

**Labatory Fee Schedule  
Provider Specialty 069**

CODE	MODE	Description	Medicaid Maximum Allowable		EFFECTIVE DATE
			FACILITY	NON-FACILITY	
36415		COLLECTION OF VENOUS BLOOD BY VENIPUNCTURE	\$ 2.74	\$ 2.74	9/1/2010
80047		BASIC METABOLIC PANEL (CALCIUM, IONIZED)	\$ 27.19	\$ 27.19	9/1/2010
80048		BASIC METABOLIC PANEL	\$ 10.05	\$ 10.05	9/1/2010
80050		GENERAL HEALTH SCREEN PANEL	\$ 11.34	\$ 11.57	9/1/2010
80051		ELECTROLYTE PANEL	\$ 8.65	\$ 8.65	9/1/2010
80053		COMPREHENSIVE METABOLIC PANEL	\$ 10.60	\$ 10.60	9/1/2010
80055		OBSTETRIC PROFILE	\$ 28.28	\$ 28.28	9/1/2010
80061		LIPID PROFILE	\$ 16.81	\$ 16.81	9/1/2010
80069		RENAL FUNCTION PANEL	\$ 10.05	\$ 10.05	9/1/2010
80074		ACUTE HEPATITIS PANEL	\$ 58.45	\$ 58.45	9/1/2010
80076		HEPATIC FUNCTION PANEL	\$ 10.05	\$ 10.05	9/1/2010
80101		DRUG SCREEN, QUALITATIVE; SINGLE DRUG CLASS METHOD (EG, IMMUNOASSAY, ENZYME	\$ 17.27	\$ 17.27	9/1/2010
80102		DRUG CONFIRMATION	\$ 16.61	\$ 16.61	9/1/2010
80150		AMIKACIN	\$ 18.90	\$ 18.90	9/1/2010
80152		AMITRIPTYLINE	\$ 20.43	\$ 20.43	9/1/2010
80154		BENZODIAZEPINES	\$ 23.19	\$ 23.19	9/1/2010
80156		CARBAMAZEPINE; TOTAL	\$ 18.26	\$ 18.26	9/1/2010
80157		CARBAMAZEPINE; FREE	\$ 16.62	\$ 16.62	9/1/2010
80158		CYCLOSPORINE	\$ 22.65	\$ 22.65	9/1/2010
80160		DESIPRAMINE	\$ 21.59	\$ 21.59	9/1/2010
80162		DIGOXIN	\$ 16.65	\$ 16.65	9/1/2010
80164		DIPROPYLACETIC ACID	\$ 16.81	\$ 16.81	9/1/2010
80166		DOXEPIN	\$ 19.44	\$ 19.44	9/1/2010
80168		ETHOSUXIMIDE	\$ 20.50	\$ 20.50	9/1/2010
80170		GENTAMICIN	\$ 4.34	\$ 4.34	9/1/2010
80173		HALOPERIDOL	\$ 18.26	\$ 18.26	9/1/2010
80174		IMIPRAMINE	\$ 21.59	\$ 21.59	9/1/2010
80176		LIDOCAINE	\$ 18.42	\$ 18.42	9/1/2010
80178		LITHIUM	\$ 8.30	\$ 8.30	9/1/2010
80182		NORTRIPTYLINE	\$ 16.81	\$ 16.81	9/1/2010
80184		PHENOBARBITAL	\$ 14.37	\$ 14.37	9/1/2010
80185		PHENTOIN; TOTAL	\$ 16.62	\$ 16.62	9/1/2010
80186		PHENTOIN; FREE	\$ 17.26	\$ 17.26	9/1/2010
80188		PRIMIDONE	\$ 20.43	\$ 20.43	9/1/2010
80195		SIROLIMUS	\$ 17.20	\$ 17.20	9/1/2010
80196		SALICYLATE	\$ 8.91	\$ 8.91	9/1/2010
80197		TACROLIMUS	\$ 17.20	\$ 17.20	9/1/2010
80198		THEOPHYLLINE	\$ 17.75	\$ 17.75	9/1/2010
80200		TOBRAMYCIN	\$ 20.21	\$ 20.21	9/1/2010
80201		TOPIRAMATE	\$ 14.96	\$ 14.96	9/1/2010
80202		VANCOMYCIN	\$ 16.81	\$ 16.81	9/1/2010
80299		QUANTITATION OF DRUG, NOT ELSEWHERE SPECIFIED	\$ 17.17	\$ 17.17	9/1/2010
80500		CLINICAL PATHOLOGY CONSULTATION; LIMITED	\$ 14.99	\$ 16.99	9/1/2010
81000		URINALYSIS, BY DIP STICK OR TABLET REAGENT FOR BILIRUBIN, GLUCOSE, HEMOGLOBIN,	\$ 3.98	\$ 3.98	9/1/2010
81001		URINALYSIS, BY DIP STICK OR TABLET REAGENT FOR BILIRUBIN, GLUCOSE, HEMOGLOBIN,	\$ 3.98	\$ 3.98	9/1/2010
81002		URINALYSIS ROUTINE WITHOUT MICROSCOPY	\$ 3.21	\$ 3.21	9/1/2010
81003		UA, BY DIP STICK OR TABLET; AUTOMATED, WO MICRO	\$ 2.82	\$ 2.82	9/1/2010
81005		URINE TESTS	\$ 2.72	\$ 2.72	9/1/2010
81015		MICROSCOPIC URINE EXAM	\$ 3.81	\$ 3.81	9/1/2010
81025		UA PREG. TEST - COLOR COMPARISON METHOD	\$ 7.93	\$ 7.93	9/1/2010
81050		VOLUME MEASUREMENT FOR TIMED COLLECTION, EACH	\$ 3.76	\$ 3.76	9/1/2010
82003		ACETAMINOPHEN	\$ 25.38	\$ 25.38	9/1/2010
82009		ACETONE QUALITATIVE	\$ 5.66	\$ 5.66	9/1/2010
82013		ACETYLCHOLINESTERASE	\$ 14.02	\$ 14.02	9/1/2010
82017		ACYLCARNITINES; QUANTITATIVE, EACH SPECIMEN (FOR CARNITINE, SEE 82379)	\$ 21.16	\$ 21.16	9/1/2010
82024		ACTH	\$ 48.45	\$ 48.45	9/1/2010
82030		ADENOSINE;5'MONOPHOSPHATE,CYCLIC (CYCLIC AMP)	\$ 32.37	\$ 32.37	9/1/2010
82040		ALBUMIN SERUM	\$ 6.21	\$ 6.21	9/1/2010
82042		ALBUMIN; URINE OR OTHER SOURCE, QUANTITATIVE, EACH SPECIMEN	\$ 6.49	\$ 6.49	9/1/2010
82043		ALBUMIN; URINE, MICR, QUANTITATIVE	\$ 7.26	\$ 7.26	9/1/2010
82044		ALBUMIN; URINE, MICRO, SEMIQUANTITATIVE	\$ 3.59	\$ 3.59	9/1/2010
82055		ALCOHOL , ANY SPECIMIN EXCEPT BREATH	\$ 13.55	\$ 13.55	9/1/2010
82085		ALDOLASE	\$ 12.17	\$ 12.17	9/1/2010
82088		ALDOSTERONE	\$ 51.12	\$ 51.12	9/1/2010
82103		ALPHA-1-ANTITRYPSIN; TOTAL	\$ 16.85	\$ 16.85	9/1/2010
82104		ALPHA-1-ANTITRYPSIN; PHENOTYPE	\$ 18.13	\$ 18.13	9/1/2010
82105		ALPHA-FETOPROTEIN; SERUM	\$ 21.04	\$ 21.04	9/1/2010
82106		ALPHA-FETOPROTEIN; AMNIOTIC FLUID	\$ 21.04	\$ 21.04	9/1/2010
82107		ALPHA-FETOPROTEIN (AFP); AFP-L3 FRACTION ISOFORM AND TOTAL AFP (INCLUDING RATIO)	\$ 80.78	\$ 80.78	9/1/2010
82108		ALUMINUM	\$ 31.96	\$ 31.96	9/1/2010
82127		AMINO ACIDS; SINGLE, QUALITATIVE, EACH SPECIMEN	\$ 17.39	\$ 17.39	9/1/2010
82131		AMINO ACIDS; SINGLE, QUANTITATIVE, EACH SPECIMEN	\$ 21.16	\$ 21.16	9/1/2010

