis, common variant(s) (eg, *5)
81329	$120.82	SMN1 (survival of motor neuron 1, telomeric) (eg, spinal muscular atrophy) gene analysis; dosage/deletion analysis (eg, carrier testing), includes SMN2 (survival of motor neuron 2, centromeric) analysis, if performed
81330	$41.45	SMPD1(sphingomyelin phosphodiesterase 1, acid lysosomal) (eg, Niemann-Pick disease, Type A) gene analysis, common variants (eg, R496L, L302P, fsP330)
81331	$45.04	SNRPN/UBE3A (small nuclear ribonucleoprotein polypeptide N and ubiquitin protein ligase E3A) (eg, Prader-Willi syndrome and/or Angelman syndrome), methylation analysis
81332	$38.49	SERPINA1 (serpin peptidase inhibitor, clade A, alpha-1 antiproteinase, antitrypsin, member 1) (eg, alpha-1-antitrypsin deficiency), gene analysis, common variants (eg, *S and *Z)
81333	$120.82	TGFBI (transforming growth factor beta-induced) (eg, corneal dystrophy) gene analysis, common variants (eg, R124H, R124C, R124L, R555W, R555Q)
81334	$290.59	RUNX1 (runt related transcription factor 1) (eg, acute myeloid leukemia, familial platelet disorder with associated myeloid malignancy), gene analysis, targeted sequence analysis (eg, exons 3–8)
81335	$154.16	TPMT (thiopurine S-methyltransferase) (eg, drug metabolism), gene analysis, common variants (eg, *2, *3)
81336	$265.75	SMN1 (survival of motor neuron 1, telomeric) (eg, spinal muscular atrophy) gene analysis; full gene sequence
81337	$163.32	SMN1 (survival of motor neuron 1, telomeric) (eg, spinal muscular atrophy) gene analysis; known familial sequence variant(s)
81338	$132.57	MPL (MPL proto-oncogene, thrombopoietin receptor) (eg, myeloproliferative disorder) gene analysis; common variants (eg, W515A, W515K, W515L, W515R)
81339	$163.32	MPL (MPL proto-oncogene, thrombopoietin receptor) (eg, myeloproliferative disorder) gene analysis; sequence analysis, exon 10
81340	$184.24	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)
81341	$43.73	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)

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Code	Rate	Description
81342	$177.70	TRG@ (T cell antigen receptor, gamma) (eg, leukemia and lymphoma), gene rearrangement analysis, evaluation to detect abnormal clonal population(s)
81343	$120.82	PPP2R2B (protein phosphatase 2 regulatory subunit Bbeta) (eg, spinocerebellar ataxia) gene analysis, evaluation to detect abnormal (eg, expanded) alleles
81344	$120.82	TBP (TATA box binding protein) (eg, spinocerebellar ataxia) gene analysis, evaluation to detect abnormal (eg, expanded) alleles
81345	$163.32	TERT (telomerase reverse transcriptase) (eg, thyroid carcinoma, glioblastoma multiforme) gene analysis, targeted sequence analysis (eg, promoter region)
81346	$154.16	TYMS (thymidylate synthetase) (eg, 5-fluorouracil/5-FU drug metabolism), gene analysis, common variant(s) (eg, tandem repeat variant)
81347	$170.42	SF3B1 (splicing factor [3b] subunit B1) (eg, myelodysplastic syndrome/acute myeloid leukemia) gene analysis, common variants (eg, A672T, E622D, L833F, R625C, R625L)
81348	$154.68	SRSF2 (serine and arginine-rich splicing factor 2) (eg, myelodysplastic syndrome, acute myeloid leukemia) gene analysis, common variants (eg, P95H, P95L)
81349	$1,022.98	Cytogenomic (genome-wide) analysis for constitutional chromosomal abnormalities; interrogation of genomic regions for copy number and loss-of-heterozygosity variants, low-pass sequencing analysis
81350	$206.36	UGT1A1 (UDP glucuronosyltransferase 1 family, polypeptide A1) (eg, drug metabolism, hereditary unconjugated hyperbilirubinemia [Gilbert syndrome]) gene analysis, common variants (eg, *28, *36, *37)
81351	$566.03	TP53 (tumor protein 53) (eg, Li-Fraumeni syndrome) gene analysis; full gene sequence
81352	$290.59	TP53 (tumor protein 53) (eg, Li-Fraumeni syndrome) gene analysis; targeted sequence analysis (eg, 4 oncology)
81353	$271.62	TP53 (tumor protein 53) (eg, Li-Fraumeni syndrome) gene analysis; known familial variant
81355	$77.78	VKORC1 (vitamin K epoxide reductase complex, subunit 1) (eg, warfarin metabolism), gene analysis, common variant(s) (eg, -1639G>A, c.173+1000C>T)
81357	$170.42	U2AF1 (U2 small nuclear RNA auxiliary factor 1) (eg, myelodysplastic syndrome, acute myeloid leukemia) gene analysis, common variants (eg, S34F, S34Y, Q157R, Q157P)
81360	$170.42	ZRSR2 (zinc finger CCCH-type, RNA binding motif and serine/arginine-rich 2) (eg, myelodysplastic syndrome, acute myeloid leukemia) gene analysis, common variant(s) (eg, E65fs, E122fs, R448fs)

