

REPORT: RS04354-R1354 NORTH CAROLINA DEPARTMENT OF HEALTH AND HUMAN SERVICES
 INDEPENDENT LAB FEE SCHEDULE AS OF: 07/01/2018

**Laboratory Fee Schedule
 Provider Specialty 069**

**The inclusion of a rate on this table does not guarantee that a service is covered.
 Please refer to the Medicaid Billing Guide and the Medicaid and Health Choice Clinical
 Coverage Policies on the DMA Web site.**

EFFECTIVE 07/01/2018

PROCEDURE CODE	MODIFIER	PROCEDURE DESCRIPTION	Medicaid Maximum Allowable	
			NON-FACILITY RATE	FACILITY RATE
10035		PERQ DEV SOFT TISS 1ST IMAG	\$463.26	\$78.78
27438		ARTHROPLASTY PATELLA W/PROSTHESIS	\$622.88	\$622.88
36415		COLLECTION OF VENOUS BLOOD BY VENIPUNCTU	\$2.72	\$2.72
36456		PRTL EXCHANGE TRANSFUSE NB	\$96.77	\$96.77
72081		X-RAY EXAM ENTIRE SPI 1 VW	\$33.48	\$33.48
72081	26	X-RAY EXAM ENTIRE SPI 1 VW	\$12.01	\$12.01
72081	TC	X-RAY EXAM ENTIRE SPI 1 VW	\$21.48	\$21.48
72082		X-RAY EXAM ENTIRE SPI 2/3 VW	\$53.61	\$53.61
72082	26	X-RAY EXAM ENTIRE SPI 2/3 VW	\$14.55	\$14.55
72082	TC	X-RAY EXAM ENTIRE SPI 2/3 VW	\$39.06	\$39.06
72083		X-RAY EXAM ENTIRE SPI 4/5 VW	\$58.25	\$58.25
72083	26	X-RAY EXAM ENTIRE SPI 4/5 VW	\$15.85	\$15.85
72083	TC	X-RAY EXAM ENTIRE SPI 4/5 VW	\$42.40	\$42.40
72084		X-RAY EXAM ENTIRE SPI 6/> VW	\$69.30	\$69.30
72084	26	X-RAY EXAM ENTIRE SPI 6/> VW	\$18.42	\$18.42
72084	TC	X-RAY EXAM ENTIRE SPI 6/> VW	\$50.89	\$50.89
72275		EPIDUROGRAPHY, RADIOLOGICAL SUPERVISION	\$81.40	\$81.40
72275	26	EPIDUROGRAPHY, RADIOLOGICAL SUPERVISION	\$29.93	\$29.93

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72275	TC	EPIDUROGRAPHY, RADIOLOGICAL SUPERVISION	\$51.47	\$51.47
73501		X-RAY EXAM HIP UNI 1 VIEW	\$25.77	\$25.77
73501	26	X-RAY EXAM HIP UNI 1 VIEW	\$8.54	\$8.54
73501	TC	X-RAY EXAM HIP UNI 1 VIEW	\$17.23	\$17.23
73502		X-RAY EXAM HIP UNI 2-3 VIEWS	\$35.57	\$35.57
73502	26	X-RAY EXAM HIP UNI 2-3 VIEWS	\$10.15	\$10.15
73502	TC	X-RAY EXAM HIP UNI 2-3 VIEWS	\$25.42	\$25.42
73503		X-RAY EXAM HIP UNI 4/> VIEWS	\$44.42	\$44.42
73503	26	X-RAY EXAM HIP UNI 4/> VIEWS	\$12.94	\$12.94
73503	TC	X-RAY EXAM HIP UNI 4/> VIEWS	\$31.48	\$31.48
73521		X-RAY EXAM HIPS BI 2 VIEWS	\$34.36	\$34.36
73521	26	X-RAY EXAM HIPS BI 2 VIEWS	\$10.46	\$10.46
73521	TC	X-RAY EXAM HIPS BI 2 VIEWS	\$23.90	\$23.90
73551		X-RAY EXAM OF FEMUR 1	\$23.91	\$23.91
73551	26	X-RAY EXAM OF FEMUR 1	\$7.59	\$7.59
73551	TC	X-RAY EXAM OF FEMUR 1	\$16.32	\$16.32
73552		X-RAY EXAM OF FEMUR 2/>	\$27.90	\$27.90
73552	26	X-RAY EXAM OF FEMUR 2/>	\$8.54	\$8.54
73552	TC	X-RAY EXAM OF FEMUR 2/>	\$19.35	\$19.35
76706		US ABDL AORTA SCREEN AAA	\$81.86	\$81.86
76706	26	US ABDL AORTA SCREEN AAA	\$25.06	\$25.06
76706	TC	US ABDL AORTA SCREEN AAA	\$56.79	\$56.79
78265		GASTRIC EMPTYING IMAG STUDY	\$353.43	\$353.43
78265	26	GASTRIC EMPTYING IMAG STUDY	\$43.51	\$43.51
78265	TC	GASTRIC EMPTYING IMAG STUDY	\$309.92	\$309.92
78266		GASTRIC EMPTYING IMAG STUDY	\$419.10	\$419.10
78266	26	GASTRIC EMPTYING IMAG STUDY	\$48.24	\$48.24
78266	TC	GASTRIC EMPTYING IMAG STUDY	\$370.87	\$370.87

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78267		UREA BREATH TEST, C-14 (ISOTOPIC); ACQUI	\$9.97	\$9.97
78268		UREA BREATH TEST, C-14; ANALYSIS	\$85.44	\$85.44
78456		ACUTE VENOUS THROMBOSIS IMAGING, PEPTIDE	\$267.59	\$267.59
78456	26	ACUTE VENOUS THROMBOSIS IMAGING, PEPTIDE	\$44.34	\$44.34
78456	TC	ACUTE VENOUS THROMBOSIS IMAGING, PEPTIDE	\$223.25	\$223.25
80047		BASIC METABOLIC PANEL (CALCIUM, IONIZED)	\$9.93	\$9.93
80048		BASIC METABOLIC PANEL	\$9.99	\$9.99
80050		GENERAL HEALTH SCREEN PANEL	\$11.50	\$11.27
80051		ELECTROLYTE PANEL	\$8.59	\$8.59
80053		COMPREHENSIVE METABOLIC PANEL	\$10.53	\$10.53
80055		OBSTETRIC PANEL	\$28.10	\$28.10
80061		LIPID PROFILE	\$16.70	\$16.70
80069		RENAL FUNCTION PANEL	\$9.99	\$9.99
80074		ACUTE HEPATITIS PANEL	\$58.07	\$58.07
80076		HEPATIC FUNCTION PANEL	\$9.99	\$9.99
80150		AMIKACIN	\$18.78	\$18.78
80155		DRUG ASSAY CAFFEINE	\$17.21	\$17.21
80156		CARBAMAZEPINE; TOTAL	\$18.14	\$18.14
80157		CARBAMAZEPINE; FREE	\$16.51	\$16.51
80158		DRUG ASSAY CYCLOSPORINE	\$22.50	\$22.50
80159		DRUG ASSAY CLOZAPINE	\$22.50	\$22.50
80162		ASSAY OF DIGOXIN TOTAL	\$16.54	\$16.54
80163		ASSAY OF DIGOXIN FREE	\$16.44	\$16.44
80164		ASSAY DIPROPYLACETIC ACD TOT	\$16.70	\$16.70
80165		DIPROPYLACETIC ACID FREE	\$16.58	\$16.58
80168		ETHOSUXIMIDE	\$20.36	\$20.36
80169		DRUG ASSAY EVEROLIMUS	\$16.70	\$16.70
80170		GENTAMICIN	\$4.31	\$4.31

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80171		DRUG SCREEN QUANT GABAPENTIN	\$16.13	\$16.13
80173		HALOPERIDOL	\$18.14	\$18.14
80175		DRUG SCREEN QUAN LAMOTRIGINE	\$16.13	\$16.13
80176		LIDOCAINE	\$18.30	\$18.30
80177		DRUG SCR N QUAN LEVETIRACETAM	\$16.13	\$16.13
80178		LITHIUM	\$8.24	\$8.24
80180		DRUG SCR N QUAN MYCOPHENOLATE	\$21.97	\$21.97
80183		DRUG SCR N QUANT OXCARBAZEPIN	\$16.13	\$16.13
80184		PHENOBARBITAL	\$14.28	\$14.28
80185		PHENTOIN: TOTAL	\$16.51	\$16.51
80186		PHENTOIN; FREE	\$17.15	\$17.15
80188		PRIMIDONE	\$20.30	\$20.30
80190		PROCAINAMIDE	\$20.87	\$20.87
80192		PROCAINAMIDE: WITH ANTIBODIES	\$20.87	\$20.87
80194		QUINIDINE	\$18.18	\$18.18
80195		SIROLIMUS	\$17.09	\$17.09
80197		TACROLIMUS	\$17.09	\$17.09
80198		THEOPHYLLINE	\$17.63	\$17.63
80199		DRUG SCREEN QUANT TIAGABINE	\$21.97	\$21.97
80200		TOBRAMYCIN	\$20.08	\$20.08
80201		TOPIRAMATE	\$14.86	\$14.86
80202		VANCOMYCIN	\$16.70	\$16.70
80203		DRUG SCREEN QUANT ZONISAMIDE	\$16.13	\$16.13
80299		QUANTITATIVE ASSAY DRUG	\$17.06	\$17.06
80305		DRUG TEST PRSMV DIR OPT OBS	\$13.61	\$13.61
80306		DRUG TEST PRSMV INSTRMNT	\$18.51	\$18.51
80307		DRUG TEST PRSMV CHEM ANLYZR	\$72.63	\$72.63
80400		ACTH STIMULATION PANEL;	\$40.63	\$40.63

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80402		ACTH STIMULATION PANEL;	\$108.32	\$108.32
80406		ACTH STIMULATION PANEL;	\$97.51	\$97.51
80408		ALDOSTERONE SUPPRESSION EVALUATION PANEL	\$156.37	\$156.37
80410		CALCITONIN STIMULATION PANEL (EG, CALCIU	\$100.09	\$100.09
80412		CORTICOTROPIC RELEASING HORMONE (CRH) ST	\$410.68	\$410.68
80418		COMBINED RAPID ANTERIOR PITUITARY EVALUA	\$719.64	\$719.64
80420		DEXAMETHASONE SUPPRESSION PANEL, 48 HOUR	\$89.75	\$89.75
80422		GLUCAGON TOLERANCE PANEL;	\$57.42	\$57.42
80424		GLUCAGON TOLERANCE PANEL;	\$62.93	\$62.93
80428		GROWTH HORMONE STIMULATION PANEL (EG, AR	\$83.08	\$83.08
80430		GROWTH HORMONE SUPPRESSION PANEL (GLUCOS	\$97.75	\$97.75
80432		INSULIN-INDUCED C-PEPTIDE SUPPRESSION PA	\$137.68	\$137.68
80434		INSULIN TOLERANCE PANEL;	\$126.01	\$126.01
80435		INSULIN TOLERANCE PANEL;	\$128.28	\$128.28
80436		METYRAPONE PANEL	\$113.58	\$113.58
80438		THYROTROPIN RELEASING HORMONE (TRH) STIM	\$60.92	\$60.92
80439		THYROTROPIN RELEASING HORMONE (TRH) STIM	\$81.22	\$81.22
80500		CLINICAL PATHOLOGY CONSULTATION; LIMITED	\$16.88	\$14.90
80502		CLINICAL PATHOLOGY CONSULTATION; COMPREH	\$53.00	\$51.87
80502	26	CLINICAL PATHOLOGY CONSULTATION; COMPREH	\$40.32	\$39.60
81000		URINALYSIS, BY DIP STICK OR TABLET REAGE	\$3.95	\$3.95
81001		URINALYSIS, BY DIP STICK OR TABLET REAGE	\$3.95	\$3.95
81002		URINALYSIS ROUTINE WITHOUT MICROSCOPY	\$3.19	\$3.19
81003		UA, BY DIP STICK OR TABLET; AUTOMATED, W	\$2.80	\$2.80
81005		URINE TESTS	\$2.70	\$2.70
81007		URINALYSIS; BACTERIURIA SCREEN, EXCEPT B	\$3.20	\$3.20
81015		MICROSCOPIC URINE EXAM	\$3.78	\$3.78
81020		URINALYSIS ROUTINE 2 OR 3 GLASS TEST	\$4.60	\$4.60

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81025		UA PREG. TEST - COLOR COMPARISON METHOD	\$7.88	\$7.88
81050		VOLUME MEASUREMENT FOR TIMED COLLECTION,	\$3.73	\$3.73
81161		DMD (DYSTROPHY)	\$128.42	\$128.42
81240		F2 (PROTHROMBIN, COAGULATION FACTOR II)	\$61.00	\$61.00
81241		F5 (COAGULATION FACTOR V) (EG, HEREDITAR	\$75.75	\$75.75
81256		HFE (HEMOCHROMATOSIS) (EG, HEREDITARY HE	\$81.03	\$81.03
81220		conductance regulator) (eg, cystic	\$506.51	\$506.51
81221		regulator) (eg, cystic	\$88.47	\$88.47
81222		regulator) (eg, cystic	\$395.91	\$395.91
81223		regulator) (eg, cystic	\$454.09	\$454.09
81228		analysis; interrogation of	\$819.00	\$819.00
81229		analysis; interrogation of	\$1,055.60	\$1,055.60
81243		x mental retardation) gene	\$51.91	\$51.91
81244		x mental retardation) gene	\$40.85	\$40.85
81331		polypeptide n and ubiquitin	\$46.47	\$46.47
81507		dna analysis using maternal plasma	\$723.45	\$723.45
82009		ANALYSIS FOR ACETONE OR KETONE BODIES TO	\$5.63	\$5.63
82010		ACETONE OR KETONE BODIES LEVEL	\$10.18	\$10.18
82013		ACETYLCHOLINESTERASE	\$13.93	\$13.93
82016		ACYLCARNITINES; QUALITATIVE, EACH SPECIM	\$17.28	\$17.28
82017		ACYLCARNITINES; QUANTITATIVE, EACH SPECI	\$21.02	\$21.02
82024		ACTH	\$48.13	\$48.13
82030		ADENOSINE;5'MONOPHOSPHATE,CYCLIC (CYCLIC	\$32.15	\$32.15
82040		ALBUMIN; SERUM, PLASMA OR WHOLE BLOOD	\$6.17	\$6.17
82042		ALBUMIN; URINE OR OTHER SOURCE, QUANTITA	\$6.45	\$6.45
82043		ALBUMIN; URINE, MICR, QUANTITATIVE	\$7.21	\$7.21
82044		ALBUMIN; URINE, MICRO, SEMIQUANTITATIVE	\$3.57	\$3.57
82045		ALBUMIN; ISCHEMIA MODIFIED	\$42.30	\$42.30

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82075		ALCOHOL BREATH	\$15.01	\$15.01
82085		ALDOLASE	\$12.09	\$12.09
82088		ALDOSTERONE	\$50.78	\$50.78
82103		ALPHA-1-ANTITRYPSIN; TOTAL	\$16.74	\$16.74
82104		ALPHA-1-ANTITRYPSIN; PHENOTYPE	\$18.01	\$18.01
82105		ALPHA-FETOPROTEIN SERUM	\$20.90	\$20.90
82106		ALPHA-FETOPROTEIN; AMNIOTIC FLUID	\$20.90	\$20.90
82107		ALPHA-FETOPROTEIN (AFP); AFP-L3 FRACTION	\$80.25	\$80.25
82108		ALUMINUM	\$31.75	\$31.75
82120		AMINES, VAGINAL FLUID, QUALITATIVE	\$4.68	\$4.68
82127		AMINO ACIDS; SINGLE, QUALITATIVE, EACH S	\$17.28	\$17.28
82128		AMINO ACIDS; MULTIPLE, QUALITATIVE, EACH	\$17.28	\$17.28
82131		AMINO ACIDS; SINGLE, QUANTITATIVE, EACH	\$21.02	\$21.02
82135		AMINOLEVULINIC ACID DELTA	\$20.51	\$20.51
82136		AMINO ACIDS, 2 TO 5 AMINO ACIDS, QUANTIT	\$21.02	\$21.02
82139		AMINO ACIDS, 6 OR MORE AMINO ACIDS, QUAN	\$21.02	\$21.02
82140		AMMONIA	\$18.16	\$18.16
82143		AMNIOTIC FLUID SCAN	\$8.58	\$8.58
82150		AMYLASE	\$8.08	\$8.08
82154		ANDROSTANEDIOL GLUCURONIDE	\$35.93	\$35.93
82157		ANDROSTENEDIONE	\$36.48	\$36.48
82160		ANDROSTERONE	\$31.16	\$31.16
82163		ANGIOTENSIN II	\$25.58	\$25.58
82164		ANGIOTENSIN I (ACE)	\$18.18	\$18.18
82172		APOLIPOPROTEIN, EACH	\$19.31	\$19.31
82175		ARSENIC	\$23.64	\$23.64
82180		ASCORBIC ACID	\$12.32	\$12.32
82190		ATOMIC ABSORPTION SPECTROSCOPY, EACH	\$18.58	\$18.58