**Laboratory Fee Schedule  
Provider Specialty 069**

CODE	MODE	Description	Medicaid Maximum Allowable		EFFECTIVE DATE
			FACILITY	NON-FACILITY	
82135		AMINOLEVULINIC ACID DELTA	\$ 20.65	\$ 20.65	9/1/2010
82136		AMINO ACIDS, 2 TO 5 AMINO ACIDS, QUANTITATIVE, EACH SPECIMEN	\$ 21.16	\$ 21.16	9/1/2010
82139		AMINO ACIDS, 6 OR MORE AMINO ACIDS, QUANTITATIVE, EACH SPECIMEN	\$ 21.16	\$ 21.16	9/1/2010
82140		AMMONIA	\$ 18.28	\$ 18.28	9/1/2010
82145		AMPHETAMINE OR METHAMPHETAMINE	\$ 19.50	\$ 19.50	9/1/2010
82150		AMYLASE	\$ 8.13	\$ 8.13	9/1/2010
82154		ANDROSTANEDIOL GLUCURONIDE	\$ 36.17	\$ 36.17	9/1/2010
82157		ANDROSTENEDIONE	\$ 36.72	\$ 36.72	9/1/2010
82164		ANGIOTENSIN I (ACE)	\$ 18.30	\$ 18.30	9/1/2010
82172		APOLIPOPROTEIN, EACH	\$ 19.43	\$ 19.43	9/1/2010
82175		ARSENIC	\$ 23.79	\$ 23.79	9/1/2010
82180		ASCORBIC ACID	\$ 12.40	\$ 12.40	9/1/2010
82205		BARBITURATES, NOT ELSEWHERE SPECIFIED	\$ 14.37	\$ 14.37	9/1/2010
82232		BETA-2 MICROGLOBULIN	\$ 20.30	\$ 20.30	9/1/2010
82239		BILE ACIDS; TOTAL	\$ 20.43	\$ 20.43	9/1/2010
82247		BILIRUBIN; TOTAL	\$ 6.30	\$ 6.30	9/1/2010
82248		BILIRUBIN; DIRECT	\$ 6.30	\$ 6.30	9/1/2010
82261		BIOTINIDASE, EACH SPECIMEN	\$ 21.16	\$ 21.16	9/1/2010
82270		BLOOD, OCCULT, BY PEROXIDASE ACTIVITY (EG, GUAIA), QUALITATIVE; FECES,	\$ 4.07	\$ 4.07	9/1/2010
82272		BLOOD, OCCULT, BY PEROXIDASE ACTIVITY (EG, GUAIA), QUALITATIVE, FECES, SINGLE	\$ 4.07	\$ 4.07	9/1/2010
82274		BLOOD, OCCULT, BY FECAL HEMOGLOBIN DETERMINATION BY IMMUNOASSAY, QUALITATIVE,	\$ 19.95	\$ 19.95	9/1/2010
82300		CADMIUM	\$ 29.02	\$ 29.02	9/1/2010
82306		CALCIFEDIOL (25-OH VITAMIN D-3)	\$ 37.13	\$ 37.13	9/1/2010
82308		CALCITONIN	\$ 33.58	\$ 33.58	9/1/2010
82310		CALCIUM; TOTAL	\$ 6.46	\$ 6.46	9/1/2010
82330		CALCIUM; IONIZED	\$ 17.14	\$ 17.14	9/1/2010
82340		CALCIUM URINE QUANTITATIVE TIMED SPECIMEN	\$ 6.53	\$ 6.53	9/1/2010
82355		CALCULUS; QUALITATIVE ANALYSIS	\$ 14.51	\$ 14.51	9/1/2010
82360		CALCULUS QUANTITATIVE CHEMICAL	\$ 16.15	\$ 16.15	9/1/2010
82365		CALCULUS QUANTITATIVE INFRARED SPECTROSCOPY	\$ 16.17	\$ 16.17	9/1/2010
82374		CARBON DIOXIDE	\$ 6.14	\$ 6.14	9/1/2010
82375		LABORATORY SERVICES, ANALYSIS	\$ 13.88	\$ 13.88	9/1/2010
82378		CARCINOEMBRYONIC ANTIGEN (CEA)	\$ 23.79	\$ 23.79	9/1/2010
82379		CARNITINE (TOTAL AND FREE), QUANTITATIVE, EACH SPECIMEN	\$ 21.16	\$ 21.16	9/1/2010
82380		CAROTENE	\$ 11.57	\$ 11.57	9/1/2010
82384		CATECHOLAMINES FRACTIONATED	\$ 31.67	\$ 31.67	9/1/2010
82390		CERULOPLASMIN	\$ 13.48	\$ 13.48	9/1/2010
82397		CHEMILUMINESCENT ASSAY	\$ 17.39	\$ 17.39	9/1/2010
82435		CHLORIDE, SERUM	\$ 5.76	\$ 5.76	9/1/2010
82436		CHLORIDE, URINE	\$ 6.30	\$ 6.30	9/1/2010
82438		CHLORIDE; OTHER SOURCE	\$ 6.14	\$ 6.14	9/1/2010
82441		CHLORINATRD HYDROCARBONNS SCREEN	\$ 7.53	\$ 7.53	9/1/2010
82465		CHOLESTEROL, SERUM OR WHOLE BLOOD, TOTAL	\$ 5.46	\$ 5.46	9/1/2010
82480		CHOLINESTERASE	\$ 7.21	\$ 7.21	9/1/2010
82485		CHONDRITINE B SULFATE QUANTITATIVE	\$ 25.90	\$ 25.90	9/1/2010
82486		CHROMATOGRAPHY, QUALITATIVE; COLUMN (EG, GAS LIQUID OR HPLC), ANALYTE NOT	\$ 22.65	\$ 22.65	9/1/2010
82491		CHROMATOGRAPHY, QUANTITATIVE, COLUMN (EG, GAS LIQUID OR HPLC); SINGLE ANALYTE	\$ 22.65	\$ 22.65	9/1/2010
82492		CHROMATOGRAPHY, QUANTITATIVE, COLUMN (EG, GAS LIQUID OR HPLC); MULTIPLE	\$ 22.65	\$ 22.65	9/1/2010
82507		CITRIC ACID	\$ 34.87	\$ 34.87	9/1/2010
82520		COCAINE OR METABOLITE	\$ 19.00	\$ 19.00	9/1/2010
82523		COLLAGEN CROSS LINKS, ANY METHOD	\$ 18.39	\$ 18.39	9/1/2010
82525		COPPER	\$ 15.57	\$ 15.57	9/1/2010
82530		CORTISOL; FREE	\$ 20.96	\$ 20.96	9/1/2010
82533		CORTISOL; TOTAL	\$ 20.45	\$ 20.45	9/1/2010
82540		CREATINE	\$ 5.82	\$ 5.82	9/1/2010
82541		COLUMN CHROMATOGRAPHY/MASS SPECTROMETRY (EG, GC/MS, OR HPLC/MS), ANALYTE NOT	\$ 22.65	\$ 22.65	9/1/2010
82542		COLUMN CHROMATOGRAPHY/MASS SPECTROMETRY (EG, GC/MS, OR HPLC/MS), ANALYTE NOT	\$ 22.65	\$ 22.65	9/1/2010
82543		COLUMN CHROMATOGRAPHY/MASS SPECTROMETRY (EG, GC/MS, OR HPLC/MS), ANALYTE NOT	\$ 22.65	\$ 22.65	9/1/2010
82544		COLUMN CHROMATOGRAPHY/MASS SPECTROMETRY (EG, GC/MS, OR HPLC/MS), ANALYTE NOT	\$ 22.65	\$ 22.65	9/1/2010
82550		CREATINE KINASE (CK), (CPK); TOTAL	\$ 8.17	\$ 8.17	9/1/2010
82552		CPK ISOENZYME (QUALITATIVE)	\$ 16.80	\$ 16.80	9/1/2010
82553		CPK; MB FRACTION ONLY	\$ 14.48	\$ 14.48	9/1/2010
82565		CREATININE; BLOOD	\$ 6.43	\$ 6.43	9/1/2010
82570		CREATININE; OTHER SOURCE	\$ 6.49	\$ 6.49	9/1/2010
82575		CREATININE CLEARANCE	\$ 11.85	\$ 11.85	9/1/2010
82595		CRYOGLOBULIN, QUALITATIVE OR SEMI-QUANTITATIVE (EG, CRYOCRIT)	\$ 8.12	\$ 8.12	9/1/2010
82607		CYANOCOBALAMIN (VITAMIN B-12)	\$ 18.90	\$ 18.90	9/1/2010
82608		CYANOCOBALAMIN UNSATURATED BINDING CAPACITY	\$ 17.96	\$ 17.96	9/1/2010
82615		CYSTINE	\$ 10.24	\$ 10.24	9/1/2010
82626		DEHYDROEPIANDROSTERONE (DHEA)	\$ 31.70	\$ 31.70	9/1/2010
82627		DHEA-S	\$ 27.89	\$ 27.89	9/1/2010
82633		DEOXYCORTICOSTERONE	\$ 38.85	\$ 38.85	9/1/2010

**Labatory Fee Schedule  
Provider Specialty 069**

CODE	MODE	Description	Medicaid Maximum Allowable		EFFECTIVE DATE
			FACILITY	NON-FACILITY	
82634		DEOXYCORTISOL, 11-	\$ 36.72	\$ 36.72	9/1/2010
82638		DIBUCAINE NUMBER	\$ 15.36	\$ 15.36	9/1/2010
82646		CREATINE AND CREATININE	\$ 25.90	\$ 25.90	9/1/2010
82651		DIHYDROTTESTOSTERONE	\$ 32.38	\$ 32.38	9/1/2010
82652		DIHYDROXYVITAMIN D	\$ 48.28	\$ 48.28	9/1/2010
82656		ELASTASE, PANCREATIC (EL-1), FECAL, QUALITATIVE OR SEMI-QUANTITATIVE	\$ 14.37	\$ 14.37	9/1/2010
82664		ELECTROPHORETIC TECH	\$ 43.09	\$ 43.09	9/1/2010
82668		ERYTHROPOIETIN	\$ 23.58	\$ 23.58	9/1/2010
82670		ESTRADIOL	\$ 29.87	\$ 29.87	9/1/2010
82671		ESTROGENS FRACTIONATED BLOOD	\$ 40.52	\$ 40.52	9/1/2010
82672		ESTROGENS TOTAL BLOOD	\$ 27.20	\$ 27.20	9/1/2010
82677		ESTRIOL	\$ 30.33	\$ 30.33	9/1/2010
82679		ESTRONE	\$ 31.31	\$ 31.31	9/1/2010
82693		ETHYLENE GLYCOL	\$ 17.40	\$ 17.40	9/1/2010
82705		FECAL FAT SCREEN	\$ 6.38	\$ 6.38	9/1/2010
82710		FAT OR LIPIDS, FECES; QUANTITATIVE	\$ 21.07	\$ 21.07	9/1/2010
82715		FECAL FAT	\$ 21.59	\$ 21.59	9/1/2010
82725		FATTY ACIDS, NONESTERIFIED	\$ 16.70	\$ 16.70	9/1/2010
82728		FERRITIN SPECIFY METHOD	\$ 17.09	\$ 17.09	9/1/2010
82731		FETAL FIBRONECTIN, CERVICOVAGINAL SECRETIONS, SEMI-QUANTITATIVE	\$ 80.78	\$ 80.78	9/1/2010
82746		FOLIC ACID	\$ 18.44	\$ 18.44	9/1/2010
82747		FOLIC ACID; RBC	\$ 18.90	\$ 18.90	9/1/2010
82760		GALACTOSE	\$ 14.04	\$ 14.04	9/1/2010
82775		GALACTOSE-1-PHOSDHATE URIDYL TRANSFERASE;QUAL	\$ 26.42	\$ 26.42	9/1/2010
82784		GAMMA GLOBULIN	\$ 11.66	\$ 11.66	9/1/2010
82785		GAMMAGLOBULIN; IGE	\$ 20.66	\$ 20.66	9/1/2010
82787		GAMMAGLOBULIN; IMMUNOGLOBULIN SUBCLASSES, (IGG1, 2, 3, OR 4), EACH	\$ 10.05	\$ 10.05	9/1/2010
82800		OXYGEN SATURATION PH ONLY	\$ 8.05	\$ 8.05	9/1/2010
82803		GASES, BLOOD, ANY COMBINATION OF PH, PCO2, PO2, CO2, HCO3 (INCLUDING CALCULATED	\$ 24.28	\$ 24.28	9/1/2010
82941		GASTRIN	\$ 22.12	\$ 22.12	9/1/2010
82943		GLUCAGON	\$ 17.92	\$ 17.92	9/1/2010
82945		GLUCOSE, BODY FLUID, OTHER THAN BLOOD	\$ 4.92	\$ 4.92	9/1/2010
82947		GLUCOSE; QUANTITATIVE, BLOOD (EXCEPT REAGENT STRIP)	\$ 4.92	\$ 4.92	9/1/2010
82948		GLUCOSE BLOOD STICK TEST	\$ 3.98	\$ 3.98	9/1/2010
82950		GLUCOSE POST GLUCOSE DOSE	\$ 5.96	\$ 5.96	9/1/2010
82951		GLUCOSE TOLERANCE	\$ 16.15	\$ 16.15	9/1/2010
82952		GLUCOSE TOLERANCE TEST EACH ASSIT BEYOND 3 SPEC	\$ 4.92	\$ 4.92	9/1/2010
82955		GLUCOSE 6 PHOSPHATE DEHYDROGENASE	\$ 5.84	\$ 5.84	9/1/2010
82962		BLOOD GLUCOSE BY MONITORING DEVICE	\$ 2.94	\$ 2.94	9/1/2010
82977		G G T	\$ 9.03	\$ 9.03	9/1/2010
82978		GLUTATIONE LEVEL AND STABILITY	\$ 17.88	\$ 17.88	9/1/2010
82980		GLUTETHIMIDE	\$ 22.99	\$ 22.99	9/1/2010
82985		GLYCATED PROTEIN	\$ 18.90	\$ 18.90	9/1/2010
83001		GONADOTROPIN; FOLLICLE STIMULATING HORMONE (FSH)	\$ 23.31	\$ 23.31	9/1/2010
83002		LUTEINIZING HORMONE (LH)	\$ 23.23	\$ 23.23	9/1/2010
83003		GROWTH STIMULATING HORMONE	\$ 20.90	\$ 20.90	9/1/2010
83010		HAPTOGLOBIN	\$ 15.78	\$ 15.78	9/1/2010
83013		HELICOBACTER PYLORI; ANALYSIS FOR UREASE ACTIVITY, NON-RADIOACTIVE ISOTOPE	\$ 84.48	\$ 84.48	9/1/2010
83014		HELICOBACTER PYLORI, BREATH TEST ANALYSIS; DRUG ADMINISTRATION AND SAMPLE	\$ 9.86	\$ 9.86	9/1/2010
83015		HEAVY METAL SCREEN	\$ 23.62	\$ 23.62	9/1/2010
83018		HEAVY METAL; QUANTITATIVE, EACH	\$ 27.54	\$ 27.54	9/1/2010
83020		HEMOGLOBIN FRACTIONATION AND QUANTITATION; ELECTROPHORESIS (EG, A2, S, C,	\$ 15.76	\$ 15.76	9/1/2010
83021		HEMOGLOBIN FRACTIONATION AND QUANTITATION; CHROMOTOGRAPHY (EG, A2, S, C, AND/OR	\$ 22.65	\$ 22.65	9/1/2010
83033		HEMOGLOBIN; F (FETAL), QUALITATIVE	\$ 7.48	\$ 7.48	9/1/2010
83036		HEMOGLOBIN; GLYCOSYLATED (A1C)	\$ 12.17	\$ 12.17	9/1/2010
83080		B-HEXOSAMINIDASE, EACH ASSAY	\$ 21.16	\$ 21.16	9/1/2010
83090		HOMOCYSTINE	\$ 21.16	\$ 21.16	9/1/2010
83150		HOMOVANILLIC ACID (HVA)	\$ 24.28	\$ 24.28	9/1/2010
83491		HYDROXYCORTICOSTEROIDS, 17- (17-OHCS)	\$ 21.97	\$ 21.97	9/1/2010
83497		5 HIAA QUALITATIVE	\$ 16.17	\$ 16.17	9/1/2010
83498		HYDROXYPROGESTERONE, 17-D	\$ 34.06	\$ 34.06	9/1/2010
83516		IMMUNOASSAY FOR ANALYTE OTHER THAN INFECTIOUS AGENT ANTIBODY OR INFECTIOUS	\$ 14.37	\$ 14.37	9/1/2010
83518		IMMUNOASSAY FOR ANALYTE OTHER THAN ANTIBODY OR INFECTIOUS AGENT ANTIGEN,	\$ 9.59	\$ 9.59	9/1/2010
83519		IMMUNOASSAY, ANALYTE, QUANTITATIVE; BY RADIOPHARMACEUTICAL TECHNIQUE (EG, RIA)	\$ 16.95	\$ 16.95	9/1/2010
83520		IMMUNOASSAY ANALYTE; NOT OTHERWISE SPECIFIED	\$ 16.24	\$ 16.24	9/1/2010
83525		INSULIN; TOTAL	\$ 14.34	\$ 14.34	9/1/2010
83527		INSULIN;	\$ 15.87	\$ 15.87	9/1/2010
83540		IRON	\$ 8.13	\$ 8.13	9/1/2010
83550		IBC	\$ 10.96	\$ 10.96	9/1/2010
83586		KETOSTEROIDS, 17- (17-KS); TOTAL	\$ 16.06	\$ 16.06	9/1/2010
83605		LACTATES	\$ 13.40	\$ 13.40	9/1/2010
83615		LACTATE DEHYDROGENASE (LD), (LDH)	\$ 7.58	\$ 7.58	9/1/2010