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Code	Rate	Description
81361	$154.16	HBB (hemoglobin, subunit beta) (eg, sickle cell anemia, beta thalassemia, hemoglobinopathy); common variant(s) (eg, HbS, HbC, HbE)
81362	$330.92	HBB (hemoglobin, subunit beta) (eg, sickle cell anemia, beta thalassemia, hemoglobinopathy); known familial variant(s)
81363	$178.49	HBB (hemoglobin, subunit beta) (eg, sickle cell anemia, beta thalassemia, hemoglobinopathy); duplication/deletion variant(s)
81364	$286.24	HBB (hemoglobin, subunit beta) (eg, sickle cell anemia, beta thalassemia, hemoglobinopathy); full gene sequence
81370	$354.62	HLA Class I and II typing, low resolution (eg, antigen equivalents); HLA-A, -B, -C, -DRB1/3/4/5, and -DQB1
81371	$356.74	HLA Class I and II typing, low resolution (eg, antigen equivalents); HLA-A, -B, and -DRB1 (eg, verification typing)
81372	$355.92	HLA Class I typing, low resolution (eg, antigen equivalents); complete (ie, HLA-A, -B, and -C)
81373	$112.38	HLA Class I typing, low resolution (eg, antigen equivalents); one locus (eg, HLA-A, -B, or -C), each
81374	$65.55	HLA Class I typing, low resolution (eg, antigen equivalents); one antigen equivalent (eg, B*27), each
81375	$194.67	HLA Class II typing, low resolution (eg, antigen equivalents); HLA-DRB1/3/4/5 and -DQB1
81376	$107.78	HLA Class II typing, low resolution (eg, antigen equivalents); one locus (eg, HLA-DRB1, -DRB3/4/5, -DQB1, -DQA1, -DPB1, or -DPA1), each
81377	$83.55	HLA Class II typing, low resolution (eg, antigen equivalents); one antigen equivalent, each
81378	$304.75	HLA Class I and II typing, high resolution (ie, alleles or allele groups), HLA-A, -B, -C, and -DRB1
81379	$295.76	HLA Class I typing, high resolution (ie, alleles or allele groups); complete (ie, HLA-A, -B, and -C)
81380	$156.31	HLA Class I typing, high resolution (ie, alleles or allele groups); one locus (eg, HLA-A, -B, or -C), each
81381	$149.83	HLA Class I typing, high resolution (ie, alleles or allele groups); one allele or allele group (eg, B*57:01P), each
81382	$109.07	HLA Class II typing, high resolution (ie, alleles or allele groups); one locus (eg, HLA-DRB1, -DRB3/4/5, -DQB1, -DQA1, -DPB1, or -DPA1), each
81383	$96.24	HLA Class II typing, high resolution (ie, alleles or allele groups); one allele or allele group (eg, HLA-DQB1*06:02P), each
81400	$56.40	Molecular pathology procedure, Level 1 (eg, identification of single germline variant [eg, SNP] by techniques such as restriction enzyme digestion or melt curve analysis)

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Code	Rate	Description
81401	$120.82	Molecular pathology procedure, Level 2 (eg, 2–10 SNPs, 1 methylated variant, or 1 somatic variant [typically using nonsequencing target variant analysis], or detection of a dynamic mutation disorder/triplet repeat)
81402	$132.57	Molecular pathology procedure, Level 3 (eg, >10 SNPs, 2–10 methylated variants, or 2–10 somatic variants [typically using non-sequencing target variant analysis], immunoglobulin and T-cell receptor gene rearrangements, duplication/deletion variants of 1 exon, loss of heterozygosity [LOH], uniparental disomy [UPD])
81403	$163.32	Molecular pathology procedure, Level 4 (eg, analysis of single exon by DNA sequence analysis, analysis of >10 amplicons using multiplex PCR in 2 or more independent reactions, mutation scanning or duplication/deletion variants of 2–5 exons)
81404	$242.37	Molecular pathology procedure, Level 5 (eg, analysis of 2–5 exons by DNA sequence analysis, mutation scanning or duplication/deletion variants of 6–10 exons, or characterization of a dynamic mutation disorder/triplet repeat by Southern blot analysis)
81405	$265.75	Molecular pathology procedure, Level 6 (eg, analysis of 6–10 exons by DNA sequence analysis, mutation scanning or duplication/deletion variants of 11–25 exons, regionally targeted cytogenomic array analysis)
81406	$249.46	Molecular pathology procedure, Level 7 (eg, analysis of 11–25 exons by DNA sequence analysis, mutation scanning or duplication/deletion variants of 26–50 exons)
81407	$746.30	Molecular pathology procedure, Level 8 (eg, analysis of 26–50 exons by DNA sequence analysis, mutation scanning or duplication/deletion variants of >50 exons, sequence analysis of multiple genes on one platform)
81408	$1,763.75	Molecular pathology procedure, Level 9 (eg, analysis of >50 exons in a single gene by DNA sequence analysis)
81410	$444.47	Aortic dysfunction or dilation (eg, Marfan syndrome, Loeys Dietz syndrome, Ehler Danlos syndrome type IV, arterial tortuosity syndrome); genomic sequence analysis panel, must include sequencing of at least 9 genes, including FBN1, TGFBR1, TGFBR2, COL3A1, MYH11, ACTA2, SLC2A10, SMAD3, and MYLK
81411	$1,190.70	Aortic dysfunction or dilation (eg, Marfan syndrome, Loeys Dietz syndrome, Ehler Danlos syndrome type IV, arterial tortuosity syndrome); duplication/deletion analysis panel, must include analyses for TGFBR1, TGFBR2, MYH11, and COL3A1