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82232		BETA-2 MICROGLOBULIN	\$20.17	\$20.17
82239		BILE ACIDS; TOTAL	\$20.30	\$20.30
82240		BILE ACIDS; CHOLYLGLYCINE	\$20.30	\$20.30
82247		BILIRUBIN; TOTAL	\$6.26	\$6.26
82248		BILIRUBIN; DIRECT	\$6.26	\$6.26
82252		BILIRUBIN FECES QUALITATIVE	\$5.66	\$5.66
82261		BIOTINIDASE, EACH SPECIMEN	\$21.02	\$21.02
82270		BLOOD, OCCULT, BY PEROXIDASE ACTIVITY (E	\$4.05	\$4.05
82271		BLOOD, OCCULT, BY PEROXIDASE ACTIVITY (E	\$4.05	\$4.05
82272		BLOOD, OCCULT, BY PEROXIDASE ACTIVITY (E	\$4.05	\$4.05
82274		BLOOD, OCCULT, BY FECAL HEMOGLOBIN DETER	\$19.82	\$19.82
82286		BRADYKININ	\$8.58	\$8.58
82300		CADMIUM	\$28.83	\$28.83
82306		CALCIFEDIOL (25-OH VITAMIN D-3)	\$36.89	\$36.89
82308		CALCITONIN	\$33.36	\$33.36
82310		CALCIUM; TOTAL	\$6.42	\$6.42
82330		CALCIUM; IONIZED	\$17.02	\$17.02
82331		CALCIUM AFTER CALCIUM INFUSION TEST	\$6.45	\$6.45
82340		CALCIUM URINE QUANTITATIVE TIMED SPECIME	\$6.49	\$6.49
82355		CALCULUS; QUALITATIVE ANALYSIS	\$14.42	\$14.42
82360		CALCULUS QUANTITATIVE CHEMICAL	\$16.04	\$16.04
82365		CALCULUS QUANTITATIVE INFRARED SPECTROSC	\$16.06	\$16.06
82370		CALCULUS QUANTITATIVE X-RAY DEFRACTION	\$15.61	\$15.61
82373		CARBOHYDRATE DEFICIENT TRANSFERRIN	\$22.50	\$22.50
82374		CARBON DIOXIDE	\$6.10	\$6.10
82375		LABORATORY SERVICES, ANALYSIS	\$13.79	\$13.79
82376		CARBON DIOX COMB PARCARB MUNO QUALITATI	\$7.47	\$7.47
82378		CARCINOEMBRYONIC ANTIGEN (CEA)	\$23.64	\$23.64

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82379		CARNITINE (TOTAL AND FREE), QUANTITATIVE	\$21.02	\$21.02
82380		CAROTENE	\$11.50	\$11.50
82382		CATECHOLAMINES; TOTAL URINE	\$21.42	\$21.42
82383		CATECHOLAMINES BLOOD	\$31.22	\$31.22
82384		CATECHOLAMINES FRACTIONATED	\$31.46	\$31.46
82387		CATHEPSIN-D	\$17.28	\$17.28
82390		CERULOPLASMIN	\$13.39	\$13.39
82397		CHEMILUMINESCENT ASSAY	\$17.28	\$17.28
82415		CHLORAMPHENICOL	\$15.79	\$15.79
82435		CHLORIDE, SERUM	\$5.72	\$5.72
82436		CHLORIDE, URINE	\$6.26	\$6.26
82438		CHLORIDE; OTHER SOURCE	\$6.10	\$6.10
82441		CHLORINATRD HYDROCARBONNS SCREEN	\$7.48	\$7.48
82465		CHOLESTEROL, SERUM OR WHOLE BLOOD, TOTAL	\$5.42	\$5.42
82480		CHOLINESTERASE	\$7.16	\$7.16
82482		CHOLINESTERASE	\$5.73	\$5.73
82485		CHONDRUITINE B SULFATE QUANTITATIVE	\$25.73	\$25.73
82495		CHROMIUM	\$25.27	\$25.27
82507		CITRIC ACID	\$34.64	\$34.64
82523		COLLAGEN CROSS LINKS, ANY METHOD	\$18.27	\$18.27
82525		COPPER	\$15.46	\$15.46
82528		CORTICOSTERONE	\$28.05	\$28.05
82530		CORTISOL; FREE	\$20.83	\$20.83
82533		CORTISOL; TOTAL	\$20.32	\$20.32
82540		CREATINE	\$5.78	\$5.78
82542		COL CHROMOTOGRAPHY QUAL/QUAN	\$22.50	\$22.50
82550		CREATINE KINASE (CK), (CPK); TOTAL	\$8.11	\$8.11
82552		CPK ISOENZYME (QUALITATIVE)	\$16.69	\$16.69

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82553		CPK; MB FRACTION ONLY	\$14.39	\$14.39
82554		CPK; ISOFORMS	\$14.79	\$14.79
82565		CREATININE; BLOOD	\$6.39	\$6.39
82570		CREATININE; OTHER SOURCE	\$6.45	\$6.45
82575		CREATININE CLEARANCE	\$11.77	\$11.77
82585		CRYOFIBRINOGEN	\$10.68	\$10.68
82595		CRYOGLOBULIN, QUALITATIVE OR SEMI-QUANTI	\$8.07	\$8.07
82600		CYANIDE	\$24.18	\$24.18
82607		CYANOCOBALAMIN (VITAMIN B-12)	\$18.78	\$18.78
82608		CYANOCOBALAMIN UNSATURATED BINDING CAPAC	\$17.85	\$17.85
82610		CYSTATIN C	\$16.94	\$16.94
82615		CYSTINE	\$10.17	\$10.17
82626		DEHYDROEPIANDROSTERONE (DHEA)	\$31.49	\$31.49
82627		DHEA-S	\$27.70	\$27.70
82633		DEOXYCORTICOSTERONE	\$38.59	\$38.59
82634		DEOXYCORTISOL, 11-	\$36.48	\$36.48
82638		DIBUCAINE NUMBER	\$15.26	\$15.26
82652		DIHYDROXYVITAMIN D	\$47.96	\$47.96
82656		ELASTASE, PANCREATIC (EL-1), FECAL, QUAL	\$14.28	\$14.28
82657		ENZYME ACTIVITY IN BLOOD CELLS, CULTURED	\$22.50	\$22.50
82658		ENZYME ACTIVITY IN BLOOD CELLS, CULTURED	\$22.50	\$22.50
82664		ELECTROPHORETIC TECH	\$42.81	\$42.81
82668		ERYTHROPOIETIN	\$23.42	\$23.42
82670		ESTRADIOL	\$29.67	\$29.67
82671		ESTROGENS FRACTIONATED BLOOD	\$40.25	\$40.25
82672		ESTROGENS TOTAL BLOOD	\$27.02	\$27.02
82677		ESTRIOL	\$30.14	\$30.14
82679		ESTRONE	\$31.11	\$31.11

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PROCEDURE CODE	MODIFIER	PROCEDURE DESCRIPTION	NON-FACILITY RATE	FACILITY RATE
82693		ETHYLENE GLYCOL	\$17.29	\$17.29
82696		ETIOCHOLANOLONE	\$29.38	\$29.38
82705		FECAL FAT SCREEN	\$6.34	\$6.34
82710		FAT OR LIPIDS, FECES; QUANTITATIVE	\$20.93	\$20.93
82715		FECAL FAT	\$21.45	\$21.45
82725		FATTY ACIDS, NONESTERIFIED	\$16.59	\$16.59
82726		VERY LONG CHAIN FATTY ACIDS	\$22.50	\$22.50
82728		FERRITIN SPECIFY METHOD	\$16.97	\$16.97
82731		FETAL FIBRONECTIN, CERVICOVAGINAL SECRET	\$80.25	\$80.25
82735		FLUORIDE	\$23.11	\$23.11
82746		FOLIC ACID	\$18.32	\$18.32
82747		FOLIC ACID; RBC	\$18.78	\$18.78
82757		FRUCTOSE SEMEN	\$21.62	\$21.62
82759		GALACTORINASE RBC	\$26.76	\$26.76
82760		GALACTOSE	\$13.95	\$13.95
82775		GALACTOSE-1-PHOSDHATE URIDYL TRANSFERASE	\$26.24	\$26.24
82776		GALACTOSE 1 PHOSPHATE URIDYL TRANSFERASE	\$10.45	\$10.45
82784		GAMMA GLOBULIN	\$11.58	\$11.58
82785		GAMMAGLOBULIN; IGE	\$20.52	\$20.52
82787		GAMMAGLOBULIN; IMMUNOGLOBULIN SUBCLASSES	\$9.99	\$9.99
82800		OXYGEN SATURATION PH ONLY	\$8.00	\$8.00
82803		GASES, BLOOD, ANY COMBINATION OF PH, PCO	\$24.12	\$24.12
82805		GASES, BLOOD, ANY COMBINATION OF PH, PCO	\$35.36	\$35.36
82810		GASES, BLOOD, O2 SATURATION ONLY, BY DIR	\$10.88	\$10.88
82820		HEMOGLOBIN - OXYGEN AFFINITY	\$12.45	\$12.45
82930		GASTRIC ACID ANALYSIS, INCLUDES PH IF PE	\$6.84	\$6.84
82938		GASTRIN AFTER SECRETIN STIMULATION	\$22.05	\$22.05
82941		GASTRIN	\$21.97	\$21.97

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PROCEDURE CODE	MODIFIER	PROCEDURE DESCRIPTION	NON-FACILITY RATE	FACILITY RATE
82943		GLUCAGON	\$17.81	\$17.81
82945		GLUCOSE, BODY FLUID, OTHER THAN BLOOD	\$4.89	\$4.89
82946		GLUCAGON TOLERANCE TEST	\$18.78	\$18.78
82947		GLUCOSE; QUANTITATIVE, BLOOD (EXCEPT REA	\$4.89	\$4.89
82948		GLUCOSE BLOOD STICK TEST	\$3.95	\$3.95
82950		GLUCOSE POST GLUCOSE DOSE	\$5.92	\$5.92
82951		GLUCOSE TOLERANCE	\$16.04	\$16.04
82952		GLUCOSE TOLERANCE TEST EACH ASSIT BEYOND	\$4.89	\$4.89
82955		GLUCOSE 6 PHOSPHATE DEHYDROGENASE	\$5.80	\$5.80
82960		GLUCOSE 6 PHOSPHATE DEHYDROGENASE SCREEN	\$7.56	\$7.56
82962		BLOOD GLUCOSE BY MONITORING DEVICE	\$2.92	\$2.92
82963		GLUCOSIDASE BETA	\$26.76	\$26.76
82965		GLUTAMATE DEHYDROGENASE	\$9.63	\$9.63
82977		G G T	\$8.97	\$8.97
82978		GLUTATIONE LEVEL AND STABILITY	\$17.76	\$17.76
82979		GLUTATHIONE REDUCTASE RBC	\$8.58	\$8.58
82985		GLYCATED PROTEIN	\$18.78	\$18.78
83001		GONADOTROPIN; FOLLICLE STIMULATING HORMO	\$23.16	\$23.16
83002		LUTEINIZING HORMONE (LH)	\$23.08	\$23.08
83003		GROWTH STIMULATING HORMONE	\$20.77	\$20.77
83009		HELICOBACTER PYLORI, BLOOD TEST ANALYSIS	\$83.93	\$83.93
83010		HAPTOGLOBIN	\$15.68	\$15.68
83012		HAPTOGLOBIN PHENOTYPES ELECTROPHORESIS	\$21.42	\$21.42
83013		HELICOBACTER PYLORI; BREATH TEST ANALYSI	\$83.93	\$83.93
83014		HELICOBACTER PYLORI; DRUG ADMINISTRATION	\$9.79	\$9.79
83015		HEAVY METAL QUAL ANY ANAL	\$23.46	\$23.46
83018		HEAVY METAL QUANT EACH NES	\$27.36	\$27.36
83020		HEMOGLOBIN FRACTIONATION AND QUANTITATIO	\$15.66	\$15.66

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PROCEDURE CODE	MODIFIER	PROCEDURE DESCRIPTION	NON-FACILITY RATE	FACILITY RATE
83020	26	HEMOGLOBIN FRACTIONATION AND QUANTITATIO	\$15.17	\$15.17
83021		HEMOGLOBIN FRACTIONATION AND QUANTITATIO	\$22.50	\$22.50
83026		HEMOGLOBIN; BY COPPER SULFATE METHOD	\$2.94	\$2.94
83030		HEMOGLOBIN F(FETAL) CHEMICAL	\$10.31	\$10.31
83033		HEMOGLOBIN; F (FETAL), QUALITATIVE	\$7.43	\$7.43
83036		HEMOGLOBIN; GLYCOSYLATED (A1C)	\$12.09	\$12.09
83045		METHEMOGLOBIN	\$6.18	\$6.18
83050		METHEMOGLOBIN QUANTITATIVE	\$9.12	\$9.12
83051		METHEMOGLOBIN PLASMA	\$9.10	\$9.10
83060		SULFHEMOGLOBIN QUANTITATIVE	\$10.31	\$10.31
83065		HEMOGLOBIN THERMOLABILE	\$8.58	\$8.58
83068		HEMOGLOBIN UNSTABLESCREEN	\$3.59	\$3.59
83069		HEMOGLOBIN URINE	\$4.91	\$4.91
83070		HEMOSIDERIN	\$0.69	\$0.69
83080		B-HEXOSAMINIDASE, EACH ASSAY	\$21.02	\$21.02
83088		HISTAMINE	\$36.80	\$36.80
83090		HOMOCYSTINE	\$21.02	\$21.02
83150		HOMOVANILLIC ACID (HVA)	\$24.12	\$24.12
83491		HYDROXYCORTICOSTEROIDS, 17- (17-OHCS)	\$21.82	\$21.82
83497		5 HIAA QUALITATIVE	\$16.06	\$16.06
83498		HYDROXYPROGESTERONE, 17-D	\$33.84	\$33.84
83500		HYDROXYPROLINE FREE	\$28.22	\$28.22
83505		HYDROXYPROLINE TOTAL	\$30.28	\$30.28
83516		IMMUNOASSAY FOR ANALYTE OTHER THAN INFEC	\$14.28	\$14.28
83518		IMMUNOASSAY FOR ANALYTE OTHER THAN ANTIB	\$9.53	\$9.53
83519		IMMUNOASSAY, ANALYTE, QUANTITATIVE; BY R	\$16.84	\$16.84
83520		IMMUNOASSAY ANALYTE; NOT OTHERWISE SPECI	\$16.13	\$16.13
83525		INSULIN; TOTAL	\$14.25	\$14.25