**Laboratory Fee Schedule  
Provider Specialty 069**

CODE	MODE	Description	Medicaid Maximum Allowable		EFFECTIVE DATE
			FACILITY	NON-FACILITY	
83625		LDH ISOENZYMES	\$ 11.67	\$ 11.67	9/1/2010
83630		LACTOFERRIN, FECAL; QUALITATIVE	\$ 25.73	\$ 25.73	9/1/2010
83655		LEAD	\$ 15.18	\$ 15.18	9/1/2010
83661		FETAL LUNG MATURITY ASSESSMENT; LECITHIN SPHINGOMYELIN (L/S) RATIO	\$ 27.57	\$ 27.57	9/1/2010
83690		LIPASE	\$ 8.63	\$ 8.63	9/1/2010
83695		LIPOPROTEIN (A)	\$ 16.24	\$ 16.24	9/1/2010
83701		LIPOPROTEIN, BLOOD; HIGH RESOLUTION FRACTIONATION AND QUANTITATION OF	\$ 31.13	\$ 31.13	9/1/2010
83718		LIPOPROTEIN, DIRECT MEASUREMENT; (HDL CHOLESTEROL)	\$ 10.27	\$ 10.27	9/1/2010
83721		LIPOPROTEIN, DIRECT MEASUREMENT; DIRECT MEASUREMENT, LDL CHOLESTEROL	\$ 11.97	\$ 11.97	9/1/2010
83735		MAGNESIUM	\$ 8.40	\$ 8.40	9/1/2010
83785		MANGANESE BLOOD OR URINE	\$ 30.85	\$ 30.85	9/1/2010
83788		MASS SPECTROMETRY AND TANDEM MASS SPECTROMETRY (MS, MS/ MS), ANALYTE NOT	\$ 22.65	\$ 22.65	9/1/2010
83789		MASS SPECTROMETRY AND TANDEM MASS SPECTROMETRY (MS, MS/ MS), ANALYTE NOT	\$ 22.65	\$ 22.65	9/1/2010
83805		MEPROBAMATE BLOOD/URINE	\$ 22.11	\$ 22.11	9/1/2010
83825		MERCURY, QUANTITATIVE	\$ 20.40	\$ 20.40	9/1/2010
83835		METHANEPHRINES	\$ 21.25	\$ 21.25	9/1/2010
83840		METHADONE OR COCAINE	\$ 20.48	\$ 20.48	9/1/2010
83872		MUCIN SYNOVIAL FLUID	\$ 7.35	\$ 7.35	9/1/2010
83874		MYOGLOBIN	\$ 16.20	\$ 16.20	9/1/2010
83880		NATRIURETIC PEPTIDE	\$ 42.58	\$ 42.58	9/1/2010
83883		NEPHELOMETRY, EACH ANALYTE	\$ 17.06	\$ 17.06	9/1/2010
83885		NICKEL	\$ 30.73	\$ 30.73	9/1/2010
83887		NICOTINE	\$ 29.70	\$ 29.70	9/1/2010
83890		MOLECULAR DIAGNOSTICS; MOLECULAR ISOLATION OR EXTRACTION	\$ 5.03	\$ 5.03	9/1/2010
83891		MOLECULAR DIAGNOSTICS; ISOLATION OR EXTRACTION OF HIGHLY PURIFIED NUCLEIC ACID	\$ 5.03	\$ 5.03	9/1/2010
83892		NUCLEAR MOLECULAR DX; ENZYMATIC DIGESTION	\$ 5.03	\$ 5.03	9/1/2010
83893		MOLECULAR DIAGNOSTICS; DOT/SLOT BLOT PRODUCTION	\$ 5.03	\$ 5.03	9/1/2010
83894		MOLECULAR DIAGNOSTICS; SEPARATION BY GEL ELECTROPHORESIS (EG, AGAROSE,	\$ 5.03	\$ 5.03	9/1/2010
83896		NUCLEAR MOLECULAR DX; EACH	\$ 5.03	\$ 5.03	9/1/2010
83897		MOLECULAR DIAGNOSTICS; NUCLEIC ACID TRANSFER (EG, SOUTHERN, NORTHERN)	\$ 5.03	\$ 5.03	9/1/2010
83898		MOLECULAR DIAGNOSTICS; AMPLIFICATION OF PATIENT NUCLEIC ACID, EACH NUCLEIC ACID	\$ 5.16	\$ 5.16	9/1/2010
83901		MOLECULAR DIAGNOSTICS; AMPLIFICATION OF PATIENT NUCLEIC ACID, MULTIPLEX, EACH	\$ 5.16	\$ 5.16	9/1/2010
83902		MOLECULAR DIAGNOSTICS; REVERSE TRANSCRIPTION	\$ 5.16	\$ 5.16	9/1/2010
83903		MOLECULAR DIAGNOSTICS; MUTATION SCANNING, BY PHYSICAL PROPERTIES (EG, SINGLE	\$ 5.16	\$ 5.16	9/1/2010
83904		MOLECULAR DIAGNOSTICS; MUTATION IDENTIFICATION BY SEQUENCING, SINGLE SEGMENT,	\$ 5.16	\$ 5.16	9/1/2010
83907		MOLECULAR DIAGNOSTICS; LYSIS OF CELLS PRIOR TO NUCLEIC ACID EXTRACTION (EG,	\$ 16.75	\$ 16.75	9/1/2010
83908		MOLECULAR DIAGNOSTICS; SIGNAL AMPLIFICATION OF PATIENT NUCLEIC ACID, EACH	\$ 5.16	\$ 5.16	9/1/2010
83909		MOLECULAR DIAGNOSTICS; SEPARATION AND IDENTIFICATION BY HIGH RESOLUTION	\$ 5.16	\$ 5.16	9/1/2010
83912	26	NUCLEAR MOLECULAR DIAGNOSTICS; INTERPRETATION AND REPORT	\$ 5.03	\$ 5.03	9/1/2010
83912		NUCLEAR MOLECULAR DIAGNOSTICS; INTERPRETATION AND REPORT	\$ 14.71	\$ 14.71	9/1/2010
83913		MOLECULAR DIAGNOSTICS; RNA STABILIZATION	\$ 16.75	\$ 16.75	9/1/2010
83914		MUTATION IDENTIFICATION BY ENZYMATIC LIGATION OR PRIMER EXTENSION, SINGLE	\$ 5.16	\$ 5.16	9/1/2010
83915		5 NUCLEOTIDASE	\$ 13.99	\$ 13.99	9/1/2010
83916		OLIGOCLONAL IMMUNE (OLIGOCLONAL BANDS)	\$ 25.21	\$ 25.21	9/1/2010
83918		ORGANIC ACIDS; TOTAL, QUANTITATIVE, EACH SPECIMEN	\$ 20.65	\$ 20.65	9/1/2010
83919		ORGANIC ACIDS; QUALITATIVE, EACH SPECIMEN	\$ 20.65	\$ 20.65	9/1/2010
83921		ORGANIC ACID, SINGLE, QUANTITATIVE	\$ 20.65	\$ 20.65	9/1/2010
83925		OPIATES	\$ 24.41	\$ 24.41	9/1/2010
83930		OSMOLALITY BLOOD	\$ 8.30	\$ 8.30	9/1/2010
83935		OSMOLALITY	\$ 8.54	\$ 8.54	9/1/2010
83945		OXALATE	\$ 16.15	\$ 16.15	9/1/2010
83970		PARATHORMONE	\$ 51.77	\$ 51.77	9/1/2010
83986		PH BODY FLUID EXCEPT BLOOD	\$ 4.49	\$ 4.49	9/1/2010
83992		PHENCYCLIDINE	\$ 18.44	\$ 18.44	9/1/2010
83993		CALPROTECTIN, FECAL	\$ 24.61	\$ 24.61	9/1/2010
84022		PHENOTHIAZINE	\$ 19.53	\$ 19.53	9/1/2010
84030		PHENYLALANINE (PKU), BLOOD	\$ 6.91	\$ 6.91	9/1/2010
84060		PHOSPHATASE ACID	\$ 9.26	\$ 9.26	9/1/2010
84066		PHOSPHATASE ACID; PROSTATIC	\$ 12.12	\$ 12.12	9/1/2010
84075		PHOSPHATASE ALKALINE	\$ 6.49	\$ 6.49	9/1/2010
84078		PHOSPHATASE ALKALINE BLOOD HEAT STABLE	\$ 9.15	\$ 9.15	9/1/2010
84080		ALKALINE PHOSPHATASE ISOENZYME	\$ 18.55	\$ 18.55	9/1/2010
84081		PHOSPHATYDYLGLYCEROL	\$ 20.73	\$ 20.73	9/1/2010
84100		PHOSPHORUS INORGANIC (PHOSPHATE)	\$ 5.95	\$ 5.95	9/1/2010
84105		PHOSPHORUS (PHOSPHATE) URINE	\$ 6.49	\$ 6.49	9/1/2010
84110		PORPHOBILINOGEN URINE QUANTITATIVE	\$ 10.60	\$ 10.60	9/1/2010
84120		PORPHYRINS, URINE; QUANTITATION AND FRACTIONATION	\$ 18.45	\$ 18.45	9/1/2010
84132		POTASSIUM SERUM	\$ 5.76	\$ 5.76	9/1/2010
84133		POTASSIUM URINE	\$ 5.40	\$ 5.40	9/1/2010
84134		PREALBUMIN	\$ 18.30	\$ 18.30	9/1/2010
84135		PREGNANEDIOL	\$ 23.99	\$ 23.99	9/1/2010
84140		PREGNENOLONE	\$ 25.11	\$ 25.11	9/1/2010