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Code	Rate	Description
81412	$2,159.32	Ashkenazi Jewish associated disorders (eg, Bloom syndrome, Canavan disease, cystic fibrosis, familial dysautonomia, Fanconi anemia group C, Gaucher disease, Tay-Sachs disease), genomic sequence analysis panel, must include sequencing of at least 9 genes, including ASPA, BLM, CFTR, FANCC, GBA, HEXA, IKBKAP, MCOLN1, and SMPD1
81413	$515.81	Cardiac ion channelopathies (eg, Brugada syndrome, long QT syndrome, short QT syndrome, catecholaminergic polymorphic ventricular tachycardia); genomic sequence analysis panel, must include sequencing of at least 10 genes, including ANK2, CASQ2, CAV3, KCNE1, KCNE2, KCNH2, KCNJ2, KCNQ1, RYR2, and SCN5A
81414	$515.81	Cardiac ion channelopathies (eg, Brugada syndrome, long QT syndrome, short QT syndrome, catecholaminergic polymorphic ventricular tachycardia); duplication/deletion gene analysis panel, must include analysis of at least 2 genes, including KCNH2 and KCNQ1
81415	$4,215.36	Exome (eg, unexplained constitutional or heritable disorder or syndrome); sequence analysis
81416	$10,582.50	Exome (eg, unexplained constitutional or heritable disorder or syndrome); sequence analysis, each comparator exome (eg, parents, siblings) (List separately in addition to code for primary procedure)
81417	$282.20	Exome (eg, unexplained constitutional or heritable disorder or syndrome); re-evaluation of previously obtained exome sequence (eg, updated knowledge or unrelated condition/syndrome)
81418	$0.00	Drug metabolism (eg, pharmacogenomics) genomic sequence analysis panel, must include testing of at least 6 genes, including CYP2C19, CYP2D6, and CYP2D6 duplication/deletion analysis
81419	$2,159.32	Epilepsy genomic sequence analysis panel, must include analyses for ALDH7A1, CACNA1A, CDKL5, CHD2, GABRG2, GRIN2A, KCNQ2, MECP2, PCDH19, POLG, PRRT2, SCN1A, SCN1B, SCN2A, SCN8A, SLC2A1, SLC9A6, STXBP1, SYNGAP1, TCF4, TPP1, TSC1, TSC2, and ZEB2
81420	$669.39	Fetal chromosomal aneuploidy (eg, trisomy 21, monosomy X) genomic sequence analysis panel, circulating cell-free fetal DNA in maternal blood, must include analysis of chromosomes 13, 18, and 21
81422	$669.39	Fetal chromosomal microdeletion(s) genomic sequence analysis (eg, DiGeorge syndrome, Cri-du-chat syndrome), circulating cell-free fetal DNA in maternal blood
81425	$4,436.89	Genome (eg, unexplained constitutional or heritable disorder or syndrome); sequence analysis

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Code	Rate	Description
81426	$2,389.84	Genome (eg, unexplained constitutional or heritable disorder or syndrome); sequence analysis, each comparator genome (eg, parents, siblings) (List separately in addition to code for primary procedure)
81427	$2,061.52	Genome (eg, unexplained constitutional or heritable disorder or syndrome); re-evaluation of previously obtained genome sequence (eg, updated knowledge or unrelated condition/syndrome)
81430	$1,433.05	Hearing loss (eg, nonsyndromic hearing loss, Usher syndrome, Pendred syndrome); genomic sequence analysis panel, must include sequencing of at least 60 genes, including CDH23, CLRN1, GJB2, GPR98, MTRNR1, MYO7A, MYO15A, PCDH15, OTOF, SLC26A4, TMC1, TMPRSS3, USH1C, USH1G, USH2A, and WFS1
81431	$599.30	Hearing loss (eg, nonsyndromic hearing loss, Usher syndrome, Pendred syndrome); duplication/deletion analysis panel, must include copy number analyses for STRC and DFNB1 deletions in GJB2 and GJB6 genes
81432	$598.84	Hereditary breast cancer-related disorders (eg, hereditary breast cancer, hereditary ovarian cancer, hereditary endometrial cancer); genomic sequence analysis panel, must include sequencing of at least 10 genes, always including BRCA1, BRCA2, CDH1, MLH1, MSH2, MSH6, PALB2, PTEN, STK11, and TP53
81434	$527.28	Hereditary retinal disorders (eg, retinitis pigmentosa, Leber congenital amaurosis, cone-rod dystrophy), genomic sequence analysis panel, must include sequencing of at least 15 genes, including ABCA4, CNGA1, CRB1, EYS, PDE6A, PDE6B, PRPF31, PRPH2, RDH12, RHO, RP1, RP2, RPE65, RPGR, and USH2A
81435	$515.81	Hereditary colon cancer disorders (eg, Lynch syndrome, PTEN hamartoma syndrome, Cowden syndrome, familial adenomatosis polyposis); genomic sequence analysis panel, must include sequencing of at least 10 genes, including APC, BMPR1A, CDH1, MLH1, MSH2, MSH6, MUTYH, PTEN, SMAD4, and STK11
81437	$387.08	Hereditary neuroendocrine tumor disorders (eg, medullary thyroid carcinoma, parathyroid carcinoma, malignant pheochromocytoma or paraganglioma); genomic sequence analysis panel, must include sequencing of at least 6 genes, including MAX, SDHB, SDHC, SDHD, TMEM127, and VHL
81439	$515.81	Hereditary cardiomyopathy (eg, hypertrophic cardiomyopathy, dilated cardiomyopathy, arrhythmogenic right ventricular cardiomyopathy), genomic sequence analysis panel, must include sequencing of at least 5 cardiomyopathy-related genes (eg, DSG2, MYBPC3, MYH7, PKP2, TTN)