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PROCEDURE CODE	MODIFIER	PROCEDURE DESCRIPTION	NON-FACILITY RATE	FACILITY RATE
83527		INSULIN;	\$15.77	\$15.77
83528		INTRINSIC FACTOR LEVEL	\$19.82	\$19.82
83540		IRON	\$8.08	\$8.08
83550		IBC	\$10.89	\$10.89
83570		IDH	\$11.03	\$11.03
83582		KETOGENIC STEROIDS; FRACTIONATION	\$17.66	\$17.66
83586		KETOSTEROIDS, 17- (17-KS); TOTAL	\$15.95	\$15.95
83593		KETOSTEROIDS, 17- (17-KS); FRACTIONATION	\$32.77	\$32.77
83605		LACTATES	\$13.31	\$13.31
83615		LACTATE DEHYDROGENASE (LD), (LDH)	\$7.53	\$7.53
83625		LDH ISOENZYMES	\$11.59	\$11.59
83630		LACTOFERRIN, FECAL; QUALITATIVE	\$25.56	\$25.56
83632		LACTOGEN, HUMAN PLACENTAL (HPL)	\$25.19	\$25.19
83633		LACTOSE URINE QUALITATIVE	\$6.86	\$6.86
83655		LEAD	\$15.08	\$15.08
83661		FETAL LUNG MATURITY ASSESSMENT; LECITHIN	\$27.39	\$27.39
83662		L/S RATIO	\$23.57	\$23.57
83663		FETAL LUNG MATURITY ASSESSMENT; FLUORESC	\$23.57	\$23.57
83664		FETAL LUNG MATURITY ASSESSMENT; LAMELLAR	\$23.57	\$23.57
83670		LEUCINE AMINOPEPTIDASE (LAP)	\$11.42	\$11.42
83690		LIPASE	\$8.58	\$8.58
83695		LIPOPROTEIN (A)	\$16.13	\$16.13
83700		LIPOPROTEIN, BLOOD; ELECTROPHORETIC SEPA	\$14.02	\$14.02
83701		LIPOPROTEIN, BLOOD; HIGH RESOLUTION FRAC	\$30.93	\$30.93
83704		LIPOPROTEIN BLD QUAN PART	\$34.68	\$34.68
83718		LIPOPROTEIN, DIRECT MEASUREMENT; (HDL CH	\$10.20	\$10.20
83719		LIPOPROTEIN, DIRECT MEASUREMENT; DIRECT	\$14.50	\$14.50
83721		LIPOPROTEIN, DIRECT MEASUREMENT; LDL CHO	\$11.89	\$11.89

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PROCEDURE CODE	MODIFIER	PROCEDURE DESCRIPTION	NON-FACILITY RATE	FACILITY RATE
83727		LUTEINIZING RELEASING FACTOR (LRH)	\$21.42	\$21.42
83735		MAGNESIUM	\$8.35	\$8.35
83775		MALATE DEHYDROGENASE	\$9.18	\$9.18
83785		MANGANESE BLOOD OR URINE	\$30.64	\$30.64
83789		MASS SPECTROMETRY QUAL/QUAN	\$22.50	\$22.50
83825		MERCURY, QUANTITATIVE	\$20.27	\$20.27
83835		METHANEPHRINES	\$21.11	\$21.11
83857		METHEMALBUMIN	\$13.39	\$13.39
83861		MICROFLUIDIC ANALYSIS UTILIZING AN INTEG	\$5.17	\$5.17
83864		MUCOPOLYSACCHARIDES, ACID; QUANTITATIVE	\$24.81	\$24.81
83872		MUCIN SYNOVIAL FLUID	\$7.30	\$7.30
83873		MYELIN BASIC PROTEIN, CEREBROSPINAL FLUI	\$21.44	\$21.44
83874		MYOGLOBIN	\$16.09	\$16.09
83876		MYELOPEROXIDASE (MPO)	\$16.87	\$16.87
83880		NATRIURETIC PEPTIDE	\$42.30	\$42.30
83883		NEPHELOMETRY, EACH ANALYTE	\$16.94	\$16.94
83885		NICKEL	\$30.53	\$30.53
83915		5 NUCLEOTIDASE	\$13.90	\$13.90
83916		OLIGOCLONAL IMMUNE (OLIGOCLONAL BANDS)	\$25.05	\$25.05
83918		ORGANIC ACIDS; TOTAL, QUANTITATIVE, EACH	\$20.51	\$20.51
83919		ORGANIC ACIDS; QUALITATIVE, EACH SPECIME	\$20.51	\$20.51
83921		ORGANIC ACID, SINGLE, QUANTITATIVE	\$20.51	\$20.51
83930		OSMOLALITY BLOOD	\$8.24	\$8.24
83935		OSMOLALITY	\$8.49	\$8.49
83937		OSTEOCALCIN (BONE G1A PROTEIN)	\$35.48	\$35.48
83945		OXALATE	\$16.04	\$16.04
83950		ONCOPROTEIN, HER-2/NEU	\$80.25	\$80.25
83951		ONCOPROTEIN; DES-GAMMA-CARBOXY-PROTHROMB	\$83.87	\$83.87

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PROCEDURE CODE	MODIFIER	PROCEDURE DESCRIPTION	NON-FACILITY RATE	FACILITY RATE
83970		PARATHORMONE	\$51.43	\$51.43
83986		PH BODY FLUID EXCEPT BLOOD	\$4.46	\$4.46
83993		CALPROTECTIN, FECAL	\$24.45	\$24.45
84030		PHENYLALANINE (PKU), BLOOD	\$6.86	\$6.86
84035		PHENYLKETONES, QUALITATIVE	\$4.56	\$4.56
84060		PHOSPHATASE ACID	\$9.20	\$9.20
84066		PHOSPHATASE ACID; PROSTATIC	\$12.04	\$12.04
84075		PHOSPHATASE ALKALINE	\$6.45	\$6.45
84078		PHOSPHATASE ALKALINE BLOOD HEAT STABLE	\$9.09	\$9.09
84080		ALKALINE PHOSPHATASE ISOENZYME	\$18.42	\$18.42
84081		PHOSPHATYDYLGLYCEROL	\$20.59	\$20.59
84085		PHOSPHOGLUCONAT6 6-DEHYDROGENASE RBC	\$8.40	\$8.40
84087		PHOSPHOHEXOSE ISOMERASE	\$12.86	\$12.86
84100		PHOSPHORUS INORGANIC (PHOSPHATE)	\$5.91	\$5.91
84105		PHOSPHORUS (PHOSPHATE) URINE	\$6.45	\$6.45
84106		PORPHOBILINOGEN	\$5.34	\$5.34
84110		PORPHOBILINOGEN URINE QUANTITATIVE	\$10.53	\$10.53
84112		PLACENTAL ALPHA MICROGLOBULIN-1 (PAMG-1)	\$80.83	\$80.83
84119		PORPHYRINS QUALITATIVE	\$10.73	\$10.73
84120		PORPHYRINS, URINE; QUANTITATION AND FRAC	\$18.33	\$18.33
84126		PROPHYRINS FECES QUANITATIVE	\$31.74	\$31.74
84132		POTASSIUM SERUM	\$5.72	\$5.72
84133		POTASSIUM URINE	\$5.36	\$5.36
84134		PREALBUMIN	\$18.18	\$18.18
84135		PREGNANEDIOL	\$23.83	\$23.83
84138		PREGNANETRIOL	\$23.60	\$23.60
84140		PREGNENOLONE	\$24.94	\$24.94
84143		17-HYDROXPREGNENOLONE	\$28.44	\$28.44

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PROCEDURE CODE	MODIFIER	PROCEDURE DESCRIPTION	NON-FACILITY RATE	FACILITY RATE
84144		PROGESTERONE	\$26.00	\$26.00
84145		PROCALCITONIN (PCT)	\$24.75	\$24.75
84146		PROLACTIN	\$24.15	\$24.15
84150		PROSTAGLANDIN, EACH	\$31.11	\$31.11
84152		PROSTATE SPECIFIC ANTIGEN (PSA); COMPLEX	\$22.92	\$22.92
84153		PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL	\$22.92	\$22.92
84154		PROSTATE SPECIFIC ANTIGEN (PSA); FREE	\$22.92	\$22.92
84155		PROTEIN, TOTAL, EXCEPT BY REFRACTOMETRY;	\$4.57	\$4.57
84156		PROTEIN, TOTAL, EXCEPT BY REFRACTOMETRY;	\$4.57	\$4.57
84157		PROTEIN, TOTAL, EXCEPT BY REFRACTOMETRY;	\$4.57	\$4.57
84160		PROTEIN, TOTAL, BY REFRACTOMETRY, ANY SO	\$6.45	\$6.45
84163		PREGNANCY-ASSOCIATED PLASMA PROTEIN-A (P	\$10.90	\$10.90
84165		PROTEIN; ELECTROPHORETIC FRACTIONATION A	\$13.33	\$13.33
84165	26	PROTEIN; ELECTROPHORETIC FRACTIONATION A	\$14.90	\$14.90
84166		PROTEIN; ELECTROPHORETIC FRACTIONATION A	\$22.23	\$22.23
84166	26	PROTEIN; ELECTROPHORETIC FRACTIONATION A	\$14.90	\$14.90
84181		PROTEIN; WESTERN BLOT, W REPORT & INTERP	\$14.65	\$14.65
84181	26	PROTEIN; WESTERN BLOT, W REPORT & INTERP	\$14.90	\$14.90
84182		PROTEIN; IMMUNO PROBE FOR BAND ID, EACH	\$14.65	\$14.65
84182	26	PROTEIN; IMMUNO PROBE FOR BAND ID, EACH	\$15.37	\$15.37
84202		PROTOPORPHYRIN RBC QUANTITATIVE	\$17.89	\$17.89
84203		PROTOPORPHYRIN RBC SCREEN	\$10.73	\$10.73
84206		PROINSULIN	\$22.20	\$22.20
84207		PYRIDOXINE VITAMINE B-6	\$35.01	\$35.01
84210		PYRUVATE	\$13.52	\$13.52
84220		PYRUVATE KINASE	\$11.75	\$11.75
84228		QUININE	\$14.50	\$14.50
84233		RECEPTOR ASSAY ESTROGEN (ESTRADIOL)	\$80.25	\$80.25

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PROCEDURE CODE	MODIFIER	PROCEDURE DESCRIPTION	NON-FACILITY RATE	FACILITY RATE
84234		RECEPTOR ASSAY PROGESTERONE	\$80.83	\$80.83
84235		RECEPTOR ASSAY ENDOCRINE NOT ESTROGEN OR	\$65.21	\$65.21
84238		RECEPTOR ASSAY; NON-ENDOCRINE (SPECIFY R	\$45.56	\$45.56
84244		RENIN	\$27.40	\$27.40
84252		RIBOFLAVIN	\$25.22	\$25.22
84255		SELENIUM	\$31.81	\$31.81
84260		SEROTONIN	\$20.30	\$20.30
84270		SHBG	\$27.08	\$27.08
84275		SIALIC ACID	\$16.74	\$16.74
84285		SILICA	\$29.34	\$29.34
84295		SODIUM BLOOD	\$6.00	\$6.00
84300		SODIUM URINE	\$6.06	\$6.06
84302		SODIUM; OTHER SOURCE	\$6.06	\$6.06
84305		SOMATOMEDIN	\$17.28	\$17.28
84307		SOMATOSTATIN	\$17.28	\$17.28
84311		SPECTROPHOMETRY, NOT ELSEWHERE SPECIFIED	\$8.71	\$8.71
84315		SPECIFIC GRAVITY CEXCE PT URINE	\$3.13	\$3.13
84375		SUGAR CHOMATOGRAPHIC TLC/PAPER CHOMATOGA	\$24.42	\$24.42
84376		SUGARS (MON-, DI, AND OLIGOSACCHARIDES);	\$6.86	\$6.86
84377		SUGARS (MON-, DI, AND OLIGOSACCHARIDES);	\$6.86	\$6.86
84378		SUGARS (MON-, DI, AND OLIGOSACCHARIDES);	\$14.36	\$14.36
84379		SUGARS (MON-, DI, AND OLIGOSACCHARIDES);	\$14.36	\$14.36
84392		SULFATE, URINE	\$5.92	\$5.92
84402		TESTOSTERONE; FREE	\$31.72	\$31.72
84403		TESTOSTERONE; TOTAL	\$32.17	\$32.17
84410		TESTOSTERONE BIOAVAILABLE	\$32.17	\$32.17
84425		THIAMINE	\$26.46	\$26.46
84430		THIOCYANATE	\$7.18	\$7.18

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PROCEDURE CODE	MODIFIER	PROCEDURE DESCRIPTION	NON-FACILITY RATE	FACILITY RATE
84431		THROMBOXANE METABOLITE(S), INCLUDING THR	\$16.53	\$16.53
84432		THYROGLOBULIN	\$20.01	\$20.01
84436		THYROXINE; TOTAL	\$7.18	\$7.18
84437		THYROXINE; REQUIRING ELUTION (EG, NEONAT	\$8.07	\$8.07
84439		THYROXINE; FREE	\$11.24	\$11.24
84442		TBG BY RIA	\$18.42	\$18.42
84443		TSH	\$20.31	\$20.31
84445		THYROID STIMULATING IMMUNE GLOBULINS (TS	\$63.37	\$63.37
84446		VITAMIN E	\$17.67	\$17.67
84449		TRANCORTIN (CORTISOL BINDING GLOBULIN)	\$22.43	\$22.43
84450		TRANSFERASE; ASPARTATE AMINO (AST) (SGOT	\$6.44	\$6.44
84460		TRANSFERASE; ALANINE AMINO (ALT) (SGPT)	\$6.60	\$6.60
84466		TRANSFERRIN	\$15.91	\$15.91
84478		TRIGLYCERIDES	\$7.17	\$7.17
84479		THYROID HORMONE (T3 OR T4) UPTAKE OR THY	\$7.43	\$7.43
84480		TRIIODOTHYRONINE T3; TOTAL (TT-3)	\$17.67	\$17.67
84481		TRIDOTHYRONINE (T-3); FREE	\$21.11	\$21.11
84482		T-3; REVERSE	\$19.64	\$19.64
84484		TROPONIN, QUANTITATIVE	\$12.26	\$12.26
84485		TRYPSIN DUODENAL FLUID	\$9.36	\$9.36
84488		TRYPSIN; FECES, QUALITATIVE	\$9.09	\$9.09
84490		TRYPSIN FECES QUANTITATIVE	\$9.48	\$9.48
84510		TYROSINE	\$12.96	\$12.96
84512		TROPONIN, QUALITATIVE	\$7.75	\$7.75
84520		UREA NITROGEN; QUANTITATIVE	\$4.91	\$4.91
84525		UREA NITROGEN; SEMIQUANTITATIVE (EG, REA	\$4.68	\$4.68
84540		LABORATORY SERVICES, ANALYSIS	\$5.92	\$5.92
84545		UREA CLEARANCE	\$7.18	\$7.18

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PROCEDURE CODE	MODIFIER	PROCEDURE DESCRIPTION	NON-FACILITY RATE	FACILITY RATE
84550		URIC ACID; BLOOD	\$5.63	\$5.63
84560		URIC ACID; OTHER SOURCE	\$5.92	\$5.92
84577		FECAL UROBILINOGEN QUANTITATIVE	\$15.54	\$15.54
84578		UROBILINOGEN QUALITATIVE	\$2.92	\$2.92
84580		UROBILINOGEN URINE QUANTITATIVE	\$8.85	\$8.85
84583		UROBILINOGEN URINE SEMIQUANTITATIVE	\$6.26	\$6.26
84585		UMA	\$19.32	\$19.32
84586		VASOACTIVE INTESTINAL PEPTIDE (VIP)	\$19.91	\$19.91
84588		VASOPRESSIN (ANTIDIURETIC HORMONE, ADH)	\$42.30	\$42.30
84590		VITAMIN A	\$14.45	\$14.45
84597		VITAMIN K	\$17.08	\$17.08
84600		VOLATILES	\$17.35	\$17.35
84620		D-XYLOSE TOLERANCE	\$14.76	\$14.76
84630		ZINC	\$14.19	\$14.19
84681		C-PEPTIDE ANY METHOD	\$19.80	\$19.80
84702		GONADOTROPIN CHORIONIC QUANTITATIVE	\$10.90	\$10.90
84703		GONADOTROPIN CHORIONIC QUALITATIVE	\$9.36	\$9.36
84704		GONADOTROPIN, CHORIONIC (HCG); FREE BETA	\$10.90	\$10.90
85002		BLEEDING TIME	\$5.61	\$5.61
85004		BLOOD COUNT; AUTOMATED DIFFERENTIAL WBC	\$8.07	\$8.07
85007		BLOOD COUNT; BLOOD SMEAR, MICROSCOPIC EX	\$4.29	\$4.29
85008		BLOOD COUNT; BLOOD SMEAR, MICROSCOPIC EX	\$4.29	\$4.29
85009		BLOOD COUNT; MANUAL DIFFERENTIAL WBC COU	\$4.63	\$4.63
85013		BLOOD COUNT; SPUN MICROHEMATOCRIT	\$2.95	\$2.95
85014		BLOOD COUNT; HEMATOCRIT (HCT)	\$2.95	\$2.95
85018		BLOOD COUNT; HEMOGLOBIN (HGB)	\$2.95	\$2.95
85025		BLOOD COUNT; COMPLETE (CBC), AUTOMATED (\$9.68	\$9.68
85027		BLOOD COUNT; COMPLETE (CBC), AUTOMATED (\$8.07	\$8.07