**Laboratory Fee Schedule  
Provider Specialty 069**

CODE	MODE	Description	Medicaid Maximum Allowable		EFFECTIVE DATE
			FACILITY	NON-FACILITY	
84143		17-HYDROXYPREGNENOLONE	\$ 28.63	\$ 28.63	9/1/2010
84144		PROGESTERONE	\$ 26.17	\$ 26.17	9/1/2010
84145		PROCALCITONIN (PCT)	\$ 24.92	\$ 24.92	9/1/2010
84146		PROLACTIN	\$ 24.31	\$ 24.31	9/1/2010
84152		PROSTATE SPECIFIC ANTIGEN (PSA); COMPLEXED (DIRECT MEASUREMENT)	\$ 23.07	\$ 23.07	9/1/2010
84153		PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL	\$ 23.07	\$ 23.07	9/1/2010
84154		PROSTATE SPECIFIC ANTIGEN (PSA); FREE	\$ 23.07	\$ 23.07	9/1/2010
84155		PROTEIN; TOTAL, EXCEPT REFRACTOMETRY	\$ 4.60	\$ 4.60	9/1/2010
84156		PROTEIN, TOTAL, EXCEPT BY REFRACTOMETRY; URINE	\$ 4.60	\$ 4.60	9/1/2010
84157		PROTEIN; TOTAL, EXCEPT BY REFRACTOMETRY; OTHER SOURCE (EG, SYNOVIAL FLUID, CEREB	\$ 4.60	\$ 4.60	9/1/2010
84163		PREGNANCY-ASSOCIATED PLASMA PROTEIN-A (PAPP-A)	\$ 10.97	\$ 10.97	9/1/2010
84165		PROTEIN ELECTROPHORESIS	\$ 13.42	\$ 13.42	9/1/2010
84165	26	PROTEIN ELECTROPHORESIS	\$ 14.99	\$ 14.99	9/1/2010
84166		PROTEIN; ELECTROPHORETIC FRACTIONATION AND QUANTITATION, OTHER FLUIDS WITH	\$ 22.37	\$ 22.37	9/1/2010
84166	26	PROTEIN; ELECTROPHORETIC FRACTIONATION AND QUANTITATION, OTHER FLUIDS WITH	\$ 14.99	\$ 14.99	9/1/2010
84181		PROTEIN; WESTERN BLOT, W REPORT & INTERP	\$ 14.75	\$ 14.75	9/1/2010
84202		PROTOPORPHYRIN RBC QUANTITATIVE	\$ 18.00	\$ 18.00	9/1/2010
84206		PROINSULIN	\$ 22.34	\$ 22.34	9/1/2010
84207		PYRIDOXINE VITAMINE B-6	\$ 35.24	\$ 35.24	9/1/2010
84210		PYRUVATE	\$ 13.61	\$ 13.61	9/1/2010
84238		RECEPTOR ASSAY; NON-ENDOCRINE (SPECIFY RECEPTOR)	\$ 45.86	\$ 45.86	9/1/2010
84244		RENIN	\$ 27.58	\$ 27.58	9/1/2010
84252		RIBOFLAVIN	\$ 25.38	\$ 25.38	9/1/2010
84255		SELENIUM	\$ 32.02	\$ 32.02	9/1/2010
84260		SEROTONIN	\$ 20.43	\$ 20.43	9/1/2010
84270		SHBG	\$ 27.26	\$ 27.26	9/1/2010
84295		SODIUM BLOOD	\$ 6.04	\$ 6.04	9/1/2010
84300		SODIUM URINE	\$ 6.10	\$ 6.10	9/1/2010
84302		SODIUM; OTHER SOURCE	\$ 6.10	\$ 6.10	9/1/2010
84305		SOMATOMEDIN	\$ 17.39	\$ 17.39	9/1/2010
84307		SOMATOSTATIN	\$ 17.39	\$ 17.39	9/1/2010
84311		SPECTROPHOMETRY, NOT ELSEWHERE SPECIFIED	\$ 8.77	\$ 8.77	9/1/2010
84315		SPECIFIC GRAVITY CEXCE PT URINE	\$ 3.15	\$ 3.15	9/1/2010
84376		SUGARS (MON-, DI, AND OLIGOSACCHARIDES); SINGLE QUALITATIVE, EACH SPECIMEN	\$ 6.91	\$ 6.91	9/1/2010
84377		SUGARS (MON-, DI, AND OLIGOSACCHARIDES); MULTIPLE QUALITATIVE, EACH SPECIMEN	\$ 6.91	\$ 6.91	9/1/2010
84378		SUGARS (MON-, DI, AND OLIGOSACCHARIDES); SINGLE QUANTITATIVE, EACH SPECIMEN	\$ 14.45	\$ 14.45	9/1/2010
84392		SULFATE, URINE	\$ 5.96	\$ 5.96	9/1/2010
84402		TESTOSTERONE; FREE	\$ 31.93	\$ 31.93	9/1/2010
84403		TESTOSTERONE; TOTAL	\$ 32.39	\$ 32.39	9/1/2010
84425		THIAMINE	\$ 26.64	\$ 26.64	9/1/2010
84431		THROMBOXANE METABOLITE(S), INCLUDING THROMBOXANE IF PERFORMED, URINE	\$ 16.64	\$ 16.64	9/1/2010
84432		THYROGLOBULIN	\$ 20.14	\$ 20.14	9/1/2010
84436		THYROXINE; TOTAL	\$ 7.23	\$ 7.23	9/1/2010
84437		THYROXINE; REQUIRING ELUTION (EG, NEONATAL)	\$ 8.12	\$ 8.12	9/1/2010
84439		THYROXINE; FREE	\$ 11.32	\$ 11.32	9/1/2010
84442		TBG BY RIA	\$ 18.55	\$ 18.55	9/1/2010
84443		TSH	\$ 20.44	\$ 20.44	9/1/2010
84445		THYROID STIMULATING IMMUNE GLOBULINS (TSI)	\$ 63.79	\$ 63.79	9/1/2010
84446		VITAMIN E	\$ 17.79	\$ 17.79	9/1/2010
84449		TRANCORTIN (CORTISOL BINDING GLOBULIN)	\$ 22.58	\$ 22.58	9/1/2010
84450		TRANSFERASE; ASPARTATE AMINO (AST) (SGOT)	\$ 6.48	\$ 6.48	9/1/2010
84460		TRANSFERASE; ALANINE AMINO (ALT) (SGPT)	\$ 6.64	\$ 6.64	9/1/2010
84466		TRANSFERRIN	\$ 16.01	\$ 16.01	9/1/2010
84478		TRIGLYCERIDES	\$ 7.22	\$ 7.22	9/1/2010
84479		THYROID HORMONE (T3 OR T4) UPTAKE OR THYROID HORMONE BINDING RATIO (THBR)	\$ 7.48	\$ 7.48	9/1/2010
84480		TRIIODOTHYRONINE T3; TOTAL (TT-3)	\$ 17.79	\$ 17.79	9/1/2010
84481		TRIDOTHYRONINE (T-3); FREE	\$ 21.25	\$ 21.25	9/1/2010
84482		T-3; REVERSE	\$ 19.77	\$ 19.77	9/1/2010
84484		TROPONIN, QUANTITATIVE	\$ 12.34	\$ 12.34	9/1/2010
84490		TRYPSIN FECES QUANTITATIVE	\$ 9.54	\$ 9.54	9/1/2010
84520		UREA NITROGEN; QUANTITATIVE	\$ 4.94	\$ 4.94	9/1/2010
84540		LABORATORY SERVICES, ANALYSIS	\$ 5.96	\$ 5.96	9/1/2010
84545		UREA CLEARANCE	\$ 7.23	\$ 7.23	9/1/2010
84550		URIC ACID; BLOOD	\$ 5.66	\$ 5.66	9/1/2010
84560		URIC ACID; OTHER SOURCE	\$ 5.96	\$ 5.96	9/1/2010
84585		UMA	\$ 19.44	\$ 19.44	9/1/2010
84588		VASOPRESSIN (ANTIDIURETIC HORMONE, ADH)	\$ 42.58	\$ 42.58	9/1/2010
84590		VITAMIN A	\$ 14.54	\$ 14.54	9/1/2010
84597		VITAMIN K	\$ 17.19	\$ 17.19	9/1/2010
84600		VOLATILES	\$ 17.46	\$ 17.46	9/1/2010
84630		ZINC	\$ 14.28	\$ 14.28	9/1/2010
84681		C-PEPTIDE ANY METHOD	\$ 19.93	\$ 19.93	9/1/2010