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Code	Rate	Description
81440	$2,931.35	Nuclear encoded mitochondrial genes (eg, neurologic or myopathic phenotypes), genomic sequence panel, must include analysis of at least 100 genes, including BCS1L, C10orf2, COQ2, COX10, DGUOK, MPV17, OPA1, PDSS2, POLG, POLG2, RRM2B, SCO1, SCO2, SLC25A4, SUCLA2, SUCLG1, TAZ, TK2, and TYMP
81441	$2,159.32	Inherited bone marrow failure syndromes (IBMFS) (eg, Fanconi anemia, dyskeratosis congenita, Diamond-Blackfan anemia, Shwachman-Diamond syndrome, GATA2 deficiency syndrome, congenital amegakaryocytic thrombocytopenia) sequence analysis panel, must include sequencing of at least 30 genes, including BRCA2, BRIP1, DKC1, FANCA, FANCB, FANCC, FANCD2, FANCE, FANCF, FANCG, FANCI, FANCL, GATA1, GATA2, MPL, NHP2, NOP10, PALB2, RAD51C, RPL11, RPL35A, RPL5, RPS10, RPS19, RPS24, RPS26, RPS7, SBDS, TERT, and TINF2
81442	$1,890.39	Noonan spectrum disorders (eg, Noonan syndrome, cardio-facio-cutaneous syndrome, Costello syndrome, LEOPARD syndrome, Noonan-like syndrome), genomic sequence analysis panel, must include sequencing of at least 12 genes, including BRAF, CBL, HRAS, KRAS, MAP2K1, MAP2K2, NRAS, PTPN11, RAF1, RIT1, SHOC2, and SOS1
81443	$2,159.32	Genetic testing for severe inherited conditions (eg, cystic fibrosis, Ashkenazi Jewish–associated disorders [eg, Bloom syndrome, Canavan disease, Fanconi anemia type C, mucolipidosis type VI, Gaucher disease, Tay-Sachs disease], beta hemoglobinopathies, phenylketonuria, galactosemia), genomic sequence analysis panel, must include sequencing of at least 15 genes (eg, ACADM, ARSA, ASPA, ATP7B, BCKDHA, BCKDHB, BLM, CFTR, DHCR7, FANCC, G6PC, GAA, GALT, GBA, GBE1, HBB, HEXA, IKBKAP, MCOLN1, PAH)
81445	$527.28	Solid organ neoplasm, genomic sequence analysis panel, 5–50 genes, interrogation for sequence variants and copy number variants or rearrangements, if performed; DNA analysis or combined DNA and RNA analysis
81448	$515.81	Hereditary peripheral neuropathies (eg, Charcot-Marie-Tooth, spastic paraplegia), genomic sequence analysis panel, must include sequencing of at least 5 peripheral neuropathy-related genes (eg, BSCL2, GJB1, MFN2, MPZ, REEP1, SPAST, SPG11, SPTLC1)
81449	$527.28	Solid organ neoplasm, genomic sequence analysis panel, 5–50 genes, interrogation for sequence variants and copy number variants or rearrangements, if performed; RNA analysis