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PROCEDURE CODE	MODIFIER	PROCEDURE DESCRIPTION	NON-FACILITY RATE	FACILITY RATE
85032		BLOOD COUNT; MANUAL CELL COUNT (ERYTHROC	\$5.36	\$5.36
85041		BLOOD COUNT; RED BLOOD CELL (RBC), AUTOM	\$3.74	\$3.74
85044		BLOOD COUNT; RETICULOCYTE, MANUAL	\$5.36	\$5.36
85045		BLOOD COUNT; RETICULOCYTE, AUTOMATED	\$4.99	\$4.99
85046		BLOOD COUNT; RETICULOCYTES, AUTOMATED, I	\$6.96	\$6.96
85048		BLOOD COUNT; LEUKOCYTE (WBC), AUTOMATED	\$3.17	\$3.17
85049		BLOOD COUNT; PLATELET, AUTOMATED	\$5.58	\$5.58
85055		RETICULATED PLATELET ASSAY	\$33.36	\$33.36
85060		BLOOD SMEAR, PERIPHERAL, INTERP BY PHYSI	\$18.38	\$18.38
85060	26	BLOOD SMEAR, PERIPHERAL, INTERP BY PHYSI	\$13.22	\$13.22
85097		BONE MARROW, SMEAR INTERPRETATION	\$69.07	\$38.26
85097	26	BONE MARROW, SMEAR INTERPRETATION	\$59.81	\$29.78
85130		CHROMOGENIC SUBSTRATE ASSAY	\$14.82	\$14.82
85170		CLOT RETRACTION	\$4.51	\$4.51
85175		CLOT LYSIS TIME WHOLE BLOOD DILUTION	\$5.66	\$5.66
85210		CLOTTING FACTOR II PROTHROMBIN SPECIFIC	\$16.18	\$16.18
85220		BLOOC CLOT FACTOR V TEST	\$21.99	\$21.99
85230		CLOTTING FACTOR VII	\$22.31	\$22.31
85240		CLOTTING FACTOR VIII ONE STAGE	\$22.31	\$22.31
85244		CLOTTING; FACTOR VIII RELATED ANTIGEN	\$25.44	\$25.44
85245		CLOTTING; FACTOR 8	\$28.59	\$28.59
85246		CLOTTING; FACTOR 8, VW FACTOR ANTIGEN	\$28.59	\$28.59
85247		CLOTTING; FACTOR 8, MULTIMETRIC ANALYSIS	\$28.59	\$28.59
85250		CLOTTING FACTOR IX	\$23.73	\$23.73
85260		CLOTTING FACTOR X	\$22.31	\$22.31
85270		CLOTTING FACTOR XI	\$22.31	\$22.31
85280		CLOTTING FACTOR XII	\$24.12	\$24.12
85290		CLOTTING FACTOR XIII	\$20.36	\$20.36

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PROCEDURE CODE	MODIFIER	PROCEDURE DESCRIPTION	NON-FACILITY RATE	FACILITY RATE
85291		CLOTTING FACTOR XIII FIBRIN STABILIZING	\$11.07	\$11.07
85292		CLOTTING; FACTOR II PREKALLIKREIN ASSAY	\$23.60	\$23.60
85293		CLOTTING; FACTOR II MOLECULAR WEIGHT ASS	\$23.60	\$23.60
85300		CLOTTING INHIBITORS OR ANTICOAGULANTS AN	\$14.76	\$14.76
85301		CLOTTING INHIBITORS; ANTITHROMBIN III, A	\$13.48	\$13.48
85302		CLOTTING INHIBITORS OR ANTICOAGULANTS; P	\$14.98	\$14.98
85303		CLOTTING INHIBITORS OR ANTICOAG; PROTEIN	\$17.23	\$17.23
85305		CLOTTING INHIBITORS OR ANTICOAGULANTS; P	\$14.45	\$14.45
85306		CLOTTING INHIBITORS OR ANTICOAG; PROTEIN	\$17.81	\$17.81
85307		ACTIVATED PROTEIN C (APC) RESISTANCE ASS	\$17.81	\$17.81
85335		FACTOR INHIBITOR TEST	\$16.04	\$16.04
85337		THROMBOMODULIN	\$12.99	\$12.99
85345		COAGULATION TIME	\$5.36	\$5.36
85347		COAGULATION TIME OTHER METHODS	\$5.30	\$5.30
85348		COAGULATION TIME OTHER METHODS	\$4.64	\$4.64
85360		EUGLOBULIN LYSIS	\$10.47	\$10.47
85362		FIBRIN DEGREDDATION PRODUCTS	\$8.58	\$8.58
85370		FDP; QUANTITATIVE	\$11.48	\$11.48
85378		FIBRIN DEGRADATION PRODUCTS, D-DIMER; QU	\$8.89	\$8.89
85379		FDP, D-DIMER; QUANTITATIVE	\$11.48	\$11.48
85380		FIBRIN DEGRADATION PRODUCTS, D-DIMER; UL	\$11.48	\$11.48
85384		FIBRINOGEN; ACTIVITY	\$10.58	\$10.58
85385		FIBRINOGEN; ANTIGEN	\$10.58	\$10.58
85390		FIBRINOLYSINS OR COAGULOPATHY SCREEN, IN	\$6.44	\$6.44
85390	26	FIBRINOLYSINS OR COAGULOPATHY SCREEN, IN	\$15.17	\$15.17
85396		COAGULATION/FIBRINOLYSIS ASSAY, WHOLE BL	\$15.47	\$15.47
85397		COAGULATION AND FIBRINOLYSIS, FUNCTIONAL	\$29.88	\$29.88
85400		FIBRINOLYTIC MECHANISMS PLASMIN	\$11.03	\$11.03

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PROCEDURE CODE	MODIFIER	PROCEDURE DESCRIPTION	NON-FACILITY RATE	FACILITY RATE
85410		FIBRINOLYTIC MECHANISMS ANTIPLASMIN	\$9.60	\$9.60
85415		FIBRINOLYTIC FACTORS & INHIBITORS	\$21.42	\$21.42
85420		FIBRINOLYTIC MECHANISMS PLASMINOGEN	\$8.14	\$8.14
85421		PLASMINOGEN, ANTIGENIC ASSAY	\$12.69	\$12.69
85441		HEINZ BODIES DIRECT	\$5.24	\$5.24
85445		HEINZ BODIES INDUCED ACETYL PHENYLHYDRAZ	\$8.49	\$8.49
85460		HEMOGLOBIN OR RBCS, FETAL, FOR FETOMATER	\$9.39	\$9.39
85461		HEMOGLOBIN FETAL	\$8.26	\$8.26
85475		HEMOLYSIN, ACID	\$9.39	\$9.39
85520		HEPARIN ASSAY	\$16.31	\$16.31
85525		HEPARIN NEUTRALIZATION	\$14.76	\$14.76
85530		HEPARIN-PROTAMINE TOLERANCE TEST	\$17.67	\$17.67
85536		IRON STAIN, PERIPHERAL BLOOD	\$8.07	\$8.07
85540		LEUKOCYTE ALKALINE PHOSPHATASE	\$10.72	\$10.72
85547		RBC FRAGILITY	\$5.11	\$5.11
85549		MURAMIDASE	\$23.37	\$23.37
85555		OSMOTIC FRAGILITY, RBC; UNINCUBATED	\$8.33	\$8.33
85557		OSMOTIC FRAGILITY INCUBATED QUANTITATIVE	\$16.64	\$16.64
85576		PLATELET; AGGREGATION (IN VITRO), EACH A	\$26.76	\$26.76
85576	26	PLATELET; AGGREGATION (IN VITRO), EACH A	\$15.17	\$15.17
85597		PLATELET NEUTRALIZATION	\$22.40	\$22.40
85598		PHOSPHOLIPID NEUTRALIZATION; HEXAGONAL P	\$22.56	\$22.56
85610		PROTHROMBIN TIME	\$4.90	\$4.90
85611		PROTHROMBIN TIME	\$4.91	\$4.91
85612		RUSSELL VIPER VENOM TIME (INCLUDES VENOM	\$11.93	\$11.93
85613		RUSSELL VIPOR VENOM TIME; DULUTED	\$11.93	\$11.93
85635		REPTILASE TEST	\$12.27	\$12.27
85651		SEDIMENTATION RATE, ERYTHROCYTE, NON-AUT	\$4.42	\$4.42

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PROCEDURE CODE	MODIFIER	PROCEDURE DESCRIPTION	NON-FACILITY RATE	FACILITY RATE
85652		SEDIMENTATION RATE, ERYTHROCYTE; AUTOMAT	\$3.36	\$3.36
85660		SICKLING RBC REDUCTION SLIDE METHOD	\$6.88	\$6.88
85670		THROMBIN TIME PLASMA	\$7.19	\$7.19
85675		THROMBIN TIME TITER	\$8.55	\$8.55
85705		THROMBOPLASTIN INHIBITION; TISSUE	\$12.00	\$12.00
85730		PTT	\$7.48	\$7.48
85732		THROMBOPLASTIN TIME, PARTIAL (PTT); SUBS	\$8.07	\$8.07
85810		VISCOSITY	\$12.63	\$12.63
86000		AGGLUTINS FEBRILE EA	\$8.69	\$8.69
86001		ALLERGEN SPECIFIC IGG QUANTITATIVE OR SE	\$6.51	\$6.51
86003		ALLERGEN SPECIFIC IGE; QUANTITATIVE OR S	\$6.51	\$6.51
86005		ALLERGEN SPECIFIC IGE; QUALITATIVE, MULT	\$9.94	\$9.94
86008		ALLG SPEC IGE RECOMB EA	\$20.15	\$20.15
86021		ANTIBODY IDENTIFICATION LEUKOCYTE ANTIBO	\$18.76	\$18.76
86022		ANTIBODY IDENTIFICATION PLATELET ANTIBOD	\$22.88	\$22.88
86023		ANTIBODY ID PLATELET ASSOCIATED IMMUNOGL	\$15.51	\$15.51
86038		ANTINUCLEAR ANTIBODIES (ANA);	\$15.06	\$15.06
86039		ANA; TITER	\$13.92	\$13.92
86060		ASO TITER	\$9.09	\$9.09
86063		ANTISTREPTOLYSIN SCREEN	\$7.19	\$7.19
86077		BLOOD BANK SERVICES; EVALUATION OF IRREG	\$40.04	\$38.35
86077	26	BLOOD BANK SERVICES; EVALUATION OF IRREG	\$30.40	\$29.17
86078		BLOOD BANK IRREGULAR ANTIB INVESTIGATION	\$40.61	\$38.35
86078	26	BLOOD BANK IRREGULAR ANTIB INVESTIGATION	\$31.06	\$29.44
86079		BLOOD BANK AUTHORIZATION FOR DEVIATION S	\$40.89	\$38.63
86079	26	BLOOD BANK AUTHORIZATION FOR DEVIATION S	\$30.68	\$29.26
86140		CRP	\$6.45	\$6.45
86141		C-REACTIVE PROTEIN; HIGH SENSITIVITY (HS	\$16.13	\$16.13

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PROCEDURE CODE	MODIFIER	PROCEDURE DESCRIPTION	NON-FACILITY RATE	FACILITY RATE
86146		BETA 2 GLYCOPROTEIN I ANTIBODY, EACH	\$18.08	\$18.08
86147		CARDIOLIPIN ANTIBODY EA IG	\$18.08	\$18.08
86148		ANTI-PHOSPHATIDYLSERINE (PHOSPHOLIPID) A	\$18.60	\$18.60
86155		CHEMOTHAXIS ASSAY SPECIFY METHOD	\$19.91	\$19.91
86156		COLD AGGLUTININ; SCREEN	\$8.00	\$8.00
86157		COLD AGGULTININ; TITER	\$8.00	\$8.00
86160		COMPLEMENT; ANTIGEN, EACH COMPONENT	\$14.96	\$14.96
86161		COMPLEMENT; FUNCTIONAL ACTIVITY, EACH	\$14.96	\$14.96
86162		COMPLEMENT TOTAL	\$25.31	\$25.31
86171		COMPLEMENT FIXATION TEST, EACH	\$12.49	\$12.49
86200		CYCLIC CITRULLINATED PEPTIDE (CCP), ANTI	\$16.13	\$16.13
86215		ASH TITER	\$16.50	\$16.50
86225		DEOXYRIBONUCLEIC ACID (DNA) ANTIBODY; NA	\$17.12	\$17.12
86226		DNA ANTIBODY; SINGLE STRANDED	\$15.09	\$15.09
86235		EXTRACTABLE NUCLEAR ANTIGEN ANTIBODY	\$22.34	\$22.34
86255		FLUORESCENT NONINFECTIOUS AGENT ANTIBODY	\$15.01	\$15.01
86255	26	FLUORESCENT NONINFECTIOUS AGENT ANTIBODY	\$15.17	\$15.17
86256		FLOURESCENT ANTIBODY TITER	\$15.01	\$15.01
86256	26	FLOURESCENT ANTIBODY TITER	\$15.17	\$15.17
86277		GROWTH HORMONE, HUMAN (HGH), ANTIBODY	\$19.61	\$19.61
86280		HEMAGGLUTINATION INHIBITON	\$10.20	\$10.20
86294		IMMUNOASSAY FOR TUMOR ANTIGEN, QUALITATI	\$24.44	\$24.44
86300		IMMUNOASSAY FOR TUMOR ANTIGEN, QUANTITAT	\$25.92	\$25.92
86301		IMMUNOASSAY FOR TUMOR ANTIGEN, QUANTITAT	\$25.92	\$25.92
86304		IMMUNOASSAY FOR TUMOR ANTIGEN, QUANTITAT	\$25.92	\$25.92
86308		HETEROPHILE ANTIBODIES; SCREENING	\$6.45	\$6.45
86309		HETEROPHILE ANTIBODIES; TITER	\$8.07	\$8.07
86310		HETEROPHILE ABSORPTION	\$9.18	\$9.18

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PROCEDURE CODE	MODIFIER	PROCEDURE DESCRIPTION	NON-FACILITY RATE	FACILITY RATE
86316		IMMUNOASSAY FOR TUMOR ANTIGEN; OTHER ANT	\$25.92	\$25.92
86317		IMMUNOASSAY FOR INFECTIOUS AGENT ANTIBOD	\$18.08	\$18.08
86318		IMMUNOASSAY FOR INFECTIOUS AGENT ANTIBOD	\$16.13	\$16.13
86320		IMMUNOELECTROPHORESIS; SERUM	\$27.93	\$27.93
86320	26	IMMUNOELECTROPHORESIS; SERUM	\$15.17	\$15.17
86325		IMMUNOELECTROPHORESIS; OTHER FLUIDS (EG,	\$27.86	\$27.86
86325	26	IMMUNOELECTROPHORESIS; OTHER FLUIDS (EG,	\$14.90	\$14.90
86327		IMMUNOELECTROPHORESIS SERUM EACH SPECIME	\$28.27	\$28.27
86327	26	IMMUNOELECTROPHORESIS SERUM EACH SPECIME	\$17.46	\$17.46
86329		IMMUNODIFFUSION, NOT ELSEWHERE SPECIFIED	\$17.49	\$17.49
86331		GEL DIFFUSION QUALITATIVE OUCHTERLONY	\$14.14	\$14.14
86332		IMMUNE COMPLEX ASSAY	\$30.37	\$30.37
86334		IMMUNOFIXATION ELECTROPHORESIS; SERUM	\$27.83	\$27.83
86334	26	IMMUNOFIXATION ELECTROPHORESIS; SERUM	\$15.17	\$15.17
86335		IMMUNOFIXATION ELECTROPHORESIS; OTHER FL	\$36.56	\$36.56
86335	26	IMMUNOFIXATION ELECTROPHORESIS; OTHER FL	\$14.90	\$14.90
86336		INHIBIN A	\$20.95	\$20.95
86337		INSULIN ANTIBODIES	\$26.69	\$26.69
86340		INTRINSIC FACTOR ANTIBODIES	\$18.78	\$18.78
86341		ISLET CELL ANTIBODY	\$16.74	\$16.74
86344		LEUKOCYTE PHAGOCYTOSIS	\$9.96	\$9.96
86353		LYMPHOCYTE TRANSFORMATION, MITOGEN (PHYT	\$61.08	\$61.08
86355		B CELLS, TOTAL COUNT	\$47.00	\$47.00
86356		MONONUCLEAR CELL ANTIGEN, QUANTITATIVE (\$33.36	\$33.36
86357		NATURAL KILLER (NK) CELLS, TOTAL COUNT	\$47.00	\$47.00
86359		T CELLS;	\$47.00	\$47.00
86360		T CELLS; ABSOLUTE CD4 AND CD8 COUNT, INC	\$58.55	\$58.55
86361		T CELLS; ABSOLUTE CD4 COUNT	\$33.36	\$33.36