**Laboratory Fee Schedule  
Provider Specialty 069**

CODE	MODE	Description	Medicaid Maximum Allowable		EFFECTIVE DATE
			FACILITY	NON-FACILITY	
84702		GONADOTROPIN CHORIONIC QUANTITATIVE	\$ 10.97	\$ 10.97	9/1/2010
84703		GONADOTROPIN CHORIONIC QUALITATIVE	\$ 9.42	\$ 9.42	9/1/2010
84704		GONADOTROPIN, CHORIONIC (HCG); FREE BETA CHAIN	\$ 10.97	\$ 10.97	9/1/2010
85002		BLEEDING TIME	\$ 5.64	\$ 5.64	9/1/2010
85004		BLOOD COUNT; AUTOMATED DIFFERENTIAL WBC COUNT	\$ 8.12	\$ 8.12	9/1/2010
85007		BLOOD COUNT DIFF WBC COUNT	\$ 4.32	\$ 4.32	9/1/2010
85009		DIFFERENTIAL WBC COUNT	\$ 4.66	\$ 4.66	9/1/2010
85014		BLOOD COUNT; OTHER THAN SPUN HEMATOCRIT	\$ 2.97	\$ 2.97	9/1/2010
85018		HEMOGLOBIN	\$ 2.97	\$ 2.97	9/1/2010
85025		BLOOD COUNT HEMOGRAM/PLATELET COUNT AUTO/AUTO COMP	\$ 9.75	\$ 9.75	9/1/2010
85027		BLOOD COUNT HEMOGRAM AUTOMATED W PLATELET COUNT	\$ 8.12	\$ 8.12	9/1/2010
85041		RBC	\$ 3.77	\$ 3.77	9/1/2010
85044		RETICULOCYTE COUNT	\$ 5.40	\$ 5.40	9/1/2010
85045		BLOOD COUNT, RETICULOCYTE COUNT, FLOW CYTOMETRY	\$ 5.02	\$ 5.02	9/1/2010
85048		WBC	\$ 3.19	\$ 3.19	9/1/2010
85049		BLOOD COUNT; PLATELET, AUTOMATED	\$ 5.61	\$ 5.61	9/1/2010
85060		BLOOD SMEAR, PERIPHERAL, INTERP BY PHYSICIAN	\$ 18.51	\$ 18.51	9/1/2010
85060	26	BLOOD SMEAR, PERIPHERAL, INTERP BY PHYSICIAN	\$ 13.31	\$ 13.31	9/1/2010
85097		BONE MARROW, SMEAR INTERPRETATION	\$ 38.51	\$ 69.53	9/1/2010
85097	26	BONE MARROW, SMEAR INTERPRETATION	\$ 29.98	\$ 60.21	9/1/2010
85210		CLOTTING FACTOR II PROTHROMBIN SPECIFIC	\$ 16.29	\$ 16.29	9/1/2010
85220		CLOTTING FACTOR V LABILE FACTOR	\$ 22.14	\$ 22.14	9/1/2010
85230		CLOTTING FACTOR VII	\$ 22.46	\$ 22.46	9/1/2010
85240		CLOTTING FACTOR VIII ONE STAGE	\$ 22.46	\$ 22.46	9/1/2010
85244		CLOTTING; FACTOR VIII RELATED ANTIGEN	\$ 25.61	\$ 25.61	9/1/2010
85245		CLOTTING; FACTOR 8	\$ 28.78	\$ 28.78	9/1/2010
85246		CLOTTING; FACTOR 8, VW FACTOR ANTIGEN	\$ 28.78	\$ 28.78	9/1/2010
85247		CLOTTING; FACTOR 8, MULTIMETRIC ANALYSIS	\$ 28.78	\$ 28.78	9/1/2010
85250		CLOTTING FACTOR IX	\$ 23.88	\$ 23.88	9/1/2010
85260		CLOTTING FACTOR X	\$ 22.46	\$ 22.46	9/1/2010
85270		CLOTTING FACTOR XI	\$ 22.46	\$ 22.46	9/1/2010
85280		CLOTTING FACTOR XII	\$ 24.28	\$ 24.28	9/1/2010
85291		CLOTTING FACTOR XIII FIBRIN STABILIZING SCREEN SOL	\$ 11.15	\$ 11.15	9/1/2010
85292		CLOTTING; FACTOR II PREKALLIKREIN ASSAY	\$ 23.75	\$ 23.75	9/1/2010
85300		CLOTTING INHIBITORS OR ANTICOAGULANTS ANTITHROMBIN	\$ 14.86	\$ 14.86	9/1/2010
85301		CLOTTING INHIBITORS; ANTITHROMBIN III, ANTIGEN ASS	\$ 13.56	\$ 13.56	9/1/2010
85302		CLOTTING INHIBITORS OR ANTICOAGULANTS; PROTEIN C, ANTIGEN	\$ 15.08	\$ 15.08	9/1/2010
85303		CLOTTING INHIBITORS OR ANTICOAG; PROTEIN C	\$ 17.34	\$ 17.34	9/1/2010
85305		CLOTTING INHIBITORS OR ANTICOAGULANTS; PROTEIN S, TOTAL	\$ 14.54	\$ 14.54	9/1/2010
85306		CLOTTING INHIBITORS OR ANTICOAG; PROTEIN S FREE	\$ 17.92	\$ 17.92	9/1/2010
85307		ACTIVATED PROTEIN C (APC) RESISTANCE ASSAY	\$ 17.92	\$ 17.92	9/1/2010
85335		FACTOR INHIBITOR TEST	\$ 16.15	\$ 16.15	9/1/2010
85347		COAGULATION TIME OTHER METHODS	\$ 5.34	\$ 5.34	9/1/2010
85362		FIBRIN DEGREDAATION PRODUCTS	\$ 8.63	\$ 8.63	9/1/2010
85378		FDP, D-DIMER; SEMIQUANTITATIVE	\$ 8.95	\$ 8.95	9/1/2010
85379		FDP, D-DIMER; QUANTITATIVE	\$ 11.55	\$ 11.55	9/1/2010
85384		FIBRINOGEN; ACTIVITY	\$ 10.65	\$ 10.65	9/1/2010
85385		FIBRINOGEN; ANTIGEN	\$ 10.65	\$ 10.65	9/1/2010
85410		FIBRINOLYTIC MECHANISMS ANTIPLASMIN	\$ 9.67	\$ 9.67	9/1/2010
85415		FIBRINOLYTIC FACTORS & INHIBITORS	\$ 21.56	\$ 21.56	9/1/2010
85420		FIBRINOLYTIC MECHANISMS PLASMINOGEN	\$ 8.20	\$ 8.20	9/1/2010
85421		PLASMINOGEN, ANTIGENIC ASSAY	\$ 12.78	\$ 12.78	9/1/2010
85441		HEINZ BODIES DIRECT	\$ 5.28	\$ 5.28	9/1/2010
85460		HEMOGLOBIN OR RBCS, FETAL, FOR FETOMATERNAL HEMORRHAGE;	\$ 9.45	\$ 9.45	9/1/2010
85520		HEPARIN ASSAY	\$ 16.42	\$ 16.42	9/1/2010
85540		LEUKOCYTE ALKALINE PHOSPHATASE	\$ 10.79	\$ 10.79	9/1/2010
85549		MURAMIDASE	\$ 23.53	\$ 23.53	9/1/2010
85597		PLATELET NEUTRALIZATION	\$ 22.55	\$ 22.55	9/1/2010
85610		PROTHROMBIN TIME	\$ 4.93	\$ 4.93	9/1/2010
85611		PROTHROMBIN TIME	\$ 4.94	\$ 4.94	9/1/2010
85613		RUSSELL VIPOR VENOM TIME; DULUTED	\$ 12.01	\$ 12.01	9/1/2010
85635		REPTILASE TEST	\$ 12.35	\$ 12.35	9/1/2010
85651		SEDIMENTATION RATE, ERYTHROCYTE, NON-AUTOMATED	\$ 4.45	\$ 4.45	9/1/2010
85652		SEDIMENTATION RATE, ERYTHROCYTE; AUTOMATED	\$ 3.38	\$ 3.38	9/1/2010
85660		SICKLING RBC REDUCTION SLIDE METHOD	\$ 6.93	\$ 6.93	9/1/2010
85670		THROMBIN TIME PLASMA	\$ 7.24	\$ 7.24	9/1/2010
85705		THROMBOPLASTIN INHIBITION; TISSUE	\$ 12.07	\$ 12.07	9/1/2010
85730		PTT	\$ 7.53	\$ 7.53	9/1/2010
85732		THROMBOPLASTIN TIME, PARTIAL (PTT); SUBSTITUTION, PLASMA FRACTIONS, EACH	\$ 8.12	\$ 8.12	9/1/2010
85810		VISCOSITY	\$ 12.72	\$ 12.72	9/1/2010
86000		AGGLUTINS FEBRILE EA	\$ 8.75	\$ 8.75	9/1/2010
86001		ALLERGEN SPECIFIC IGG QUANTITATIVE OR SEMIQUANTITATIVE, EACH ALLERGEN	\$ 6.55	\$ 6.55	9/1/2010