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Code	Rate	Description
81450	$669.81	Hematolymphoid neoplasm or disorder, genomic sequence analysis panel, 5–50 genes, interrogation for sequence variants, and copy number variants or rearrangements, or isoform expression or mRNA expression levels, if performed; DNA analysis or combined DNA and RNA analysis
81451	$669.81	Hematolymphoid neoplasm or disorder, genomic sequence analysis panel, 5–50 genes, interrogation for sequence variants, and copy number variants or rearrangements, or isoform expression or mRNA expression levels, if performed; RNA analysis
81455	$2,574.72	Solid organ or hematolymphoid neoplasm or disorder, 51 or greater genes, genomic sequence analysis panel, interrogation for sequence variants and copy number variants or rearrangements, or isoform expression or mRNA expression levels, if performed; DNA analysis or combined DNA and RNA analysis
81456	$2,574.72	Solid organ or hematolymphoid neoplasm or disorder, 51 or greater genes, genomic sequence analysis panel, interrogation for sequence variants and copy number variants or rearrangements, or isoform expression or mRNA expression levels, if performed; RNA analysis
81457	$0.00	Solid organ neoplasm, genomic sequence analysis panel, interrogation for sequence variants; DNA analysis, microsatellite instability
81458	$0.00	Solid organ neoplasm, genomic sequence analysis panel, interrogation for sequence variants; DNA analysis, copy number variants and microsatellite instability
81459	$0.00	Solid organ neoplasm, genomic sequence analysis panel, interrogation for sequence variants; DNA analysis or combined DNA and RNA analysis, copy number variants, microsatellite instability, tumor mutation burden, and rearrangements
81460	$1,134.97	Whole mitochondrial genome (eg, Leigh syndrome, mitochondrial encephalomyopathy, lactic acidosis, and stroke-like episodes [MELAS], myoclonic epilepsy with ragged-red fibers [MERFF], neuropathy, ataxia, and retinitis pigmentosa [NARP], Leber hereditary optic neuropathy [LHON]), genomic sequence, must include sequence analysis of entire mitochondrial genome with heteroplasmy detection
81462	$0.00	Solid organ neoplasm, genomic sequence analysis panel, cell-free nucleic acid (eg, plasma), interrogation for sequence variants; DNA analysis or combined DNA and RNA analysis, copy number variants and rearrangements
81463	$0.00	Solid organ neoplasm, genomic sequence analysis panel, cell-free nucleic acid (eg, plasma), interrogation for sequence variants; DNA analysis, copy number variants, and microsatellite instability

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Code	Rate	Description
81464	$0.00	Solid organ neoplasm, genomic sequence analysis panel, cell-free nucleic acid (eg, plasma), interrogation for sequence variants; DNA analysis or combined DNA and RNA analysis, copy number variants, microsatellite instability, tumor mutation burden, and rearrangements
81465	$825.44	Whole mitochondrial genome large deletion analysis panel (eg, Kearns-Sayre syndrome, chronic progressive external ophthalmoplegia), including heteroplasmy detection, if performed
81470	$806.03	X-linked intellectual disability (XLID) (eg, syndromic and non-syndromic XLID); genomic sequence analysis panel, must include sequencing of at least 60 genes, including ARX, ATRX, CDKL5, FGD1, FMR1, HUWE1, IL1RAPL, KDM5C, L1CAM, MECP2, MED12, MID1, OCRL, RPS6KA3, and SLC16A2
81471	$806.03	X-linked intellectual disability (XLID) (eg, syndromic and non-syndromic XLID); duplication/deletion gene analysis, must include analysis of at least 60 genes, including ARX, ATRX, CDKL5, FGD1, FMR1, HUWE1, IL1RAPL, KDM5C, L1CAM, MECP2, MED12, MID1, OCRL, RPS6KA3, and SLC16A2
81479	IC	Unlisted molecular pathology procedure
81490	$741.35	Autoimmune (rheumatoid arthritis), analysis of 12 biomarkers using immunoassays, utilizing serum, prognostic algorithm reported as a disease activity score
81493	$925.97	Coronary artery disease, mRNA, gene expression profiling by real-time RT-PCR of 23 genes, utilizing whole peripheral blood, algorithm reported as a risk score
81500	$229.73	Oncology (ovarian), biochemical assays of two proteins (CA-125 and HE4), utilizing serum, with menopausal status, algorithm reported as a risk score
81503	$791.04	Oncology (ovarian), biochemical assays of five proteins (CA-125, apolipoprotein A1, beta-2 microglobulin, transferrin, and pre-albumin), utilizing serum, algorithm reported as a risk score
81504	$458.58	Oncology (tissue of origin), microarray gene expression profiling of > 2000 genes, utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as tissue similarity scores
81506	$60.78	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
81507	$701.09	Fetal aneuploidy (trisomy 21, 18, and 13) DNA sequence analysis of selected regions using maternal plasma, algorithm reported as a risk score for each trisomy