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PROCEDURE CODE	MODIFIER	PROCEDURE DESCRIPTION	NON-FACILITY RATE	FACILITY RATE
86367		STEM CELLS (IE, CD34), TOTAL COUNT	\$47.00	\$47.00
86376		MICROSOMAL ANTIBODIES (EG, THYROID OR LI	\$17.27	\$17.27
86382		NEUTRALIZATION TEST VIRAL	\$21.06	\$21.06
86384		NBT TEST	\$14.19	\$14.19
86403		PARTICLE AGGLUTINATION; SCREEN, EACH ANT	\$12.70	\$12.70
86406		PARTICLE AGGLUTINATION;	\$13.26	\$13.26
86430		RHEUMATOID FACTOR; QUALITATIVE	\$7.08	\$7.08
86431		RHEUMATOID FACTOR; QUANTITATIVE	\$7.08	\$7.08
86480		TUBERCULOSIS TEST, CELL MEDIATED IMMUNIT	\$77.22	\$77.22
86481		TUBERCULOSIS TEST, CELL MEDIATED IMMUNIT	\$77.78	\$77.78
86485		SKIN TEAT; CANDIDA	\$6.20	\$6.20
86486		SKIN TEST; UNLISTED ANTIGEN, EACH	\$3.78	\$3.78
86490		SENSITIVITY TEST COCCIDIOIDOMYCOSIS	\$5.19	\$5.19
86510		SENSITIVITY TEST HISTOPLASMOSIS	\$5.19	\$5.19
86580		SENSITIVITY TEST TUBERCULOSIS	\$5.48	\$5.48
86590		STREPTOKINASE ANTIBODY	\$13.74	\$13.74
86592		SYPHILIS, PRECIPITATION OR FLOCCULATION	\$5.31	\$5.31
86593		SYPHILLIS PRECIPITATION FLOCCULATION TES	\$5.50	\$5.50
86602		ANTIBODY; ACTINOMYCES	\$12.68	\$12.68
86603		ANTIBODY; ADENOVIRUS	\$15.89	\$15.89
86606		ANTIBODY; ASPIRGILLUS	\$15.89	\$15.89
86609		ANTIBODY; BACTERIUM, NOT ELSEWHERE SPECI	\$15.89	\$15.89
86611		ANTIBODY; BARTONELLA	\$12.68	\$12.68
86612		ANTIBODY; BLASTOMYCES	\$15.89	\$15.89
86615		ANTIBODY; BORDETELLA	\$16.43	\$16.43
86617		ANTIBODY;	\$14.75	\$14.75
86618		ANTIBODY; LYME DISEASE	\$18.08	\$18.08
86619		ANTIBODY; BORRELIA	\$16.67	\$16.67

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PROCEDURE CODE	MODIFIER	PROCEDURE DESCRIPTION	NON-FACILITY RATE	FACILITY RATE
86622		ANTIBODY; BRUCELLA	\$9.39	\$9.39
86625		ANTIBODY; CAMPYLOBACTOR	\$9.39	\$9.39
86628		ANTIBODY; CANDIDA	\$14.14	\$14.14
86631		ANTIBODY; CHLAMYDIA	\$14.73	\$14.73
86632		ANTIBODY; CHLAMIDA, IGM	\$15.82	\$15.82
86635		ANTIBODY, COCCIDIOIDES	\$14.30	\$14.30
86638		ANTIBODY; Q FEVER	\$15.11	\$15.11
86641		ANTIBODY; CRYPTOCOCCUS	\$17.96	\$17.96
86644		ANTIBODY; CMV	\$17.90	\$17.90
86645		ANTIBODY; CMV, IGM	\$18.08	\$18.08
86648		ANTIBODY; DIPHTHERIA	\$18.08	\$18.08
86651		ANTIBODY; ENCEPHALITIS, CALIFORNIA	\$16.43	\$16.43
86652		ANTIBODY; ENCEPHALITIS, EASTERN EQUINE	\$16.43	\$16.43
86653		ANTIBODY; ENCEPHALITIS ST, LOUIS	\$16.43	\$16.43
86654		ANTIBODY; ENCEPHALITIS WESTERN EQUINE	\$16.43	\$16.43
86658		ANTIBODY; ENTEROVIRUS	\$15.89	\$15.89
86663		ANTIBODY; EPSTEIN-BARR, EARLY ANTIGEN	\$16.35	\$16.35
86664		ANTIBODY; EPSTEIN-BARR, NUCLEAR ANTIGEN	\$18.08	\$18.08
86665		ANTIBODY; EPSTEIN-BARR VIRAL CAPSID	\$20.25	\$20.25
86666		ANTIBODY; EHRLICHIA	\$12.68	\$12.68
86668		ANTIBODY; FRACISELLA TULARENSIS	\$12.96	\$12.96
86671		ANTIBODY; FUNGUS	\$15.28	\$15.28
86674		ANTIBODY; GIARDIA LAMBLIA	\$18.08	\$18.08
86677		ANTIBODY; HELICOBACTER PYLOUI	\$18.08	\$18.08
86682		ANTIBODY; HELMINTH	\$16.20	\$16.20
86684		ANTIBODY; HEMOPHILUS INFLUENZA	\$18.08	\$18.08
86687		HTLV-I ANTIBODY	\$10.46	\$10.46
86688		HTLV-II ANTIBODY	\$14.65	\$14.65

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PROCEDURE CODE	MODIFIER	PROCEDURE DESCRIPTION	NON-FACILITY RATE	FACILITY RATE
86689		HTLV/HIV CONFIRMJ ANTIBODY	\$24.13	\$24.13
86692		ANTOBODY; HEPATITIS, DELTA AGENT	\$18.08	\$18.08
86694		ANTIBODY; HERPES SIMPLEX, NON-SPECIFIC	\$17.90	\$17.90
86695		ANTIBODY; HERPES SIMPLEX. TYPE I	\$16.43	\$16.43
86696		ANTIBODY; HERPES SIMPLEX, TYPE 2	\$24.13	\$24.13
86698		ANTOBODY; HISTOPLASM	\$15.57	\$15.57
86701		ANTIBODY; HIV-1	\$11.06	\$11.06
86702		ANTIBODY; HIV-2	\$14.65	\$14.65
86703		ANTIBODY; HIV-1 & HIV-2, SINGLE ASSAY	\$14.65	\$14.65
86704		HEPATITIS B CORE ANTIBODY (HCBAB), TOTAL	\$14.50	\$14.50
86705		HEPATITIS B CORE ANTIBODY (HCBAB); IGM A	\$14.66	\$14.66
86706		HEPATITIS B SURFACE ANTIBODY (HBSAB)	\$13.39	\$13.39
86707		HEPATITIS BE ANTIBODY (HBEAB)	\$14.42	\$14.42
86708		HEPATITIS A ANTIBODY	\$15.44	\$15.44
86709		HEPATITIS A ANTIBODY (HAAB); IGM ANTIBOD	\$14.02	\$14.02
86710		ANTIBODY, INFLUENZA VIRUS	\$16.90	\$16.90
86711		ANALYSIS FOR ANTIBODY TO JOHN CUNNINGHAM	\$17.61	\$17.61
86713		ANTIBODY; LEGIONELLA	\$19.07	\$19.07
86717		ANTIBODY; LEISHMANIA	\$10.45	\$10.45
86720		ANTIBODY; LEPTOSPIRA	\$12.29	\$12.29
86723		ANTIBODY; LISTERIA MONOCYTOGENES	\$16.43	\$16.43
86727		ANTIBODY; LYMPHOCYTIC CHORIOMENINGITIS	\$15.89	\$15.89
86732		ANTIBODY; MUCORMYCOSIS	\$16.43	\$16.43
86735		ANTIBODY; MUMPS	\$16.26	\$16.26
86738		ANTIBODY; MYCOPLASMA	\$16.50	\$16.50
86744		ANTIBODY; NOCARDIA	\$16.43	\$16.43
86747		ANTIBODY; PARVOVIRUS	\$18.08	\$18.08
86750		ANTIBODY; MALARIA	\$16.43	\$16.43

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PROCEDURE CODE	MODIFIER	PROCEDURE DESCRIPTION	NON-FACILITY RATE	FACILITY RATE
86753		ANTIBODY; PROTOZOA, NOT ELSEWHERE SPECI	\$10.45	\$10.45
86756		ANTIBODY; RESPIRATORY SYNCYTIAL VIRUS	\$16.06	\$16.06
86757		ANTIBODY; RICKETTSIA	\$24.13	\$24.13
86759		ANTIBODY; ROTAVIRUS	\$15.89	\$15.89
86762		ANTIBODY; RUBELLA	\$17.90	\$17.90
86765		ANTIBODY; RUBEOLA	\$16.05	\$16.05
86768		ANTIBODY; SALMONELLA	\$16.43	\$16.43
86771		ANTIBODY; SHIGELLA	\$16.43	\$16.43
86774		ANTIBODY; TETANUS	\$18.08	\$18.08
86777		ANTIBODY; TOXOPLASMA	\$17.90	\$17.90
86778		ANTIBODY; TOXOPLASMA, IGM	\$17.94	\$17.94
86780		TREPONEMA PALLIDUM	\$16.91	\$16.91
86784		ANTIBODY; TRICHINELLA	\$15.65	\$15.65
86787		ANTIBODY; VARICELLA-ZOSTER	\$16.05	\$16.05
86788		ANTIBODY; WEST NILE VIRUS, IGM	\$18.08	\$18.08
86789		ANTIBODY; WEST NILE VIRUS	\$17.90	\$17.90
86790		ANTIBODY; VIRUS, NOT ELSEWHERE SPECIFIED	\$16.05	\$16.05
86793		ANTIBODY; YERSINIA	\$16.43	\$16.43
86794		ZIKA VIRUS IGM ANTIBODY	\$18.93	\$18.93
86800		THYROGLOBULIN ANTIBODY	\$19.82	\$19.82
86803		HEPATITIS C ANTIBODY;	\$17.79	\$17.79
86804		HEPATITIS C ANTIBODY; CONFIRMATORY TEST	\$14.75	\$14.75
86805		LYMPHOCYTOTOXICITY ASSAY, VISUAL XM; W/	\$65.15	\$65.15
86806		LYMPHOCYTOTOXICITY ASSAY, VISUAL XM; W/O	\$59.30	\$59.30
86807		SERUM SCREENING FOR CYTOTOXIC PRA; STAND	\$49.30	\$49.30
86808		SERUM SCREENING FOR CYTOTOXIC PRA; QUICK	\$36.99	\$36.99
86812		TISSUE TYPING HLA TYPING A,B, OR C SINGL	\$32.15	\$32.15
86813		TISSUE TYPING HLA TYPING A,B, &/OR C MUL	\$72.26	\$72.26

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PROCEDURE CODE	MODIFIER	PROCEDURE DESCRIPTION	NON-FACILITY RATE	FACILITY RATE
86816		HLA TYPING; DR/DQ, SINGLE ANTIGEN	\$34.71	\$34.71
86817		HLA TYPING; DR/DQ, MULTIPLE ANTIGENS	\$80.21	\$80.21
86821		TISSUE TYPING LYMPNOCYTE CULTURE MIXED (\$70.34	\$70.34
86825		HUMAN LEUKOCYTE ANTIGEN (HLA) CROSSMATCH	\$102.60	\$102.60
86826		HUMAN LEUKOCYTE ANTIGEN (HLA) CROSSMATCH	\$34.20	\$34.20
86828		ASSESSMENT OF ANTIBODY TO HUMAN LEUKOCYT	\$48.51	\$48.51
86829		ASSESSMENT OF ANTIBODY TO HUMAN LEUKOCYT	\$36.39	\$36.39
86830		ASSESSMENT OF ANTIBODY TO HUMAN LEUKOCYT	\$98.25	\$98.25
86831		ASSESSMENT OF ANTIBODY TO HUMAN LEUKOCYT	\$84.22	\$84.22
86832		ASSESSMENT OF ANTIBODY TO HUMAN LEUKOCYT	\$154.41	\$154.41
86833		ASSESSMENT OF ANTIBODY TO HUMAN LEUKOCYT	\$140.37	\$140.37
86834		ASSESSMENT OF ANTIBODY TO HUMAN LEUKOCYT	\$435.15	\$435.15
86835		ASSESSMENT OF ANTIBODY TO HUMAN LEUKOCYT	\$393.04	\$393.04
86850		ANTIBODY SCREEN, RBC, EACH SERUM TECHNIQ	\$14.51	\$14.51
86860		ANTIBODY ELUTION, EACH ELUTION	\$14.20	\$14.20
86870		ANTIBODY ID, EACH PANEL FOR EACH SERUM T	\$25.63	\$25.63
86880		COOMBS TEST; DIRECT, EACH ANTISERUM	\$6.69	\$6.69
86885		ANTI HUMAN GLOBULIN TEST INDIRECT, QUALIT	\$7.12	\$7.12
86886		COOMBS TEST, INDIRECT TITER, EACH ANTISE	\$6.45	\$6.45
86900		BLOOD TYPING SEROLOGIC ABO	\$3.71	\$3.71
86901		BLOOD TYPING SEROLOGIC RH(D)	\$3.71	\$3.71
86902		BLOOD TYPING; ANTIGEN TESTING OF DONOR B	\$4.80	\$4.80
86904		BLOOD TYPING; ANTIGEN SCREENING, PER UNI	\$11.84	\$11.84
86905		BLOOD TYPING; RBC ANTIGENS, EACH	\$4.76	\$4.76
86906		BLD TYPING SEROLOGIC RH PHNT	\$9.66	\$9.66
86940		HEMOLYSINS/AGGLUTININS, AUTO, SCREEN, EA	\$10.22	\$10.22
86941		HEMOLYSINS/ AGGLUTININS, EACH; INCUBATED	\$15.09	\$15.09
87003		ANIMAL INNOCULATION SMALL ANIMAL W/OBSER	\$20.97	\$20.97

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PROCEDURE CODE	MODIFIER	PROCEDURE DESCRIPTION	NON-FACILITY RATE	FACILITY RATE
87015		CONCENTRATION (ANY TYPE), FOR INFECTIOUS	\$8.32	\$8.32
87040		CULTURE, BACTERIAL; BLOOD, AEROBIC, WITH	\$12.86	\$12.86
87045		CULTURE, BACTERIAL; STOOL, AEROBIC, WITH	\$11.75	\$11.75
87046		CULTURE, BACTERIAL; STOOL, AEROBIC, ADDI	\$11.75	\$11.75
87070		CULTURE, BACTERIAL; ANY OTHER SOURCE EXC	\$10.73	\$10.73
87071		CULTURE, BACTERIAL; QUANTITATIVE, AEROBI	\$11.75	\$11.75
87073		CULTURE, BACTERIAL; QUANTITATIVE, ANAERO	\$11.75	\$11.75
87075		CULTURE, BACTERIAL; ANY SOURCE, EXCEPT B	\$11.79	\$11.79
87076		CULTURE, BACTERIAL; ANAEROBIC ISOLATE, A	\$10.06	\$10.06
87077		CULTURE, BACTERIAL; AEROBIC ISOLATE, ADD	\$10.06	\$10.06
87081		CULTURE, PRESUMPTIVE, PATHOGENIC ORGANIS	\$7.18	\$7.18
87084		CULTURE W COLONY ESTIMATION FROM DENSITY	\$10.73	\$10.73
87086		CULTURE, BACTERIAL; QUANTITATIVE COLONY	\$10.05	\$10.05
87088		CULTURE, BACTERIAL; WITH ISOLATION AND P	\$10.08	\$10.08
87101		CULTURE, FUNGI (MOLD OR YEAST) ISOLATION	\$9.60	\$9.60
87102		CULTURE FUNGI ISOLATION OTHER SOURCE	\$10.47	\$10.47
87103		BLOOD CULTURE FOR FUNGI	\$11.24	\$11.24
87106		CULTURE, FUNGI, DEFINITIVE IDENTIFICATIO	\$12.86	\$12.86
87107		CULTURE, FUNGI, DEFINITIVE IDENTIFICATIO	\$12.86	\$12.86
87109		CULTURE MYCOPLASM ANY SOURCE	\$19.18	\$19.18
87110		CULTURE, CHLAMYDIA, ANY SOURCE	\$24.41	\$24.41
87116		CULTURE, TUBERCLE OR OTHER ACID-FAST BAC	\$13.47	\$13.47
87118		CULTURE, MYCOBACTERIAL, DEFINITIVE IDENT	\$13.63	\$13.63
87140		CULTURE, TYPING; IMMUNOFLUORESCENT METHO	\$6.95	\$6.95
87143		CULTURE, TYPING; GAS LIQUID CHROMATOGRAP	\$15.61	\$15.61
87147		CULTURE, TYPING; IMMUNOLOGIC METHOD, OTH	\$6.45	\$6.45
87149		CULTURE, TYPING; IDENTIFICATION BY NUCLE	\$24.99	\$24.99
87150		CULTURE, TYPING; IDENTIFICATION BY NUCLE	\$31.32	\$31.32