**Laboratory Fee Schedule  
Provider Specialty 069**

CODE	MODE	Description	Medicaid Maximum Allowable		EFFECTIVE DATE
			FACILITY	NON-FACILITY	
86003		ALLERGEN SPECIFIC IGE; QUANTITATIVE OR SEMIQUANTITATIVE, EACH ALLERGEN	\$ 6.55	\$ 6.55	9/1/2010
86005		ALLERGEN SPECIFIC IGE; QUALITATIVE, MULTIALLERGEN SCREEN (DIPSTICK, PADDLE OR	\$ 10.00	\$ 10.00	9/1/2010
86021		ANTIBODY IDENTIFICATION LEUKOCYTE ANTIBODIES	\$ 18.88	\$ 18.88	9/1/2010
86022		ANTIBODY IDENTIFICATION PLATELET ANTIBODIES	\$ 23.03	\$ 23.03	9/1/2010
86023		ANTIBODY ID PLATELET ASSOCIATED IMMUNOGLOBULIN	\$ 15.62	\$ 15.62	9/1/2010
86038		ANTINUCLEAR ANTIBODIES (ANA);	\$ 15.16	\$ 15.16	9/1/2010
86039		ANA; TITER	\$ 14.01	\$ 14.01	9/1/2010
86060		ASO TITER	\$ 9.15	\$ 9.15	9/1/2010
86063		ANTISTREPTOLYSIN SCREEN	\$ 7.24	\$ 7.24	9/1/2010
86078		BLOOD BANK IRREGULAR ANTIB INVESTIGATION OF TRANSF	\$ 38.60	\$ 40.88	9/1/2010
86140		CRP	\$ 6.49	\$ 6.49	9/1/2010
86141		C-REACTIVE PROTEIN; HIGH SENSITIVITY (HSCRIP)	\$ 16.24	\$ 16.24	9/1/2010
86146		BETA 2 GLYCOPROTEIN I ANTIBODY, EACH	\$ 18.20	\$ 18.20	9/1/2010
86147		CARDIOLIPIN (PHOSPHOLIPID) ANTIBODY, EACH IG CLASS	\$ 18.20	\$ 18.20	9/1/2010
86148		ANTI-PHOSPHATIDYLSERINE (PHOSPHOLIPID) ANTIBODY	\$ 18.72	\$ 18.72	9/1/2010
86157		COLD AGGULTININ; TITER	\$ 8.05	\$ 8.05	9/1/2010
86160		COMPLEMENT; ANTIGEN, EACH COMPONENT	\$ 15.06	\$ 15.06	9/1/2010
86161		COMPLEMENT; FUNCTIONAL ACTIVITY, EACH	\$ 15.06	\$ 15.06	9/1/2010
86162		COMPLEMENT TOTAL	\$ 25.48	\$ 25.48	9/1/2010
86200		CYCLIC CITRULLINATED PEPTIDE (CCP), ANTIBODY	\$ 16.24	\$ 16.24	9/1/2010
86215		ASH TITER	\$ 16.61	\$ 16.61	9/1/2010
86225		DEOXYRIBONUCLEIC ACID (DNA) ANTIBODY; NATIVE OR DOUBLE STRANDED	\$ 17.23	\$ 17.23	9/1/2010
86226		DNA ANTIBODY; SINGLE STRANDED	\$ 15.19	\$ 15.19	9/1/2010
86235		EXTRACTABLE NUCLEAR ANTIGEN ANTIBODY	\$ 22.49	\$ 22.49	9/1/2010
86255		FLUORESCENT NONINFECTIOUS AGENT ANTIBODY; SCREEN, EACH ANTIBODY	\$ 15.11	\$ 15.11	9/1/2010
86256		FLOURESCENT ANTIBODY TITER	\$ 15.11	\$ 15.11	9/1/2010
86277		GROWTH HORMONE, HUMAN (HGH), ANTIBODY	\$ 19.74	\$ 19.74	9/1/2010
86300		IMMUNOASSAY FOR TUMOR ANTIGEN, QUANTITATIVE; CA 15-3 (27.29)	\$ 26.09	\$ 26.09	9/1/2010
86301		IMMUNOASSAY FOR TUMOR ANTIGEN, QUANTITATIVE; CA 19-9	\$ 26.09	\$ 26.09	9/1/2010
86304		IMMUNOASSAY FOR TUMOR ANTIGEN, QUANTITATIVE; CA 125	\$ 26.09	\$ 26.09	9/1/2010
86308		HETEROPHILE ANTIBODIES; SCREENING	\$ 6.49	\$ 6.49	9/1/2010
86309		HETEROPHILE ANTIBODIES; TITER	\$ 8.12	\$ 8.12	9/1/2010
86316		IMMUNOASSAY FOR TUMOR ANTIGEN; OTHER ANTIGEN, QUANTITATIVE (EG, CA 50, 72-4,	\$ 26.09	\$ 26.09	9/1/2010
86317		IMMUNOASSAY FOR INFECTIOUS AGENT ANTIBODY, QUANTITATIVE, NOT OTHERWISE SPECIFIED	\$ 18.20	\$ 18.20	9/1/2010
86329		IMMUNODIFFUSION, NOT ELSEWHERE SPECIFIED	\$ 17.61	\$ 17.61	9/1/2010
86331		GEL DIFFUSION QUALITATIVE OUCHTERLONY	\$ 14.24	\$ 14.24	9/1/2010
86332		IMMUNE COMPLEX ASSAY	\$ 30.57	\$ 30.57	9/1/2010
86334		IMMUNOFIXATION ELECTROPHORESIS	\$ 28.02	\$ 28.02	9/1/2010
86334	26	IMMUNOFIXATION ELECTROPHORESIS	\$ 15.27	\$ 15.27	9/1/2010
86335		IMMUNOFIXATION ELECTROPHORESIS; OTHER FLUIDS WITH CONCENTRATION (EG, URINE, CSF)	\$ 36.81	\$ 36.81	9/1/2010
86335	26	IMMUNOFIXATION ELECTROPHORESIS; OTHER FLUIDS WITH CONCENTRATION (EG, URINE, CSF)	\$ 14.99	\$ 14.99	9/1/2010
86337		INSULIN ANTIBODIES	\$ 26.86	\$ 26.86	9/1/2010
86340		INTRINSIC FACTOR ANTIBODIES	\$ 18.90	\$ 18.90	9/1/2010
86341		ISLET CELL ANTIBODY	\$ 16.85	\$ 16.85	9/1/2010
86355		B CELLS, TOTAL COUNT	\$ 47.31	\$ 47.31	9/1/2010
86356		MONONUCLEAR CELL ANTIGEN, QUANTITATIVE (EG, FLOW CYTOMETRY), NOT OTHERWISE	\$ 33.58	\$ 33.58	9/1/2010
86357		NATURAL KILLER (NK) CELLS, TOTAL COUNT	\$ 47.31	\$ 47.31	9/1/2010
86359		T CELLS;	\$ 47.31	\$ 47.31	9/1/2010
86360		T CELLS; ABSOLUTE CD4 AND CD8 COUNT, INCLUDING RATIO	\$ 58.93	\$ 58.93	9/1/2010
86361		T CELLS; ABSOLUTE CD4 COUNT	\$ 33.58	\$ 33.58	9/1/2010
86367		STEM CELLS (IE, CD34), TOTAL COUNT	\$ 47.31	\$ 47.31	9/1/2010
86376		MICROSOMAL ANTIBODIES (EG, THYROID OR LIVER-KIDNEY), EACH	\$ 17.38	\$ 17.38	9/1/2010
86403		PARTICLE AGGLUTINATION; SCREEN, EACH ANTIBODY	\$ 12.79	\$ 12.79	9/1/2010
86406		PARTICLE AGGLUTINATION;	\$ 13.35	\$ 13.35	9/1/2010
86430		RHEUMATOID FACTOR; QUALITATIVE	\$ 7.12	\$ 7.12	9/1/2010
86431		RHEUMATOID FACTOR; QUANTITATIVE	\$ 7.12	\$ 7.12	9/1/2010
86480		TUBERCULOSIS TEST, CELL MEDIATED IMMUNITY MEASUREMENT OF GAMMA INTERFERON	\$ 77.74	\$ 77.74	9/1/2010
86580		SENSITIVITY TEST TUBERCULOSIS	\$ 5.51	\$ 5.51	9/1/2010
86592		SYPHILIS, PRECIPITATION OR FLOCCULATION TESTS	\$ 5.35	\$ 5.35	9/1/2010
86593		SYPHILLIS PRECIPITATION FLOCCULATION TEST QUANTITI	\$ 5.53	\$ 5.53	9/1/2010
86602		ANTIBODY; ACTINOMYCES	\$ 12.77	\$ 12.77	9/1/2010
86606		ANTIBODY; ASPIRGILLUS	\$ 15.99	\$ 15.99	9/1/2010
86609		ANTIBODY; BACTERIUM, NOT ELSEWHERE SPECIFIED	\$ 15.99	\$ 15.99	9/1/2010
86611		ANTIBODY; BARTONELLA	\$ 12.77	\$ 12.77	9/1/2010
86612		ANTIBODY; BLASTOMYCES	\$ 15.99	\$ 15.99	9/1/2010
86615		ANTIBODY; BORDETELLA	\$ 16.54	\$ 16.54	9/1/2010
86617		ANTIBODY;	\$ 14.85	\$ 14.85	9/1/2010
86618		ANTIBODY; LYME DISEASE	\$ 18.20	\$ 18.20	9/1/2010
86622		ANTIBODY; BRUCELLA	\$ 9.45	\$ 9.45	9/1/2010
86628		ANTIBODY; CANDIDA	\$ 14.24	\$ 14.24	9/1/2010
86631		ANTIBODY; CHLAMYDIA	\$ 14.83	\$ 14.83	9/1/2010
86632		ANTIBODY; CHLAMIDA, IGM	\$ 15.92	\$ 15.92	9/1/2010

**Labatory Fee Schedule  
Provider Specialty 069**

CODE	MODE	Description	Medicaid Maximum Allowable		EFFECTIVE DATE
			FACILITY	NON-FACILITY	
86635		ANTIBODY, COCCIDIOIDES	\$ 14.39	\$ 14.39	9/1/2010
86638		ANTIBODY; Q FEVER	\$ 15.21	\$ 15.21	9/1/2010
86644		ANTIBODY; CMV	\$ 18.02	\$ 18.02	9/1/2010
86645		ANTIBODY; CMV, IGM	\$ 18.20	\$ 18.20	9/1/2010
86648		ANTIBODY; DIPHTHERIA	\$ 18.20	\$ 18.20	9/1/2010
86651		ANTIBODY; ENCEPHALITIS, CALIFORNIA	\$ 16.54	\$ 16.54	9/1/2010
86652		ANTIBODY; ENCEPHALITIS, EASTERN EQUINE	\$ 16.54	\$ 16.54	9/1/2010
86653		ANTIBODY; ENCEPHALITIS ST, LOUIS	\$ 16.54	\$ 16.54	9/1/2010
86654		ANTIBODY; ENCEPHALITIS WESTERN EQUINE	\$ 16.54	\$ 16.54	9/1/2010
86658		ANTIBODY; ENTEROVIRUS	\$ 15.99	\$ 15.99	9/1/2010
86663		ANTIBODY; EPSTEIN-BARR, EARLY ANTIGEN	\$ 16.45	\$ 16.45	9/1/2010
86664		ANTIBODY; EPSTEIN-BARR, NUCLEAR ANTIGEN	\$ 18.20	\$ 18.20	9/1/2010
86665		ANTIBODY; EPSTEIN-BARR VIRAL CAPSID	\$ 20.38	\$ 20.38	9/1/2010
86666		ANTIBODY; EHRlichia	\$ 12.77	\$ 12.77	9/1/2010
86671		ANTIBODY; FUNGUS	\$ 15.38	\$ 15.38	9/1/2010
86677		ANTIBODY; HELICOBACTER PYLOUI	\$ 18.20	\$ 18.20	9/1/2010
86684		ANTIBODY; HEMOPHILUS INFLUENZA	\$ 18.20	\$ 18.20	9/1/2010
86689		HTLV I, ANTIBODY DETECTION; CONFIRMATORY TEST	\$ 24.29	\$ 24.29	9/1/2010
86694		ANTIBODY; HERPES SIMPLEX, NON-SPECIFIC TYPE TEST	\$ 18.02	\$ 18.02	9/1/2010
86695		ANTIBODY; HERPES SIMPLEX, TYPE I	\$ 16.54	\$ 16.54	9/1/2010
86696		ANTIBODY; HERPES SIMPLEX, TYPE 2	\$ 24.29	\$ 24.29	9/1/2010
86698		ANTIBODY; HISTOPLASM	\$ 15.68	\$ 15.68	9/1/2010
86701		ANTIBODY; HIV-1	\$ 11.14	\$ 11.14	9/1/2010
86702		ANTIBODY; HIV-2	\$ 14.75	\$ 14.75	9/1/2010
86703		ANTIBODY; HIV-1 & HIV-2, SINGLE ASSAY	\$ 14.75	\$ 14.75	9/1/2010
86704		HEPATITIS B CORE ANTIBODY (HBCAB), TOTAL	\$ 14.60	\$ 14.60	9/1/2010
86705		HEPATITIS B CORE ANTIBODY (HBCAB); IGM ANTIBODY	\$ 14.76	\$ 14.76	9/1/2010
86706		HEPATITIS B SURFACE ANTIBODY (HBSAB)	\$ 13.48	\$ 13.48	9/1/2010
86707		HEPATITIS BE ANTIBODY (HBEAB)	\$ 14.51	\$ 14.51	9/1/2010
86708		HEPATITIS A ANTIBODY (HAAB), TOTAL	\$ 15.54	\$ 15.54	9/1/2010
86709		HEPATITIS A ANTIBODY (HAAB); IGM ANTIBODY	\$ 14.12	\$ 14.12	9/1/2010
86710		ANTIBODY, INFLUENZA VIRUS	\$ 17.01	\$ 17.01	9/1/2010
86713		ANTIBODY; LEGIONELLA	\$ 19.20	\$ 19.20	9/1/2010
86717		ANTIBODY; LEISHMANIA	\$ 10.52	\$ 10.52	9/1/2010
86720		ANTIBODY; LEPTOSPIRA	\$ 12.37	\$ 12.37	9/1/2010
86735		ANTIBODY; MUMPS	\$ 16.37	\$ 16.37	9/1/2010
86738		ANTIBODY; MYCOPLASMA	\$ 16.61	\$ 16.61	9/1/2010
86747		ANTIBODY; PARVOVIRUS	\$ 18.20	\$ 18.20	9/1/2010
86753		ANTIBODY; PROTOZOA, NOT ELSEWHERE SPECIFIED	\$ 10.52	\$ 10.52	9/1/2010
86756		ANTIBODY; RESPIRATORY SYNCYTIAL VIRUS	\$ 16.17	\$ 16.17	9/1/2010
86757		ANTIBODY; RICKETTSIA	\$ 24.29	\$ 24.29	9/1/2010
86762		ANTIBODY; RUBELLA	\$ 18.02	\$ 18.02	9/1/2010
86765		ANTIBODY; RUBELLA	\$ 16.16	\$ 16.16	9/1/2010
86774		ANTIBODY; TETANUS	\$ 18.20	\$ 18.20	9/1/2010
86777		ANTIBODY; TOXOPLASMA	\$ 18.02	\$ 18.02	9/1/2010
86778		ANTIBODY; TOXOPLASMA, IGM	\$ 18.06	\$ 18.06	9/1/2010
86780		TREPONEMA PALLIDUM	\$ 17.03	\$ 17.03	9/1/2010
86787		ANTIBODY; VARICELLA-ZOSTER	\$ 16.16	\$ 16.16	9/1/2010
86788		ANTIBODY; WEST NILE VIRUS, IGM	\$ 18.20	\$ 18.20	9/1/2010
86789		ANTIBODY; WEST NILE VIRUS	\$ 18.02	\$ 18.02	9/1/2010
86790		ANTIBODY; VIRUS, NOT ELSEWHERE SPECIFIED	\$ 16.16	\$ 16.16	9/1/2010
86800		THYROGLOBULIN ANTIBODY	\$ 19.95	\$ 19.95	9/1/2010
86803		HEPATITIS C ANTIBODY;	\$ 17.90	\$ 17.90	9/1/2010
86804		HEPATITIS C ANTIBODY; CONFIRMATORY TEST (EG, IMMUNOBLOT)	\$ 14.85	\$ 14.85	9/1/2010
86805		LYMPHOCYTOTOXICITY ASSAY, VISUAL XM; W/ TITRATION	\$ 65.58	\$ 65.58	9/1/2010
86807		SERUM SCREENING FOR CYTOTOXIC PRA; STANDARD METHOD	\$ 49.63	\$ 49.63	9/1/2010
86812		TISSUE TYPING HLA TYPING A,B, OR C SINGLE ANTIGEN	\$ 32.37	\$ 32.37	9/1/2010
86825		HUMAN LEUKOCYTE ANTIGEN (HLA) CROSSMATCH, NON-CYTOTOXIC (EG, USING FLOW	\$ 103.28	\$ 103.28	9/1/2010
86826		HUMAN LEUKOCYTE ANTIGEN (HLA) CROSSMATCH, NON-CYTOTOXIC (EG, USING FLOW	\$ 34.43	\$ 34.43	9/1/2010
86850		ANTIBODY SCREEN, RBC, EACH SERUM TECHNIQUE	\$ 14.61	\$ 14.61	9/1/2010
86870		ANTIBODY ID, EACH PANEL FOR EACH SERUM TECHNIQUE	\$ 25.80	\$ 25.80	9/1/2010
86880		COOMBS TEST; DIRECT, EACH ANTISERUM	\$ 6.74	\$ 6.74	9/1/2010
86886		COOMBS TEST, INDIRECT TITER, EACH ANTISERUM	\$ 6.49	\$ 6.49	9/1/2010
86900		BLOOD TYPING; ABO	\$ 3.74	\$ 3.74	9/1/2010
86901		BLOOD TYPING; RH (D)	\$ 3.74	\$ 3.74	9/1/2010
86905		BLOOD TYPING; RBC ANTIGENS, EACH	\$ 4.79	\$ 4.79	9/1/2010
86906		BLOOD TYPING; RH PHENOTYPING, COMPLETE	\$ 9.73	\$ 9.73	9/1/2010
86940		HEMOLYSINS/AGGLUTININS, AUTO, SCREEN, EACH	\$ 10.29	\$ 10.29	9/1/2010
87015		CONCENTRATION (ANY TYPE), FOR INFECTIOUS AGENTS	\$ 8.38	\$ 8.38	9/1/2010
87040		CULTURE, BACTERIAL; BLOOD, WITH ISOLATION AND PRESUMPTIVE IDENTIFICATION OF	\$ 12.94	\$ 12.94	9/1/2010
87045		CULTURE, BACTERIAL; FECES, WITH ISOLATION AND PRELIMINARY EXAMINATION (EG, KIA,	\$ 11.83	\$ 11.83	9/1/2010
87046		CULTURE, BACTERIAL; STOOL, ADDITIONAL PATHOGENS, ISOLATION AND PRELIMINARY	\$ 11.83	\$ 11.83	9/1/2010