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Code	Rate	Description
81508	$47.89	Fetal congenital abnormalities, biochemical assays of two proteins (PAPP-A, hCG [any form]), utilizing maternal serum, algorithm reported as a risk score
81509	$1,311.67	Fetal congenital abnormalities, biochemical assays of three proteins (PAPP-A, hCG [any form], DIA), utilizing maternal serum, algorithm reported as a risk score
81510	$48.98	Fetal congenital abnormalities, biochemical assays of three analytes (AFP, uE3, hCG [any form]), utilizing maternal serum, algorithm reported as a risk score
81511	$135.37	Fetal congenital abnormalities, biochemical assays of four analytes (AFP, uE3, hCG [any form], DIA) utilizing maternal serum, algorithm reported as a risk score (may include additional results from previous biochemical testing)
81512	$61.31	Fetal congenital abnormalities, biochemical assays of five analytes (AFP, uE3, total hCG, hyperglycosylated hCG, DIA) utilizing maternal serum, algorithm reported as a risk score
81513	$125.78	Infectious disease, bacterial vaginosis, quantitative real-time amplification of RNA markers for Atopobium vaginae, Gardnerella vaginalis, and Lactobacillus species, utilizing vaginal-fluid specimens, algorithm reported as a positive or negative result for bacterial vaginosis
81514	$231.92	Infectious disease, bacterial vaginosis and vaginitis, quantitative real-time amplification of DNA markers for Gardnerella vaginalis, Atopobium vaginae, Megasphaera type 1, Bacterial Vaginosis Associated Bacteria-2 (BVAB-2), and Lactobacillus species (L. crispatus and L. jensenii), utilizing vaginal-fluid specimens, algorithm reported as a positive or negative for high likelihood of bacterial vaginosis, includes separate detection of Trichomonas vaginalis and/or Candida species (C. albicans, C. tropicalis, C. parapsilosis, C. dubliniensis), Candida glabrata, Candida krusei, when reported
81515	$231.93	Infectious disease, bacterial vaginosis and vaginitis, real-time PCR amplification of DNA markers for Atopobium vaginae, Atopobium species, Megasphaera type 1, and Bacterial Vaginosis Associated Bacteria-2 (BVAB-2), utilizing vaginal-fluid specimens, algorithm reported as positive or negative for high likelihood of bacterial vaginosis, includes separate detection of Trichomonas vaginalis and Candida species (C. albicans, C. tropicalis, C. parapsilosis, C. dubliniensis), Candida glabrata/Candida krusei, when reported
81517	$155.38	Liver disease, analysis of 3 biomarkers (hyaluronic acid [HA], procollagen III amino terminal peptide [PIIINP], tissue inhibitor of metalloproteinase 1 [TIMP-1]), using immunoassays, utilizing serum, prognostic algorithm reported as a risk score and risk of liver fibrosis and liver-related clinical events within 5 years

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Code	Rate	Description
81518	$3,415.50	Oncology (breast), mRNA, gene expression profiling by real-time RT-PCR of 11 genes (7 content and 4 housekeeping), utilizing formalin-fixed paraffin-embedded tissue, algorithms reported as percentage risk for metastatic recurrence and likelihood of benefit from extended endocrine therapy
81519	$3,415.50	Oncology (breast), mRNA, gene expression profiling by real-time RT-PCR of 21 genes, utilizing formalin-fixed paraffin embedded tissue, algorithm reported as recurrence score
81520	$2,213.69	Oncology (breast), mRNA gene expression profiling by hybrid capture of 58 genes (50 content and 8 housekeeping), utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as a recurrence risk score
81521	$3,415.50	Oncology (breast), mRNA, microarray gene expression profiling of 70 content genes and 465 housekeeping genes, utilizing fresh frozen or formalin-fixed paraffin-embedded tissue, algorithm reported as index related to risk of distant metastasis
81522	$3,415.50	Oncology (breast), mRNA, gene expression profiling by RT-PCR of 12 genes (8 content and 4 housekeeping), utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as recurrence risk score
81523	$3,415.50	Oncology (breast), mRNA, next-generation sequencing gene expression profiling of 70 content genes and 31 housekeeping genes, utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as index related to risk to distant metastasis
81525	$2,747.92	Oncology (colon), mRNA, gene expression profiling by real-time RT-PCR of 12 genes (7 content and 5 housekeeping), utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as a recurrence score
81528	$262.58	Oncology (colorectal) screening, quantitative real-time target and signal amplification of 10 DNA markers (KRAS mutations, promoter methylation of NDRG4 and BMP3) and fecal hemoglobin, utilizing stool, algorithm reported as a positive or negative result
81529	$6,343.33	Oncology (cutaneous melanoma), mRNA, gene expression profiling by real-time RT-PCR of 31 genes (28 content and 3 housekeeping), utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as recurrence risk, including likelihood of sentinel lymph node metastasis
81535	$511.01	Oncology (gynecologic), live tumor cell culture and chemotherapeutic response by DAPI stain and morphology, predictive algorithm reported as a drug response score; first single drug or drug combination