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PROCEDURE CODE	MODIFIER	PROCEDURE DESCRIPTION	NON-FACILITY RATE	FACILITY RATE
87152		CULTURE, TYPING; IDENTIFICATION BY PULSE	\$6.52	\$6.52
87153		CULTURE, TYPING; IDENTIFICATION BY NUCLE	\$75.58	\$75.58
87158		CULTURE TYPING OTHER METHODS	\$6.52	\$6.52
87164		DARKFIELD EXAMINATION	\$7.89	\$7.89
87164	26	DARKFIELD EXAMINATION	\$14.90	\$14.90
87166		DARK FIELD EXAM ANY SOURCE W/O COLLECTIO	\$14.07	\$14.07
87168		MACROSCOPIC EXAMINATION; ARTHROPOD	\$4.75	\$4.75
87169		MACROSCOPIC EXAMINATION; PARASITE	\$4.75	\$4.75
87172		PINWORM EXAM (EG, CELLOPHANE TAPE PREP)	\$4.75	\$4.75
87176		HOMOGENIZATION, TISSUE, FOR CULTURE	\$7.33	\$7.33
87177		OVA AND PARASITES	\$11.08	\$11.08
87181		SUSCEPTIBILITY STUDIES, ANTIMICROBIAL AG	\$5.92	\$5.92
87184		SUSCEPTIBILITY STUDIES, ANTIMICROBIAL AG	\$8.58	\$8.58
87185		SUSCEPTIBILITY STUDIES, ANTIMICROBIAL AG	\$5.92	\$5.92
87186		SUSCEPTIBILITY STUDIES, ANTIMICROBIAL AG	\$10.77	\$10.77
87187		SUSCEPTIBILITY STUDIES, ANTIMICROBIAL AG	\$12.92	\$12.92
87188		SUSCEPTIBILITY STUDIES, ANTIMICROBIAL AG	\$8.27	\$8.27
87190		SUSCEPTIBILITY STUDIES, ANTIMICROBIAL AG	\$7.05	\$7.05
87197		SERUM BACTERICIDAL TITER	\$18.72	\$18.72
87205		SMEAR, PRIMARY SOURCE WITH INTERPRETATIO	\$5.31	\$5.31
87206		SMEAR, PRIMARY SOURCE WITH INTERPRETATIO	\$6.69	\$6.69
87207		SMEAR, PRIMARY SOURCE WITH INTERPRETATIO	\$7.47	\$7.47
87207	26	SMEAR, PRIMARY SOURCE WITH INTERPRETATIO	\$15.17	\$15.17
87209		SMEAR, PRIMARY SOURCE WITH INTERPRETATIO	\$22.39	\$22.39
87210		SMEAR, PRIMARY SOURCE WITH INTERPRETATIO	\$4.75	\$4.75
87220		TISSUE EXAMINATION BY KOH SLIDE OF SAMPL	\$5.31	\$5.31
87230		TISSUE CULTURE LYMPHOCYTE	\$24.61	\$24.61
87250		VIRUS ISOLATION; INOCULATION OF EMBRYONA	\$20.30	\$20.30

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PROCEDURE CODE	MODIFIER	PROCEDURE DESCRIPTION	NON-FACILITY RATE	FACILITY RATE
87252		VIRUS ISOLATION; TISSUE CULTURE INOCULAT	\$20.30	\$20.30
87253		VIRUS ISOLATION; TISSUE CULTURE, ADDITIO	\$20.30	\$20.30
87254		VIRUS ISOLATION; CENTRIFUGE ENHANCED (SH	\$20.30	\$20.30
87255		VIRUS ISOLATION; INCLUDING IDENTIFICATIO	\$30.45	\$30.45
87260		INFECTIOUS AGENT ANTIGEN DETECTION BY IM	\$14.28	\$14.28
87265		INFECTIOUS AGENT ANTIGEN DETECTION BY DI	\$14.28	\$14.28
87267		INFECTIOUS AGENT ANTIGEN DETECTION BY IM	\$14.28	\$14.28
87269		INFECTIOUS AGENT ANTIGEN DETECTION BY IM	\$14.28	\$14.28
87270		INFECTIOUS AGENT ANTIGEN DETECTION BY DI	\$14.28	\$14.28
87271		INFECTIOUS AGENT ANTIGEN DETECTION BY IM	\$14.28	\$14.28
87272		INFECTIOUS AGENT ANTIGEN DETECTION BY IM	\$14.28	\$14.28
87273		INFECTIOUS AGENT ANTIGEN DETECTION BY IM	\$14.28	\$14.28
87274		INFECTIOUS AGENT ANTIGEN DETECTION BY IM	\$14.28	\$14.28
87275		INFECTIOUS AGENT ANTIGEN DETECTION BY IM	\$14.28	\$14.28
87276		INFECTIOUS AGENT ANTIGEN DETECTION BY DI	\$14.28	\$14.28
87278		INFECTIOUS AGENT ANTIGEN DETECTION BY DI	\$14.28	\$14.28
87279		INFECTIOUS AGENT ANTIGEN DETECTION BY IM	\$14.28	\$14.28
87280		INFECTIOUS AGENT ANTIGEN DETECTION BY DI	\$14.28	\$14.28
87281		INFECTIOUS AGENT ANTIGEN DETECTION BY IM	\$14.28	\$14.28
87283		INFECTIOUS AGENT ANTIGEN DETECTION BY IM	\$14.28	\$14.28
87285		INFECTIOUS AGENT ANTIGEN DETECTION BY DI	\$14.28	\$14.28
87290		INFECTIOUS AGENT ANTIGEN DETECTION BY DI	\$14.28	\$14.28
87299		INFECTIOUS AGENT ANTIGEN DETECTION BY IM	\$14.28	\$14.28
87300		INFECTIOUS AGENT ANTIGEN DETECTION BY IM	\$14.28	\$14.28
87301		ADENOVIRUS AG IA	\$14.28	\$14.28
87305		ASPERGILLUS AG IA	\$14.28	\$14.28
87320		CHYLMD TRACH AG IA	\$14.28	\$14.28
87324		CLOSTRIDIUM AG IA	\$14.28	\$14.28

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PROCEDURE CODE	MODIFIER	PROCEDURE DESCRIPTION	NON-FACILITY RATE	FACILITY RATE
87327		CRYPTOCOCCUS NEOFORM AG IA	\$14.28	\$14.28
87328		CRYPTOSPORIDIUM AG IA	\$14.28	\$14.28
87329		GIARDIA AG IA	\$14.28	\$14.28
87332		CYTOMEGALOVIRUS AG IA	\$14.28	\$14.28
87335		E COLI 0157 AG IA	\$14.28	\$14.28
87336		ENTAMOEB HIST DISPR AG IA	\$14.28	\$14.28
87337		ENTAMOEB HIST GROUP AG IA	\$14.28	\$14.28
87338		HPYLORI STOOL IA	\$17.92	\$17.92
87339		H PYLORI AG IA	\$14.28	\$14.28
87340		HEPATITIS B SURFACE AG IA	\$11.59	\$11.59
87341		HEPATITIS B SURFACE AG IA	\$11.59	\$11.59
87350		HEPATITIS BE AG IA	\$13.79	\$13.79
87380		HEPATITIS DELTA AG IA	\$20.46	\$20.46
87385		HISTOPLASMA CAPSUL AG IA	\$14.28	\$14.28
87389		INFECTIOUS AGENT ANTIGEN DETECTION BY EN	\$29.92	\$29.92
87390		HIV-1 AG IA	\$21.98	\$21.98
87391		HIV-2 AG IA	\$21.98	\$21.98
87400		INFLUENZA A/B AG IA	\$14.28	\$14.28
87420		RESP SYNCYTIAL AG IA	\$14.28	\$14.28
87425		ROTAVIRUS AG IA	\$14.28	\$14.28
87427		SHIGA-LIKE TOXIN AG IA	\$14.28	\$14.28
87430		STREP A AG IA	\$14.28	\$14.28
87449		AG DETECT NOS IA MULT	\$14.28	\$14.28
87450		AG DETECT NOS IA SINGLE	\$9.53	\$9.53
87451		AG DETECT POLYVAL IA MULT	\$9.53	\$9.53
87471		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$30.56	\$30.56
87472		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$40.58	\$40.58
87475		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$24.99	\$24.99

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PROCEDURE CODE	MODIFIER	PROCEDURE DESCRIPTION	NON-FACILITY RATE	FACILITY RATE
87476		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$30.56	\$30.56
87480		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$24.99	\$24.99
87481		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$30.56	\$30.56
87482		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$40.58	\$40.58
87483		CNS DNA AMP PROBE TYPE 12-25	\$245.96	\$245.96
87485		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$24.99	\$24.99
87486		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$30.56	\$30.56
87487		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$40.58	\$40.58
87490		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$24.99	\$24.99
87491		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$30.56	\$30.56
87492		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$40.58	\$40.58
87493		CLOSTRIDIUM DIFFICILE, TOXIN GENE(S), AM	\$31.32	\$31.32
87495		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$24.99	\$24.99
87496		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$30.56	\$30.56
87497		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$40.58	\$40.58
87498		DETECTION TEST FOR ENTEROVIRUS (INTESTIN	\$30.56	\$30.56
87500		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$30.56	\$30.56
87501		INFLUENZA DNA AMP PROB 1+	\$35.95	\$35.95
87502		INFLUENZA DNA AMP PROBE	\$66.72	\$66.72
87503		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$11.58	\$11.57
87505		NFCT AGENT DETECTION GI	\$88.67	\$88.67
87506		IADNA-DNA/RNA PROBE TQ 6-11	\$134.33	\$134.33
87507		IADNA-DNA/RNA PROBE TQ 12-25	\$248.48	\$248.48
87510		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$24.99	\$24.99
87511		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$30.56	\$30.56
87512		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$40.58	\$40.58
87516		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$30.56	\$30.56
87517		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$40.58	\$40.58

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PROCEDURE CODE	MODIFIER	PROCEDURE DESCRIPTION	NON-FACILITY RATE	FACILITY RATE
87520		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$24.99	\$24.99
87521		DETECTION TEST FOR; HEPATITIS C VIRUS	\$30.56	\$30.56
87522		DETECTION TEST FOR; HEPATITIS C VIRUS	\$40.58	\$40.58
87525		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$24.99	\$24.99
87526		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$30.56	\$30.56
87527		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$40.58	\$40.58
87528		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$24.99	\$24.99
87529		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$30.56	\$30.56
87530		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$40.58	\$40.58
87531		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$24.99	\$24.99
87532		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$30.56	\$30.56
87533		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$40.58	\$40.58
87534		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$24.99	\$24.99
87535		DETECTION TEST FOR HIV-1 VIRUS	\$30.56	\$30.56
87536		DETECTION TEST FOR HIV-1 VIRUS	\$66.24	\$66.24
87537		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$24.99	\$24.99
87538		DETECTION TEST FOR HIV-2 VIRUS	\$30.56	\$30.56
87539		DETECTION TEST FOR HIV-2 VIRUS	\$40.58	\$40.58
87540		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$24.99	\$24.99
87541		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$30.56	\$30.56
87542		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$40.58	\$40.58
87550		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$24.99	\$24.99
87551		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$30.56	\$30.56
87552		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$40.58	\$40.58
87555		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$24.99	\$24.99
87556		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$30.56	\$30.56
87557		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$40.58	\$40.58
87560		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$24.99	\$24.99

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PROCEDURE CODE	MODIFIER	PROCEDURE DESCRIPTION	NON-FACILITY RATE	FACILITY RATE
87561		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$30.56	\$30.56
87562		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$40.58	\$40.58
87580		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$24.99	\$24.99
87581		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$30.56	\$30.56
87582		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$40.58	\$40.58
87590		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$24.99	\$24.99
87591		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$30.56	\$30.56
87592		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$40.58	\$40.58
87623		HPV LOW-RISK TYPES	\$30.38	\$30.38
87624		HPV HIGH-RISK TYPES	\$30.38	\$30.38
87625		HPV TYPES 16 & 18 ONLY	\$30.38	\$30.38
87631		RESP VIRUS 3-5 TARGETS	\$87.77	\$87.77
87632		RESP VIRUS 6-11 TARGETS	\$132.97	\$132.97
87633		RESP VIRUS 12-25 TARGETS	\$245.96	\$245.96
87634		RSV DNA/RNA AMP PROBE	\$78.86	\$78.86
87640		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$30.56	\$30.56
87641		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$30.56	\$30.56
87650		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$24.99	\$24.99
87651		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$30.56	\$30.56
87652		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$40.58	\$40.58
87653		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$30.56	\$30.56
87660		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$24.99	\$24.99
87661		TRICHOMONAS VAGINALIS AMPLIF	\$29.84	\$29.84
87662		ZIKA VIRUS DNA/RNA AMP PROBE	\$57.65	\$57.65
87797		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$24.99	\$24.99
87798		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$30.56	\$30.56
87799		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$40.58	\$40.58
87800		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$49.97	\$49.97

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PROCEDURE CODE	MODIFIER	PROCEDURE DESCRIPTION	NON-FACILITY RATE	FACILITY RATE
87801		INFECTIOUS AGENT DETECTION BY NUCLEIC AC	\$61.10	\$61.10
87802		INFECTIOUS AGENT ANTIGEN DETECTION BY IM	\$14.28	\$14.28
87803		INFECTIOUS AGENT ANTIGEN DETECTION BY IM	\$14.28	\$14.28
87804		INFECTIOUS AGENT ANTIGEN DETECTION BY IM	\$14.28	\$14.28
87806		HIV ANTIGEN W/HIV ANTIBODIES	\$29.34	\$29.34
87807		INFECTIOUS AGENT ANTIGEN DETECTION BY IM	\$14.28	\$14.28
87808		INFECTIOUS AGENT ANTIGEN DETECTION BY IM	\$14.28	\$14.28
87809		INFECTIOUS AGENT ANTIGEN DETECTION BY IM	\$14.28	\$14.28
87810		INFECTIOUS AGENT DETECTION BY IMMUNOASSA	\$14.28	\$14.28
87850		INFECTIOUS AGENT DETECTION BY IMMUNOASSA	\$14.28	\$14.28
87880		INFECTIOUS AGENT DETECTION BY IMMUNOASSA	\$14.28	\$14.28
87899		INFECTIOUS AGENT DETECTION BY IMMUNOASSA	\$14.28	\$14.28
87900		INFECTIOUS AGENT DRUG SUSCEPTIBILITY PHE	\$101.49	\$101.49
87901		ANALYSIS TEST FOR HIV-1 VIRUS	\$97.26	\$97.26
87902		INFECTIOUS AGENT GENOTYPE ANALYSIS BY NU	\$97.26	\$97.26
87903		INFECTIOUS AGENT PHENOTYPE ANALYSIS BY N	\$339.12	\$339.12
87904		INFECTIOUS AGENT PHENOTYPE ANALYSIS BY N	\$20.30	\$20.30
87905		INFECTIOUS AGENT ENZYMATIC ACTIVITY OTHE	\$16.59	\$16.59
87906		ANALYSIS TEST FOR HIV-1 VIRUS	\$48.98	\$48.98
87910		ANALYSIS TEST FOR CYTOMEGALOVIRUS	\$95.67	\$95.67
87912		ANALYSIS TEST FOR HEPATITIS B VIRUS	\$95.67	\$95.67
88104		BODY FLUID CYTOLOGY	\$48.41	\$48.41
88104	26	BODY FLUID CYTOLOGY	\$22.59	\$22.59
88104	TC	BODY FLUID CYTOLOGY	\$25.82	\$25.82
88106		CYTOPATHOLOGY FILTER METHOD ONLY WITH IN	\$60.00	\$60.00
88106	26	CYTOPATHOLOGY FILTER METHOD ONLY WITH IN	\$22.59	\$22.59
88106	TC	CYTOPATHOLOGY FILTER METHOD ONLY WITH IN	\$37.41	\$37.41
88108		CYTOPATHOLOGY, CONCENTRATION TECHNIQUE,	\$56.89	\$56.89