**Laboratory Fee Schedule  
Provider Specialty 069**

CODE	MODE	Description	Medicaid Maximum Allowable		EFFECTIVE DATE
			FACILITY	NON-FACILITY	
87070		CULTURE, BACTERIAL; ANY OTHER SOURCE EXCEPT URINE, BLOOD OR STOOL, WITH	\$ 10.80	\$ 10.80	9/1/2010
87071		CULTURE, BACTERIAL; QUANTITATIVE, AEROBIC WITH ISOLATION AND PRESUMPTIVE	\$ 11.83	\$ 11.83	9/1/2010
87073		CULTURE, BACTERIAL; QUANTITATIVE, ANAEROBIC WITH ISOLATION AND PRESUMPTIVE	\$ 11.83	\$ 11.83	9/1/2010
87075		CULTURE, BACTERIAL; ANY SOURCE, ANAEROBIC WITH ISOLATION AND PRESUMPTIVE	\$ 11.87	\$ 11.87	9/1/2010
87076		CULTURE, BACTERIAL; ANAEROBIC ISOLATE, ADDITIONAL METHODS REQUIRED FOR	\$ 10.13	\$ 10.13	9/1/2010
87077		CULTURE, BACTERIAL; AEROBIC ISOLATE, ADDITIONAL METHODS REQUIRED FOR DEFINITIVE	\$ 10.13	\$ 10.13	9/1/2010
87081		CULTURE, PRESUMPTIVE, PATHOGENIC ORGANISMS, SCREENING ONLY;	\$ 7.23	\$ 7.23	9/1/2010
87084		CULTURE W COLONY ESTIMATION FROM DENSITY CHART INC	\$ 10.80	\$ 10.80	9/1/2010
87086		CULTURE, BACTERIAL; QUANTITATIVE COLONY COUNT, URINE	\$ 10.12	\$ 10.12	9/1/2010
87088		CULTURE, BACTERIAL; WITH ISOLATION AND PRESUMPTIVE IDENTIFICATION OF ISOLATES,	\$ 10.15	\$ 10.15	9/1/2010
87101		CULTURE, FUNGI (MOLD OR YEAST) ISOLATION, WITH PRESUMPTIVE IDENTIFICATION OF	\$ 9.67	\$ 9.67	9/1/2010
87102		CULTURE FUNGI ISOLATION OTHER SOURCE	\$ 10.54	\$ 10.54	9/1/2010
87103		BLOOD CULTURE FOR FUNGI	\$ 11.32	\$ 11.32	9/1/2010
87106		CULTURE, FUNGI, DEFINITIVE IDENTIFICATION, EACH ORGANISM; YEAST	\$ 12.94	\$ 12.94	9/1/2010
87107		CULTURE, FUNGI, DEFINITIVE IDENTIFICATION, EACH ORGANISM; MOLD	\$ 12.94	\$ 12.94	9/1/2010
87109		CULTURE MYCOPLASM ANY SOURCE	\$ 19.31	\$ 19.31	9/1/2010
87110		CULTURE, CHLAMYDIA, ANY SOURCE	\$ 24.57	\$ 24.57	9/1/2010
87116		CULTURE, TUBERCLE OR OTHER ACID-FAST BACILLI (EG, TB, AFB, MYCOBACTERIA) ANY	\$ 13.55	\$ 13.55	9/1/2010
87140		CULTURE, TYPING; IMMUNOFLUORESCENT METHOD, EACH ANTISERUM	\$ 6.99	\$ 6.99	9/1/2010
87143		CULTURE, TYPING; GAS LIQUID CHROMATOGRAPHY (GLC) OR HIGH PRESSURE LIQUID	\$ 15.71	\$ 15.71	9/1/2010
87147		CULTURE, TYPING; IMMUNOLOGIC METHOD, OTHER THAN IMMUNOFLUORESCENCE (EG,	\$ 6.49	\$ 6.49	9/1/2010
87149		CULTURE, TYPING; IDENTIFICATION BY NUCLEIC ACID PROBE	\$ 25.16	\$ 25.16	9/1/2010
87150		CULTURE, TYPING; IDENTIFICATION BY NUCLEIC ACID (DNA OR RNA) PROBE, AMPLIFIED	\$ 31.53	\$ 31.53	9/1/2010
87153		CULTURE, TYPING; IDENTIFICATION BY NUCLEIC ACID SEQUENCING METHOD, EACH ISOLATE	\$ 76.08	\$ 76.08	9/1/2010
87158		CULTURE TYPING OTHER METHODS	\$ 6.56	\$ 6.56	9/1/2010
87169		MACROSCOPIC EXAMINATION; PARASITE	\$ 4.78	\$ 4.78	9/1/2010
87172		PINWORM EXAM (EG, CELLOPHANE TAPE PREP)	\$ 4.78	\$ 4.78	9/1/2010
87176		HOMOGENIZATION, TISSUE, FOR CULTURE	\$ 7.38	\$ 7.38	9/1/2010
87177		OVA AND PARASITES	\$ 11.16	\$ 11.16	9/1/2010
87181		SUSCEPTIBILITY STUDIES, ANTIMICROBIAL AGENT; AGAR DILUTION METHOD, PER AGENT	\$ 5.96	\$ 5.96	9/1/2010
87184		SUSCEPTIBILITY STUDIES, ANTIMICROBIAL AGENT; DISK METHOD, PER PLATE (12 OR	\$ 8.64	\$ 8.64	9/1/2010
87185		SUSCEPTIBILITY STUDIES, ANTIMICROBIAL AGENT; ENZYME DETECTION (EG, BETA	\$ 5.96	\$ 5.96	9/1/2010
87186		SUSCEPTIBILITY STUDIES, ANTIMICROBIAL AGENT; MICRODILUTION OR AGAR DILUTION	\$ 10.84	\$ 10.84	9/1/2010
87188		SUSCEPTIBILITY STUDIES, ANTIMICROBIAL AGENT; MACROBROTH DILUTION METHOD, EACH	\$ 8.33	\$ 8.33	9/1/2010
87190		SUSCEPTIBILITY STUDIES, ANTIMICROBIAL AGENT; MYCOBACTERIA, PROPORTION METHOD,	\$ 7.09	\$ 7.09	9/1/2010
87205		SMEAR, PRIMARY SOURCE WITH INTERPRETATION; GRAM OR GIEMSA STAIN FOR BACTERIA,	\$ 5.35	\$ 5.35	9/1/2010
87206		SMEAR, PRIMARY SOURCE WITH INTERPRETATION; FLUORESCENT AND/OR ACID FAST STAIN	\$ 6.74	\$ 6.74	9/1/2010
87207		SMEAR, PRIMARY SOURCE WITH INTERPRETATION; SPECIAL STAIN FOR INCLUSION BODIES	\$ 7.52	\$ 7.52	9/1/2010
87209		SMEAR, PRIMARY SOURCE WITH INTERPRETATION; COMPLEX SPECIAL STAIN (EG,	\$ 22.54	\$ 22.54	9/1/2010
87210		SMEAR, PRIMARY SOURCE WITH INTERPRETATION; WET MOUNT FOR INFECTIOUS AGENTS (EG,	\$ 4.78	\$ 4.78	9/1/2010
87220		TISSUE EXAMINATION BY KOH SLIDE OF SAMPLES FROM SKIN, HAIR, OR NAILS FOR FUNGI	\$ 5.35	\$ 5.35	9/1/2010
87230		TISSUE CULTURE LYMPHOCYTE	\$ 24.77	\$ 24.77	9/1/2010
87252		VIRUS ISOLATION; TISSUE CULTURE INOCULATION, OBSERVATION, AND PRESUMPTIVE	\$ 20.43	\$ 20.43	9/1/2010
87253		VIRUS ISOLATION; TISSUE CULTURE, ADDITIONAL STUDIES OR DEFINITIVE	\$ 20.43	\$ 20.43	9/1/2010
87254		VIRUS ISOLATION; SHELL VIAL, INCLUDES IDENTIFICATION WITH IMMUNOFLUORESCENCE	\$ 20.43	\$ 20.43	9/1/2010
87255		VIRUS ISOLATION; INCLUDING IDENTIFICATION BY NON-IMMUNOLOGIC METHOD, OTHER THAN	\$ 30.65	\$ 30.65	9/1/2010
87260		INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOFLUORESCENT TECHNIQUE; ADENOVIRUS	\$ 14.37	\$ 14.37	9/1/2010
87265		INFECTIOUS AGENT ANTIGEN DETECTION BY DIRECT FLUORESCENT ANTIBODY TECHNIQUE;	\$ 14.37	\$ 14.37	9/1/2010
87269		INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOFLUORESCENT TECHNIQUE, GIARDIA	\$ 14.37	\$ 14.37	9/1/2010
87272		INFECTIOUS AGENT ANTIGEN DETECTION BY DIRECT FLUORESCENT ANTIBODY TECHNIQUE;	\$ 14.37	\$ 14.37	9/1/2010
87275		INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOFLUORESCENT TECHNIQUE; INFLUENZA B	\$ 14.37	\$ 14.37	9/1/2010
87276		INFECTIOUS AGENT ANTIGEN DETECTION BY DIRECT FLUORESCENT ANTIBODY TECHNIQUE;	\$ 14.37	\$ 14.37	9/1/2010
87278		INFECTIOUS AGENT ANTIGEN DETECTION BY DIRECT FLUORESCENT ANTIBODY TECHNIQUE;	\$ 14.37	\$ 14.37	9/1/2010
87280		INFECTIOUS AGENT ANTIGEN DETECTION BY DIRECT FLUORESCENT ANTIBODY TECHNIQUE;	\$ 14.37	\$ 14.37	9/1/2010
87285		INFECTIOUS AGENT ANTIGEN DETECTION BY DIRECT FLUORESCENT ANTIBODY TECHNIQUE;	\$ 14.37	\$ 14.37	9/1/2010
87290		INFECTIOUS AGENT ANTIGEN DETECTION BY DIRECT FLUORESCENT ANTIBODY TECHNIQUE;	\$ 14.37	\$ 14.37	9/1/2010
87300		INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOFLUORESCENT TECHNIQUE, POLYVALENT	\$ 14.37	\$ 14.37	9/1/2010
87301		INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE	\$ 14.37	\$ 14.37	9/1/2010
87324		INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE	\$ 14.37	\$ 14.37	9/1/2010
87328		INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE	\$ 14.37	\$ 14.37	9/1/2010
87329		INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE	\$ 14.37	\$ 14.37	9/1/2010
87335		INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE	\$ 14.37	\$ 14.37	9/1/2010
87336		INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE	\$ 14.37	\$ 14.37	9/1/2010
87338		INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE	\$ 18.04	\$ 18.04	9/1/2010
87340		INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE	\$ 11.67	\$ 11.67	9/1/2010
87341		INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE	\$ 11.67	\$ 11.67	9/1/2010
87350		INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE	\$ 13.88	\$ 13.88	9/1/2010
87380		INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE	\$ 20.60	\$ 20.60	9/1/2010
87390		INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE	\$ 22.13	\$ 22.13	9/1/2010
87400		INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE	\$ 14.37	\$ 14.37	9/1/2010
87420		INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE	\$ 14.37	\$ 14.37	9/1/2010
87425		INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE	\$ 14.37	\$ 14.37	9/1/2010