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Code	Rate	Description
81536	$156.59	Oncology (gynecologic), live tumor cell culture and chemotherapeutic response by DAPI stain and morphology, predictive algorithm reported as a drug response score; each additional single drug or drug combination (List separately in addition to code for primary procedure)
81538	$2,531.86	Oncology (lung), mass spectrometric 8-protein signature, including amyloid A, utilizing serum, prognostic and predictive algorithm reported as good versus poor overall survival
81539	$670.23	Oncology (high-grade prostate cancer), biochemical assay of four proteins (Total PSA, Free PSA, Intact PSA, and human kallikrein-2 [hK2]), utilizing plasma or serum, prognostic algorithm reported as a probability score
81540	$3,307.03	Oncology (tumor of unknown origin), mRNA, gene expression profiling by real-time RT-PCR of 92 genes (87 content and 5 housekeeping) to classify tumor into main cancer type and subtype, utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as a probability of a predicted main cancer type and subtype
81541	$3,415.50	Oncology (prostate), mRNA gene expression profiling by real-time RT-PCR of 46 genes (31 content and 15 housekeeping), utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as a disease-specific mortality risk score
81542	$3,415.50	Oncology (prostate), mRNA, microarray gene expression profiling of 22 content genes, utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as metastasis risk score
81546	$3,174.75	Oncology (thyroid), mRNA, gene expression analysis of 10,196 genes, utilizing fine needle aspirate, algorithm reported as a categorical result (eg, benign or suspicious)
81551	$1,790.21	Oncology (prostate), promoter methylation profiling by real-time PCR of 3 genes (GSTP1, APC, RASSF1), utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as a likelihood of prostate cancer detection on repeat biopsy
81552	$6,857.46	Oncology (uveal melanoma), mRNA, gene expression profiling by real-time RT-PCR of 15 genes (12 content and 3 housekeeping), utilizing fine needle aspirate or formalin-fixed paraffin-embedded tissue, algorithm reported as risk of metastasis
81554	$4,867.95	Pulmonary disease (idiopathic pulmonary fibrosis [IPF]), mRNA, gene expression analysis of 190 genes, utilizing transbronchial biopsies, diagnostic algorithm reported as categorical result (eg, positive or negative for high probability of usual interstitial pneumonia [UIP])
81560	$565.04	Transplantation medicine (allograft rejection, pediatric liver and small bowel), measurement of donor and third-party-induced CD154+T-cytotoxic memory cells, utilizing whole peripheral blood, algorithm reported as a rejection risk score

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Code	Rate	Description
81595	$2,857.28	Cardiology (heart transplant), mRNA, gene expression profiling by real-time quantitative PCR of 20 genes (11 content and 9 housekeeping), utilizing subfraction of peripheral blood, algorithm reported as a rejection risk score
81596	$63.66	Infectious disease, chronic hepatitis C virus (HCV) infection, six biochemical assays (ALT, A2-macroglobulin, apolipoprotein A-1, total bilirubin, GGT, and haptoglobin) utilizing serum, prognostic algorithm reported as scores for fibrosis and necroinflammatory activity in liver
81599	IC	Unlisted multianalyte assay with algorithmic analysis
G0027	$5.73	Semen analysis; presence and/or motility of sperm excluding Huhner
G0327	$0.00	ESRD related services for home dialysis (less than full month), per day; for patients twenty years of age and over
G0103	$17.03	Prostate cancer screening; prostate specific antigen test (PSA)
G0123	$17.87	Screening cytopathology, cervical or vaginal (any reporting system), collected in preservative fluid, automated thin layer preparation, screening by cytotechnologist under physician supervision
G0143	$23.85	Screening cytopathology, cervical or vaginal (any reporting system), collected in preservative fluid, automated thin layer preparation, with manual screening and rescreening by cytotechnologist under physician supervision
G0144	$38.78	Screening cytopathology, cervical or vaginal (any reporting system), collected in preservative fluid, automated thin layer preparation, with screening by automated system, under physician supervision
G0145	$23.36	Screening cytopathology, cervical or vaginal (any reporting system), collected in preservative fluid, automated thin layer preparation, with screening by automated system and manual rescreening under physician supervision
G0147	$15.27	Screening cytopathology smears, cervical or vaginal, performed by automated system under physician supervision
G0148	$28.17	Screening cytopathology smears, cervical or vaginal, performed by automated system with manual rescreening
G0306	$6.85	Complete CBC, automated (HgB, HCT, RBC, WBC, without platelet count) and automated WBC differential count
G0307	$5.71	Complete CBC, automated (HgB, HCT, RBC, WBC; without platelet count)
G0328	$15.92	Colorectal cancer screening; fecal occult blood test, immunoassay, one to three simultaneous determinations
G0432	$17.26	Infectious agent antibody detection by enzyme immunoassay (EIA) technique, HIV-1 and/or HIV-2, screening

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Code	Rate	Description
G0433	$16.13	Infectious agent antibody detection by enzyme-linked immunosorbent assay (ELISA) technique, HIV-1 and/or HIV-2, screening
G0435	$10.56	Infectious agent antibody detection by rapid antibody test, HIV-1 and/or HIV-2, screening
G0471	$9.32	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)
G0472	$40.87	Hepatitis C antibody screening for individual at high risk and other covered indication(s)
G0475	$21.24	HIV antigen/antibody, combination assay, screening
G0476	$30.94	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
G0480	$59.69	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 (any type, single or tandem and excluding immunoassays (*e.g.*, IA, EIA, ELISA, EMIT, FPIA) and enzymatic methods (*e.g.*, alcohol dehydrogenase)), (2) stable isotope or other universally recognized internal standards in all samples (*e.g.*, to control for matrix effects, interferences and variations in signal strength), and (3) method or drug-specific calibration and matrix-matched quality control material (*e.g.*, to control for instrument variations and mass spectral drift); qualitative or quantitative, all sources, includes specimen validity testing, per day; 1–7 drug class(es), including metabolite(s) if performed
G0481	$91.84	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 (any type, single or tandem and excluding immunoassays (*e.g.*, IA, EIA, ELISA, EMIT, FPIA) and enzymatic methods (*e.g.*, alcohol dehydrogenase)), (2) stable isotope or other universally recognized internal standards in all samples (*e.g.*, to control for matrix effects, interferences and variations in signal strength), and (3) method or drug-specific calibration and matrix-matched quality control material (*e.g.*, to control for instrument variations and mass spectral drift); qualitative or quantitative, all sources, includes specimen validity testing, per day; 8–14 drug class(es), including metabolite(s) if performed