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PROCEDURE CODE	MODIFIER	PROCEDURE DESCRIPTION	NON-FACILITY RATE	FACILITY RATE
88108	26	CYTOPATHOLOGY, CONCENTRATION TECHNIQUE,	\$22.59	\$22.59
88108	TC	CYTOPATHOLOGY, CONCENTRATION TECHNIQUE,	\$34.31	\$34.31
88112		CYTOPATHOLOGY, SELECTIVE CELLULAR ENHANC	\$81.20	\$81.20
88112	26	CYTOPATHOLOGY, SELECTIVE CELLULAR ENHANC	\$46.33	\$46.33
88112	TC	CYTOPATHOLOGY, SELECTIVE CELLULAR ENHANC	\$34.87	\$34.87
88120		CYTOPATHOLOGY, IN SITU HYBRIDIZATION (EG	\$370.06	\$370.06
88120	26	CYTOPATHOLOGY, IN SITU HYBRIDIZATION (EG	\$43.37	\$43.37
88120	TC	CYTOPATHOLOGY, IN SITU HYBRIDIZATION (EG	\$326.60	\$326.60
88121		CYTOPATHOLOGY, IN SITU HYBRIDIZATION (EG	\$312.54	\$312.54
88121	26	CYTOPATHOLOGY, IN SITU HYBRIDIZATION (EG	\$38.55	\$38.55
88121	TC	CYTOPATHOLOGY, IN SITU HYBRIDIZATION (EG	\$273.99	\$273.99
88125		CYTOPATHOLOGY FORENSIC	\$17.09	\$17.09
88125	26	CYTOPATHOLOGY FORENSIC	\$10.68	\$10.68
88125	TC	CYTOPATHOLOGY FORENSIC	\$6.41	\$6.41
88130		BUCCAL SMEAR	\$18.75	\$18.75
88130	26	BUCCAL SMEAR	\$19.71	\$19.71
88140		SEX CHROMATIN IDENT PERIPH BLOOD SMEAR	\$9.96	\$9.96
88140	26	SEX CHROMATIN IDENT PERIPH BLOOD SMEAR	\$10.05	\$10.05
88141		CYTOPATHOLOGY, CERVICAL OR VAGINAL (ANY	\$21.98	\$21.98
88142		CYTOPATHOLOGY, CERVICAL OR VAGINAL (ANY	\$25.24	\$25.24
88143		CYTOPATHOLOGY, CERVICAL OR VAGINAL (ANY	\$25.24	\$25.24
88147		CYTOPATHOLOGY SMEARS, CERVICAL OR VAGINA	\$13.16	\$13.16
88148		CYTOPATHOLOGY SMEARS, CERVICAL OR VAGINA	\$13.16	\$13.16
88150		CYTOPATHOLOGY, SLIDES, CERVICAL OR VAGIN	\$13.16	\$13.16
88152		CYTOPATHOLOGY, SLIDES, CERVICAL OR VAGIN	\$13.16	\$13.16
88153		CYTOPATHOLOGY, SLIDES, CERVICAL OR VAGIN	\$13.16	\$13.16
88155		CYTOPATHOLOGY, SLIDES, CERVICAL OR VAGIN	\$7.47	\$7.47
88160		CYTOPATHOLOGY, SMEARS, ANY OTHER SOURCE;	\$40.92	\$40.92

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PROCEDURE CODE	MODIFIER	PROCEDURE DESCRIPTION	NON-FACILITY RATE	FACILITY RATE
88160	26	CYTOPATHOLOGY, SMEARS, ANY OTHER SOURCE;	\$20.19	\$20.19
88160	TC	CYTOPATHOLOGY, SMEARS, ANY OTHER SOURCE;	\$20.74	\$20.74
88161		CYTOPATHOLOGY PREPARATION SCREEN/INTERPR	\$42.62	\$42.62
88161	26	CYTOPATHOLOGY PREPARATION SCREEN/INTERPR	\$19.90	\$19.90
88161	TC	CYTOPATHOLOGY PREPARATION SCREEN/INTERPR	\$22.72	\$22.72
88162		CYTOPATHOLOGY 5 SLIDES &/OR MULTIPLE STA	\$61.78	\$61.78
88162	26	CYTOPATHOLOGY 5 SLIDES &/OR MULTIPLE STA	\$30.87	\$30.87
88162	TC	CYTOPATHOLOGY 5 SLIDES &/OR MULTIPLE STA	\$30.91	\$30.91
88164		CYTOPATHOLOGY, SLIDES, CERVICAL OR VAGIN	\$13.16	\$13.16
88165		CYTOPATHOLOGY, SLIDES, CERVICAL OR VAGIN	\$13.16	\$13.16
88166		CYTOPATHOLOGY, SLIDES, CERVICAL OR VAGIN	\$13.16	\$13.16
88167		CYTOPATHOLOGY, SLIDES, CERVICAL OR VAGIN	\$13.16	\$13.16
88172		CYTOPATHOLOGY, EVALUATION OF FINE NEEDLE	\$41.72	\$41.72
88172	26	CYTOPATHOLOGY, EVALUATION OF FINE NEEDLE	\$24.37	\$24.37
88172	TC	CYTOPATHOLOGY, EVALUATION OF FINE NEEDLE	\$17.35	\$17.35
88173		EVALUATION OF FINE NEEDLE ASPIRATE INTER	\$105.73	\$105.73
88173	26	EVALUATION OF FINE NEEDLE ASPIRATE INTER	\$56.15	\$56.15
88173	TC	EVALUATION OF FINE NEEDLE ASPIRATE INTER	\$49.57	\$49.57
88174		CYTOPATHOLOGY, CERVICAL OR VAGINAL (ANY	\$26.62	\$26.62
88175		CYTOPATHOLOGY, CERVICAL OR VAGINAL (ANY	\$32.38	\$32.38
88177		CYTOPATHOLOGY, EVALUATION OF FINE NEEDLE	\$22.85	\$22.85
88177	26	CYTOPATHOLOGY, EVALUATION OF FINE NEEDLE	\$17.72	\$17.72
88177	TC	CYTOPATHOLOGY, EVALUATION OF FINE NEEDLE	\$5.15	\$5.15
88182		FLOW CYTOMETRY; CELL CYCLE OR DNA ANALYS	\$80.28	\$80.28
88182	26	FLOW CYTOMETRY; CELL CYCLE OR DNA ANALYS	\$29.19	\$29.19
88182	TC	FLOW CYTOMETRY; CELL CYCLE OR DNA ANALYS	\$51.08	\$51.08
88184		FLOW CYTOMETRY, CELL SURFACE, CYTOPLASMI	\$61.16	\$61.16
88185		FLOW CYTOMETRY, CELL SURFACE, CYTOPLASMI	\$36.29	\$36.29

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PROCEDURE CODE	MODIFIER	PROCEDURE DESCRIPTION	NON-FACILITY RATE	FACILITY RATE
88187		FLOW CYTOMETRY, INTERPRETATION; 2 TO 8 M	\$53.34	\$53.34
88188		FLOW CYTOMETRY, INTERPRETATION; 9 TO 15	\$65.68	\$65.68
88189		FLOW CYTOMETRY, INTERPRETATION; 16 OR MO	\$83.88	\$83.88
88230		TISSUE CULTURE FOR NON-NEOPLASTIC DISORD	\$145.16	\$145.16
88230	26	TISSUE CULTURE FOR NON-NEOPLASTIC DISORD	\$118.75	\$118.75
88230	TC	TISSUE CULTURE FOR NON-NEOPLASTIC DISORD	\$38.98	\$38.98
88233		TISSUE CULTURE, SKIN	\$175.35	\$175.35
88233	26	TISSUE CULTURE, SKIN	\$143.63	\$143.63
88233	TC	TISSUE CULTURE, SKIN	\$47.29	\$47.29
88235		TISSUE CULTURE, PLACENTA	\$183.48	\$183.48
88235	26	TISSUE CULTURE, PLACENTA	\$150.33	\$150.33
88235	TC	TISSUE CULTURE, PLACENTA	\$49.51	\$49.51
88237		TISSUE CULTURE FOR NEOPLASTIC DISORDERS;	\$157.38	\$157.38
88237	26	TISSUE CULTURE FOR NEOPLASTIC DISORDERS;	\$128.81	\$128.81
88237	TC	TISSUE CULTURE FOR NEOPLASTIC DISORDERS;	\$42.35	\$42.35
88239		TISSUE CULTURE FOR NEOPLASTIC DISORDERS;	\$183.82	\$183.82
88239	26	TISSUE CULTURE FOR NEOPLASTIC DISORDERS;	\$150.61	\$150.61
88239	TC	TISSUE CULTURE FOR NEOPLASTIC DISORDERS;	\$49.61	\$49.61
88245		CHROMOSOME ANALYSIS FOR BREAKAGE SYNDROM	\$185.47	\$185.47
88245	26	CHROMOSOME ANALYSIS FOR BREAKAGE SYNDROM	\$151.98	\$151.98
88245	TC	CHROMOSOME ANALYSIS FOR BREAKAGE SYNDROM	\$50.06	\$50.06
88248		CHROMOSOME ANALYSIS FOR BREAKAGE SYNDROM	\$215.78	\$215.78
88248	26	CHROMOSOME ANALYSIS FOR BREAKAGE SYNDROM	\$176.95	\$176.95
88248	TC	CHROMOSOME ANALYSIS FOR BREAKAGE SYNDROM	\$58.39	\$58.39
88261		CHROMOSOME ANALYSIS; COUNT 5 CELLS, 1 KA	\$220.22	\$220.22
88261	26	CHROMOSOME ANALYSIS; COUNT 5 CELLS, 1 KA	\$180.60	\$180.60
88261	TC	CHROMOSOME ANALYSIS; COUNT 5 CELLS, 1 KA	\$59.60	\$59.60
88262		CHROMOSOME ANALYSIS OPTION III	\$155.30	\$155.30

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PROCEDURE CODE	MODIFIER	PROCEDURE DESCRIPTION	NON-FACILITY RATE	FACILITY RATE
88262	26	CHROMOSOME ANALYSIS OPTION III	\$127.11	\$127.11
88262	TC	CHROMOSOME ANALYSIS OPTION III	\$41.77	\$41.77
88263		CHROMOSOME ANALYSIS	\$187.25	\$187.25
88263	26	CHROMOSOME ANALYSIS	\$153.44	\$153.44
88263	TC	CHROMOSOME ANALYSIS	\$50.55	\$50.55
88264		CHROMOSOME ANALYSIS; ANALYZE 20-25 CELLS	\$155.30	\$155.30
88264	26	CHROMOSOME ANALYSIS; ANALYZE 20-25 CELLS	\$127.11	\$127.11
88264	TC	CHROMOSOME ANALYSIS; ANALYZE 20-25 CELLS	\$41.77	\$41.77
88267		CHROMOSOME ANALYSIS AMNIOTIC FLUID 1-4 C	\$223.99	\$223.99
88267	26	CHROMOSOME ANALYSIS AMNIOTIC FLUID 1-4 C	\$183.72	\$183.72
88267	TC	CHROMOSOME ANALYSIS AMNIOTIC FLUID 1-4 C	\$60.64	\$60.64
88269		CHROMOSOME ANALYSIS AMNIONIC FLUID	\$207.24	\$207.24
88269	26	CHROMOSOME ANALYSIS AMNIONIC FLUID	\$169.91	\$169.91
88269	TC	CHROMOSOME ANALYSIS AMNIONIC FLUID	\$56.04	\$56.04
88271		MOLECULAR CYTOGENETICS; DNA PROBE, EACH	\$18.03	\$18.03
88271	26	MOLECULAR CYTOGENETICS; DNA PROBE, EACH	\$13.97	\$13.97
88271	TC	MOLECULAR CYTOGENETICS; DNA PROBE, EACH	\$4.06	\$4.06
88272		MOLECULAR CYTOGENETICS; CHROMOSOMAL IN S	\$33.36	\$33.36
88272	26	MOLECULAR CYTOGENETICS; CHROMOSOMAL IN S	\$26.61	\$26.61
88272	TC	MOLECULAR CYTOGENETICS; CHROMOSOMAL IN S	\$8.27	\$8.27
88273		MOLECULAR CYTOGENETICS; CHROMOSOMAL IN S	\$40.03	\$40.03
88273	26	MOLECULAR CYTOGENETICS; CHROMOSOMAL IN S	\$32.10	\$32.10
88273	TC	MOLECULAR CYTOGENETICS; CHROMOSOMAL IN S	\$10.10	\$10.10
88274		MOLECULAR CYTOGENETICS; INTERPHASE IN SI	\$43.37	\$43.37
88274	26	MOLECULAR CYTOGENETICS; INTERPHASE IN SI	\$34.85	\$34.85
88274	TC	MOLECULAR CYTOGENETICS; INTERPHASE IN SI	\$11.03	\$11.03
88275		MOLECULAR CYTOGENETICS; INTERPHASE IN SI	\$50.04	\$50.04
88275	26	MOLECULAR CYTOGENETICS; INTERPHASE IN SI	\$40.35	\$40.35

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PROCEDURE CODE	MODIFIER	PROCEDURE DESCRIPTION	NON-FACILITY RATE	FACILITY RATE
88275	TC	MOLECULAR CYTOGENETICS; INTERPHASE IN SI	\$12.86	\$12.86
88280		CHROM ANALYSIS ADDITIONAL KAROTYPING	\$31.27	\$31.27
88280	26	CHROM ANALYSIS ADDITIONAL KAROTYPING	\$24.88	\$24.88
88280	TC	CHROM ANALYSIS ADDITIONAL KAROTYPING	\$7.70	\$7.70
88283		BANDING FOR CHROMOSOME ANALYSIS	\$24.00	\$24.00
88283	26	BANDING FOR CHROMOSOME ANALYSIS	\$18.88	\$18.88
88283	TC	BANDING FOR CHROMOSOME ANALYSIS	\$5.70	\$5.70
88285		CHROM ANAL ADDITIONAL CELLS COUNTED	\$23.67	\$23.67
88285	26	CHROM ANAL ADDITIONAL CELLS COUNTED	\$18.62	\$18.62
88285	TC	CHROM ANAL ADDITIONAL CELLS COUNTED	\$5.61	\$5.61
88289		HIGH RESOLUTION FOR CHROMOSOME ANALYSIS	\$42.26	\$42.26
88289	26	HIGH RESOLUTION FOR CHROMOSOME ANALYSIS	\$33.94	\$33.94
88289	TC	HIGH RESOLUTION FOR CHROMOSOME ANALYSIS	\$10.72	\$10.72
88291		CYTOGENETICS AND MOLECULAR CYTOGENETICS,	\$23.33	\$23.33
88300		EXAM OF SURGICAL SPECIMEN	\$18.09	\$18.09
88300	26	EXAM OF SURGICAL SPECIMEN	\$3.49	\$3.49
88300	TC	EXAM OF SURGICAL SPECIMEN	\$14.61	\$14.61
88302		SURG PATHOLOGY GROSS MICROSCOPIC EXAM ID	\$37.91	\$37.91
88302	26	SURG PATHOLOGY GROSS MICROSCOPIC EXAM ID	\$5.30	\$5.30
88302	TC	SURG PATHOLOGY GROSS MICROSCOPIC EXAM ID	\$32.61	\$32.61
88304		LEVEL III - SURGICAL PATHOLOGY, GROSS AN	\$48.29	\$48.29
88304	26	LEVEL III - SURGICAL PATHOLOGY, GROSS AN	\$8.90	\$8.90
88304	TC	LEVEL III - SURGICAL PATHOLOGY, GROSS AN	\$39.39	\$39.39
88305		LEVEL IV - SURGICAL PATHOLOGY, GROSS AND	\$82.50	\$82.50
88305	26	LEVEL IV - SURGICAL PATHOLOGY, GROSS AND	\$30.57	\$30.57
88305	TC	LEVEL IV - SURGICAL PATHOLOGY, GROSS AND	\$51.93	\$51.93
88307		LEVEL V - SURGICAL PATHOLOGY, GROSS AND	\$165.38	\$165.38
88307	26	LEVEL V - SURGICAL PATHOLOGY, GROSS AND	\$65.01	\$65.01

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PROCEDURE CODE	MODIFIER	PROCEDURE DESCRIPTION	NON-FACILITY RATE	FACILITY RATE
88307	TC	LEVEL V - SURGICAL PATHOLOGY, GROSS AND	\$100.37	\$100.37
88309		SURGICAL PATHOLOGY SEVEN OR MORE BLOCKS	\$249.95	\$249.95
88309	26	SURGICAL PATHOLOGY SEVEN OR MORE BLOCKS	\$112.26	\$112.26
88309	TC	SURGICAL PATHOLOGY SEVEN OR MORE BLOCKS	\$137.68	\$137.68
88311		SURGICAL PATHOLOGY DECALCIFICATION PROCE	\$14.50	\$14.50
88311	26	SURGICAL PATHOLOGY DECALCIFICATION PROCE	\$9.79	\$9.79
88311	TC	SURGICAL PATHOLOGY DECALCIFICATION PROCE	\$4.71	\$4.71
88312		SPECIAL STAINS (LIST SEPARATELY IN ADDIT	\$77.57	\$77.57
88312	26	SPECIAL STAINS (LIST SEPARATELY IN ADDIT	\$21.69	\$21.69
88312	TC	SPECIAL STAINS (LIST SEPARATELY IN ADDIT	\$55.87	\$55.87
88313		SPECIAL STAINS GROUP 11 ALL OTHER SPECIA	\$56.33	\$56.33
88313	26	SPECIAL STAINS GROUP 11 ALL OTHER SPECIA	\$9.51	\$9.51
88313	TC	SPECIAL STAINS GROUP 11 ALL OTHER SPECIA	\$46.82	\$46.82
88314		HISTOCHEMICAL STAINING WITH FROZEN SECTI	\$69.08	\$69.08
88314	26	HISTOCHEMICAL STAINING WITH FROZEN SECTI	\$18.38	\$18.38
88314	TC	HISTOCHEMICAL STAINING WITH FROZEN SECTI	\$50.70	\$50.70
88319		HISTOCHEMISTRY TO IDENTIFY ENZYME CONSTI	\$107.69	\$107.69
88319	26	HISTOCHEMISTRY TO IDENTIFY ENZYME CONSTI	\$21.38	\$21.38
88319	TC	HISTOCHEMISTRY TO IDENTIFY ENZYME CONSTI	\$86.31	\$86.31
88321		CONSULTATION ON TISSUE EXAM	\$71.69	\$64.91
88323		CONS REPORT REFERRED MATERIAL REQ PREPAR	\$114.37	\$114.37
88323	26	CONS REPORT REFERRED MATERIAL REQ PREPAR	\$70.45	\$70.45
88323	TC	CONS REPORT REFERRED MATERIAL REQ PREPAR	\$43.91	\$43.91
88325		COMPREHENSIVE REVIEW RECORDS SLIDES W/RE	\$152.36	\$100.92
88329		OPERATING ROOM CONSULTATION	\$39.51	\$27.36
88331		PATHOLOGY CONSULTATION DURING SURGERY; F	\$71.55	\$71.55
88331	26	PATHOLOGY CONSULTATION DURING SURGERY; F	\$49.00	\$49.00
88331	TC	PATHOLOGY CONSULTATION DURING SURGERY; F	\$22.54	\$22.54

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PROCEDURE CODE	MODIFIER	PROCEDURE DESCRIPTION	NON-FACILITY RATE	FACILITY RATE
88332		CONS DURING SURG EACH ADD FROZ SECT SAME	\$32.09	\$32.09
88332	26	CONS DURING SURG EACH ADD FROZ SECT SAME	\$24.07	\$24.07
88332	TC	CONS DURING SURG EACH ADD FROZ SECT SAME	\$8.02	\$8.02
88333		PATHOLOGY CONSULTATION DURING SURGERY; C	\$73.26	\$73.26
88333	26	PATHOLOGY CONSULTATION DURING SURGERY; C	\$49.03	\$49.03
88333	TC	PATHOLOGY CONSULTATION DURING SURGERY; C	\$24.23	\$24.23
88334		PATHOLOGY CONSULTATION DURING SURGERY; C	\$44.28	\$44.28
88334	26	PATHOLOGY CONSULTATION DURING SURGERY; C	\$29.48	\$29.48
88334	TC	PATHOLOGY CONSULTATION DURING SURGERY; C	\$14.81	\$14.81
88341		IMMUNOHISTO ANTB ADDL SLIDE	\$52.73	\$52.73
88341	26	IMMUNOHISTO ANTB ADDL SLIDE	\$17.68	\$17.68
88341	TC	IMMUNOHISTO ANTB ADDL SLIDE	\$35.05	\$35.05
88342		IMMUNOHISTO ANTB 1ST STAIN	\$78.38	\$78.38
88342	26	IMMUNOHISTO ANTB 1ST STAIN	\$33.91	\$33.91
88342	TC	IMMUNOHISTO ANTB 1ST STAIN	\$44.48	\$44.48
88344		IMMUNOHISTO ANTIBODY SLIDE	\$91.87	\$91.87
88344	26	IMMUNOHISTO ANTIBODY SLIDE	\$32.50	\$32.50
88344	TC	IMMUNOHISTO ANTIBODY SLIDE	\$59.37	\$59.37
88346		IMMUNOFLUOR ANTB 1ST STAIN	\$78.68	\$78.68
88346	26	IMMUNOFLUOR ANTB 1ST STAIN	\$34.50	\$34.50
88346	TC	IMMUNOFLUOR ANTB 1ST STAIN	\$44.20	\$44.20
88348		ELECTRON MICROSCOPY DIAGNOSTIC	\$486.19	\$486.19
88348	26	ELECTRON MICROSCOPY DIAGNOSTIC	\$60.87	\$60.87
88348	TC	ELECTRON MICROSCOPY DIAGNOSTIC	\$425.32	\$425.32
88350		IMMUNOFLUOR ANTB ADDL STAIN	\$62.47	\$62.47
88350	26	IMMUNOFLUOR ANTB ADDL STAIN	\$25.48	\$25.48
88350	TC	IMMUNOFLUOR ANTB ADDL STAIN	\$36.99	\$36.99
88355		MORPHOMETRIC ANALYSIS SKELETAL MUSCLE	\$188.22	\$188.22

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PROCEDURE CODE	MODIFIER	PROCEDURE DESCRIPTION	NON-FACILITY RATE	FACILITY RATE
88355	26	MORPHOMETRIC ANALYSIS SKELETAL MUSCLE	\$71.45	\$71.45
88355	TC	MORPHOMETRIC ANALYSIS SKELETAL MUSCLE	\$116.77	\$116.77
88356		MORPHOMETRIC ANALYSIS NERVE	\$229.64	\$229.64
88356	26	MORPHOMETRIC ANALYSIS NERVE	\$114.10	\$114.10
88356	TC	MORPHOMETRIC ANALYSIS NERVE	\$115.54	\$115.54
88358		MORPHOMETRIC ANALYSIS; TUMOR (EG, DNA PL	\$61.44	\$61.44
88358	26	MORPHOMETRIC ANALYSIS; TUMOR (EG, DNA PL	\$37.19	\$37.19
88358	TC	MORPHOMETRIC ANALYSIS; TUMOR (EG, DNA PL	\$24.25	\$24.25
88360		MORPHOMETRIC ANALYSIS, TUMOR IMMUNOHISTO	\$94.80	\$94.80
88360	26	MORPHOMETRIC ANALYSIS, TUMOR IMMUNOHISTO	\$44.10	\$44.10
88360	TC	MORPHOMETRIC ANALYSIS, TUMOR IMMUNOHISTO	\$50.70	\$50.70
88361		MORPHOMETRIC ANALYSIS; TUMOR IMMUNOHISTO	\$119.06	\$119.06
88361	26	MORPHOMETRIC ANALYSIS; TUMOR IMMUNOHISTO	\$47.31	\$47.31
88361	TC	MORPHOMETRIC ANALYSIS; TUMOR IMMUNOHISTO	\$71.74	\$71.74
88362		NERVE TEASING PREPARATION	\$206.86	\$206.86
88362	26	NERVE TEASING PREPARATION	\$87.27	\$87.27
88362	TC	NERVE TEASING PREPARATION	\$119.59	\$119.59
88364		INSITU HYBRIDIZATION (FISH)	\$76.17	\$76.17
88364	26	INSITU HYBRIDIZATION (FISH)	\$22.06	\$22.06
88364	TC	INSITU HYBRIDIZATION (FISH)	\$54.12	\$54.12
88365		TISSUE IN SITU HYBRIDIZATION, INTERP. AN	\$123.27	\$123.27
88365	26	TISSUE IN SITU HYBRIDIZATION, INTERP. AN	\$47.42	\$47.42
88365	TC	TISSUE IN SITU HYBRIDIZATION, INTERP. AN	\$75.85	\$75.85
88366		INSITU HYBRIDIZATION (FISH)	\$117.72	\$117.72
88366	26	INSITU HYBRIDIZATION (FISH)	\$51.17	\$51.17
88366	TC	INSITU HYBRIDIZATION (FISH)	\$66.55	\$66.55
88367		MORPHOMETRIC ANALYSIS, IN SITU HYBRIDIZA	\$187.90	\$187.90
88367	26	MORPHOMETRIC ANALYSIS, IN SITU HYBRIDIZA	\$50.78	\$50.78

REPORT: RS04354-R1354 NORTH CAROLINA DEPARTMENT OF HEALTH AND HUMAN SERVICES
INDEPENDENT LAB FEE SCHEDULE AS OF: 07/01/2018

PROCEDURE CODE	MODIFIER	PROCEDURE DESCRIPTION	NON-FACILITY RATE	FACILITY RATE
88367	TC	MORPHOMETRIC ANALYSIS, IN SITU HYBRIDIZA	\$137.11	\$137.11
88368		MORPHOMETRIC ANALYSIS, IN SITU HYBRIDIZA	\$165.80	\$165.80
88368	26	MORPHOMETRIC ANALYSIS, IN SITU HYBRIDIZA	\$53.56	\$53.56
88368	TC	MORPHOMETRIC ANALYSIS, IN SITU HYBRIDIZA	\$112.24	\$112.24
88369		M/PHMTRC ALYSISHQUANT/SEMIQ	\$57.93	\$57.93
88369	26	M/PHMTRC ALYSISHQUANT/SEMIQ	\$20.40	\$20.40
88369	TC	M/PHMTRC ALYSISHQUANT/SEMIQ	\$37.54	\$37.54
88371	26	PROTEIN ANALYSIS OF TISSUE BY WESTERN BL	\$14.90	\$14.90
88372	26	PROTEIN ANALYSIS OF TISSUE BY WESTERN BL	\$14.90	\$14.90
88372	TC	PROTEIN ANALYSIS OF TISSUE BY WESTERN BL	\$15.21	\$15.21
88373		M/PHMTRC ALYS ISHQUNT/SEMIQ	\$47.22	\$47.22
88373	26	M/PHMTRC ALYS ISHQUNT/SEMIQ	\$17.15	\$17.15
88373	TC	M/PHMTRC ALYS ISHQUNT/SEMIQ	\$30.07	\$30.07
88374		M/PHMTRC ALYS ISHQUNT/SEMIQ	\$160.19	\$160.19
88374	26	M/PHMTRC ALYS ISHQUNT/SEMIQ	\$36.71	\$36.71
88374	TC	M/PHMTRC ALYS ISHQUNT/SEMIQ	\$123.48	\$123.48
88377		M/PHMTRC ALYS ISHQUNT/SEMIQ	\$168.35	\$168.35
88377	26	M/PHMTRC ALYS ISHQUNT/SEMIQ	\$53.44	\$53.44
88377	TC	M/PHMTRC ALYS ISHQUNT/SEMIQ	\$114.91	\$114.91
88387		MACROSCOPIC EXAMINATION, DISSECTION, AND	\$24.69	\$24.69
88387	26	MACROSCOPIC EXAMINATION, DISSECTION, AND	\$19.88	\$19.88
88387	TC	MACROSCOPIC EXAMINATION, DISSECTION, AND	\$4.80	\$4.80
88388		MACROSCOPIC EXAMINATION, DISSECTION, AND	\$14.75	\$14.75
88388	26	MACROSCOPIC EXAMINATION, DISSECTION, AND	\$12.39	\$12.39
88388	TC	MACROSCOPIC EXAMINATION, DISSECTION, AND	\$2.36	\$2.36
88720		BILIRUBIN, TOTAL, TRANSCUTANEOUS	\$6.29	\$6.29
88738		HEMOGLOBIN (HGB), QUANTITATIVE, TRANSCUT	\$6.41	\$6.41
88740		HEMOGLOBIN, QUANTITATIVE, TRANSCUTANEOUS	\$6.54	\$6.54

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INDEPENDENT LAB FEE SCHEDULE AS OF: 07/01/2018

PROCEDURE CODE	MODIFIER	PROCEDURE DESCRIPTION	NON-FACILITY RATE	FACILITY RATE
88741		HEMOGLOBIN, QUANTITATIVE, TRANSCUTANEOUS	\$6.54	\$6.54
89049		CAFFEINE HALOTHANE CONTRACTURE TEST (CHC	\$164.77	\$53.56
89050		CELL COUNT, MISCELLANEOUS BODY FLUIDS (E	\$5.90	\$5.90
89051		SYNOVIAL FLUID DIFF	\$6.49	\$6.49
89055		LEUKOCYTE ASSESSMENT FECAL	\$5.31	\$5.31
89060		CRYSTAL ID, SYNOVIAL FLUID	\$8.91	\$8.91
89125		FAT STAIN, FECES, URINE, OR RESPIRATORY	\$5.38	\$5.38
89160		MEAT FIBERS FECES	\$4.60	\$4.60
89190		NASAL SMEAR FOR EOSINOPHILS	\$5.80	\$5.80
89300		SEMEN ANALYSIS; PRESENCE AND/OR MOTILITY	\$11.10	\$11.10
89310		SEMEN ANALYSIS; MOTILITY AND COUNT (NOT	\$10.45	\$10.45
89320		SEMEN ANALYSIS COMPLETE	\$15.01	\$15.01
89325		SPERM AGGLUTINATION WITH ANTIBODY TITER	\$13.30	\$13.30
92537		CALORIC VSTBLR TEST W/REC	\$35.78	\$35.78
92537	26	CALORIC VSTBLR TEST W/REC	\$28.55	\$28.55
92537	TC	CALORIC VSTBLR TEST W/REC	\$7.22	\$7.22
92538		CALORIC VSTBLR TEST W/REC	\$18.17	\$18.17
92538	26	CALORIC VSTBLR TEST W/REC	\$14.28	\$14.28
92538	TC	CALORIC VSTBLR TEST W/REC	\$3.89	\$3.89
94010		SPIROMETRY, INCLUDING GRAPHIC RECORD, TO	\$25.84	\$25.84
97164		PT RE-EVAL EST PLAN CARE	\$48.36	\$48.36
97165		OT EVAL LOW COMPLEX 30 MIN	\$69.25	\$69.25
97166		OT EVAL MOD COMPLEX 45 MIN	\$69.25	\$69.25
97167		OT EVAL HIGH COMPLEX 60 MIN	\$69.25	\$69.25
97168		OT RE-EVAL EST PLAN CARE	\$45.69	\$45.69
99195		THERAPEUTIC PHLEBOTOMY	\$54.94	\$54.94
G0328		COLORECTAL CANCER SCREENING; FECAL OCCUL	\$19.96	\$19.96
G0416		PROSTATE BIOPSY, ANY MTHD	\$499.46	\$499.46

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 INDEPENDENT LAB FEE SCHEDULE AS OF: 07/01/2018

PROCEDURE CODE	MODIFIER	PROCEDURE DESCRIPTION	NON-FACILITY RATE	FACILITY RATE
G0480		DRUG TEST DEF 1-7 CLASSES	\$72.75	\$72.75
G0481		DRUF TEST DEF 8-14 CLASSES	\$111.92	\$111.92
G0482		DRUF TEST DEF 15-21 CLASSES	\$151.09	\$151.09
G0483		DRUF TEST DEF 22 OR MORE DRUG CLASSES	\$195.86	\$195.86

**Providers should always bill their usual and customary charges.
 Please use the monthly NC Medicaid Bulletins for additions,
 changes, and deletion to this schedule.**