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Code	Rate	Description
G0482	$123.97	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 (any type, single or tandem and excluding immunoassays (*e.g.*, IA, EIA, ELISA, EMIT, FPIA) and enzymatic methods (*e.g.*, alcohol dehydrogenase)), (2) stable isotope or other universally recognized internal standards in all samples (*e.g.*, to control for matrix effects, interferences and variations in signal strength), and (3) method or drug-specific calibration and matrix-matched quality control material (*e.g.*, to control for instrument variations and mass spectral drift); qualitative or quantitative, all sources, includes specimen validity testing, per day; 15–21 drug class(es), including metabolite(s) if performed
G0483	$160.71	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 (any type, single or tandem and excluding immunoassays (*e.g.*, IA, EIA, ELISA, EMIT, FPIA) and enzymatic methods (*e.g.*, alcohol dehydrogenase)), (2) stable isotope or other universally recognized internal standards in all samples (*e.g.*, to control for matrix effects, interferences and variations in signal strength), and (3) method or drug-specific calibration and matrix-matched quality control material (*e.g.*, to control for instrument variations and mass spectral drift); qualitative or quantitative, all sources, includes specimen validity testing, per day; 22 or more drug class(es), including metabolite(s) if performed
G0499	$24.93	Hepatitis B screening in nonpregnant, high-risk individual includes hepatitis B surface antigen (HBSAG), antibodies to HBSAG (anti-HBS) and antibodies to hepatitis B core antigen (anti-HBC), and is followed by a neutralizing confirmatory test, when performed, only for an initially reactive HBSAG result

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Code	Rate	Description
G0659	$54.80	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 (any type, single or tandem), excluding immunoassays (*e.g.*, IA, EIA, ELISA, EMIT, FPIA) and enzymatic methods (*e.g.*, alcohol dehydrogenase), performed without method or drug-specific calibration, without matrix-matched quality control material, or without use of stable isotope or other universally recognized internal standard(s) for each drug, drug metabolite or drug class per specimen; qualitative or quantitative, all sources, includes specimen validity testing, per day, any number of drug classes
G2023	$23.46	Specimen collection for severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]), any specimen source
G2023 CG	$44.27	Specimen collection for severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]), any specimen source
G2024	$25.46	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
G2024 CG	$46.27	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
G9143	$106.46	Warfarin responsiveness testing by genetic technique using any method, any number of specimen(s)
P2028	$4.37	Cephalin flocculation, blood
P2029	$4.37	Congo red, blood
P2031	$4.37	Hair analysis (excluding arsenic)
P2033	$4.37	Thymol turbidity, blood
P2038	$4.37	Mucoprotein, blood (seromucoid) (medical necessity procedure)
P3000	$15.27	Screening Papanicolaou smear, cervical or vaginal, up to three smears, by technician under physician supervision
P9604	$4.78	Travel allowance, one way in connection with medically necessary laboratory specimen collection drawn from homebound or nursing homebound patient; prorated trip charge
P9612	$7.56	Catheterization for collection of specimen, single patient, all places of service
P9615	$7.56	Catheterization for collection of specimen(s) (multiple patients)
Q0111	$15.27	Wet mounts, including preparations of vaginal, cervical or skin specimens

Code	Rate	Description
Q0112	$5.14	All potassium hydroxide (KOH) preparations
Q0113	$3.77	Pinworm examinations
Q0114	$8.59	Fern test
Q0115	$22.05	Postcoital direct, qualitative examinations of vaginal or cervical mucous
U0001	$35.92	CDC 2019 Novel Coronavirus (2019-nCoV) Real-Time RT-PCR Diagnostic Panel
U0002	$51.31	2019-nCoV coronavirus, SARS-CoV-2/2019-nCoV (COVID-19), any technique, multiple types or subtypes (includes all targets), non-CDC
U0003	$75.00	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 CMS-2020-01-R
U0004	$75.00	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
U0005	$25.00	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, completed within 2 calendar days from date of specimen collection (list separately in addition to either HCPCS code U0003 or U0004) as described by CMS-2020-01-R2

320.06: Filing and Reporting Requirements

(1) Required Reports. Reporting requirements are governed by 957 CMR 6.00: *Cost Reporting Requirements.*

(2) Penalty for Noncompliance. The purchasing governmental unit may impose a penalty in the amount of up to 15% of its payments to any provider that fails to submit required information. The purchasing governmental unit will notify the provider in advance of its intention to impose a penalty under 101 CMR 320.06(2).

320.07: Severability

The provisions of 101 CMR 323.00 are severable. If any provision of 101 CMR 323.00 or application of any provision to an applicable individual, entity, or circumstance is held invalid or unconstitutional, that holding will not be construed to affect the validity or constitutionality of any remaining provisions of 101 CMR 323.00 or application of those provisions to applicable individuals, entities, or circumstances.

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REGULATORY AUTHORITY

101 CMR 320.00: M.G.L. c. 118E.