**Laboratory Fee Schedule  
Provider Specialty 069**

CODE	MODE	Description	Medicaid Maximum Allowable		EFFECTIVE DATE
			FACILITY	NON-FACILITY	
87427		INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE	\$ 14.37	\$ 14.37	9/1/2010
87430		INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE	\$ 14.37	\$ 14.37	9/1/2010
87449		INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE QUALITATIVE	\$ 14.37	\$ 14.37	9/1/2010
87471		INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); BARTONELLA HENSELAE	\$ 30.76	\$ 30.76	9/1/2010
87476		INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); BORRELIA BURGDORFERI,	\$ 30.76	\$ 30.76	9/1/2010
87480		INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); CANDIDA SPECIES,	\$ 25.16	\$ 25.16	9/1/2010
87481		INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); CANDIDA SPECIES,	\$ 30.76	\$ 30.76	9/1/2010
87490		INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); CHLAMYDIA TRACHOMATIS,	\$ 25.16	\$ 25.16	9/1/2010
87491		INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); CHLAMYDIA TRACHOMATIS,	\$ 30.76	\$ 30.76	9/1/2010
87492		INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); CHLAMYDIA TRACHOMATIS,	\$ 40.85	\$ 40.85	9/1/2010
87493		CLOSTRIDIUM DIFFICILE, TOXIN GENE(S), AMPLIFIED PROBE TECHNIQUE	\$ 31.53	\$ 31.53	9/1/2010
87496		INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); CYTOMEGALOVIRUS,	\$ 30.76	\$ 30.76	9/1/2010
87497		INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); CYTOMEGALOVIRUS,	\$ 40.85	\$ 40.85	9/1/2010
87498		INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); ENTEROVIRUS, AMPLIFIED	\$ 30.76	\$ 30.76	9/1/2010
87510		INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); GARDNERELLA VAGINALIS,	\$ 25.16	\$ 25.16	9/1/2010
87511		INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); GARDNERELLA VAGINALIS,	\$ 30.76	\$ 30.76	9/1/2010
87516		INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); HEPATITIS B VIRUS,	\$ 30.76	\$ 30.76	9/1/2010
87517		INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); HEPATITIS B VIRUS,	\$ 40.85	\$ 40.85	9/1/2010
87521		INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); HEPATITIS C, AMPLIFIED	\$ 30.76	\$ 30.76	9/1/2010
87525		INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); HEPATITIS G, DIRECT	\$ 25.16	\$ 25.16	9/1/2010
87529		INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); HERPES SIMPLEX VIRUS,	\$ 30.76	\$ 30.76	9/1/2010
87530		INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); HERPES SIMPLEX VIRUS,	\$ 40.85	\$ 40.85	9/1/2010
87536		INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); HIV-1, QUANTIFICATION	\$ 66.68	\$ 66.68	9/1/2010
87540		INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); LEGIONELLA	\$ 25.16	\$ 25.16	9/1/2010
87590		INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); NEISSERIA GONORRHOEAE,	\$ 25.16	\$ 25.16	9/1/2010
87591		INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); NEISSERIA GONORRHOEAE,	\$ 30.76	\$ 30.76	9/1/2010
87621		INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); PAPILLOMAVIRUS, HUMAN,	\$ 30.76	\$ 30.76	9/1/2010
87641		INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); STAPHYLOCOCCUS AUREUS,	\$ 30.76	\$ 30.76	9/1/2010
87650		INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); STREPTOCOCCUS, GROUP	\$ 25.16	\$ 25.16	9/1/2010
87653		INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); STREPTOCOCCUS, GROUP	\$ 30.76	\$ 30.76	9/1/2010
87660		INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); TRICHOMONAS VAGINALIS,	\$ 25.16	\$ 25.16	9/1/2010
87798		INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA), NOT OTHERWISE	\$ 30.76	\$ 30.76	9/1/2010
87799		INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA), NOT OTHERWISE	\$ 40.85	\$ 40.85	9/1/2010
87800		INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA), MULTIPLE ORGANISMS;	\$ 50.30	\$ 50.30	9/1/2010
87801		INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA), MULTIPLE ORGANISMS;	\$ 61.51	\$ 61.51	9/1/2010
87802		INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOASSAY WITH DIRECT OPTICAL OBSERVATIO	\$ 14.37	\$ 14.37	9/1/2010
87804		INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOASSAY WITH DIRECT OPTICAL OBSERVATIO	\$ 14.37	\$ 14.37	9/1/2010
87807		INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOASSAY WITH DIRECT OPTICAL	\$ 14.37	\$ 14.37	9/1/2010
87880		INFECTIOUS AGENT DETECTION BY IMMUNOASSAY WITH DIRECT OPTICAL OBSERVATION;	\$ 14.37	\$ 14.37	9/1/2010
87899		INFECTIOUS AGENT DETECTION BY IMMUNOASSAY WITH DIRECT OPTICAL OBSERVATION; NOT	\$ 14.37	\$ 14.37	9/1/2010
87900		INFECTIOUS AGENT DRUG SUSCEPTIBILITY PHENOTYPE PREDICTION USING REGULARLY	\$ 102.16	\$ 102.16	9/1/2010
87901		INFECTIOUS AGENT GENOTYPE ANALYSIS BY NUCLEIC ACID (DNA OR RNA), HIV 1, REVERSE	\$ 97.90	\$ 97.90	9/1/2010
87902		INFECTIOUS AGENT GENOTYPE ANALYSIS BY NUCLEIC ACID (DNA OR RNA); HEPATITIS C	\$ 97.90	\$ 97.90	9/1/2010
87903		INFECTIOUS AGENT PHENOTYPE ANALYSIS BY NUCLEIC ACID (DNA OR RNA) WITH DRUG	\$ 341.37	\$ 341.37	9/1/2010
87904		INFECTIOUS AGENT PHENOTYPE ANALYSIS BY NUCLEIC ACID (DNA OR RNA) WITH DRUG	\$ 20.43	\$ 20.43	9/1/2010
88104		CYTOPATHOLOGY,FLD,WASH OR BRUSH, EXCPT CERV OR VAG	\$ 48.73	\$ 48.73	9/1/2010
88104	26	CYTOPATHOLOGY,FLD,WASH OR BRUSH, EXCPT CERV OR VAG	\$ 22.74	\$ 22.74	9/1/2010
88107		CYTOPATHOLOGY, CONCENTRATION TECHNIQUE, SMEARS AND INTERPRETATION (EG,	\$ 76.14	\$ 76.14	9/1/2010
88108		CYTOPATHOLOGY, CONCENTRATION TECHNIQUE, SMEARS AND INTERPRETATION (EG,	\$ 57.27	\$ 57.27	9/1/2010
88108	TC	CYTOPATHOLOGY, CONCENTRATION TECHNIQUE, SMEARS AND INTERPRETATION (EG,	\$ 34.54	\$ 34.54	9/1/2010
88112		CYTOPATHOLOGY, SELECTIVE CELLULAR ENHANCEMENT TECHNIQUE WITH INTERPRETATION	\$ 81.74	\$ 81.74	9/1/2010
88112	26	CYTOPATHOLOGY, SELECTIVE CELLULAR ENHANCEMENT TECHNIQUE WITH INTERPRETATION	\$ 46.64	\$ 46.64	9/1/2010
88112	TC	CYTOPATHOLOGY, SELECTIVE CELLULAR ENHANCEMENT TECHNIQUE WITH INTERPRETATION	\$ 35.10	\$ 35.10	9/1/2010
88141		CYTOPATHOLOGY, CERVICAL OR VAGINAL (ANY REPORTING SYSTEM); REQUIRING	\$ 22.13	\$ 22.13	9/1/2010
88142		CYTOPATHOLOGY, CERVICAL OR VAGINAL (ANY REPORTING SYSTEM), COLLECTED IN	\$ 25.41	\$ 25.41	9/1/2010
88143		CYTOPATHOLOGY, CERVICAL OR VAGINAL (ANY REPORTING SYSTEM), COLLECTED IN	\$ 25.41	\$ 25.41	9/1/2010
88147		CYTOPATHOLOGY SMEARS, CERVICAL OR VAGINAL; SCREENING BY AUTOMATED SYSTEM UNDER	\$ 13.25	\$ 13.25	9/1/2010
88155		CYTOPATHOLOGY, SLIDES, CERVICAL OR VAGINAL, DEFINITIVE HORMONAL EVALUATION (EG,	\$ 7.52	\$ 7.52	9/1/2010
88160		CYTOPATHOLOGY, SMEARS, ANY OTHER SOURCE; SCREENING AND INTERPRETATION	\$ 41.20	\$ 41.20	9/1/2010
88160	26	CYTOPATHOLOGY, SMEARS, ANY OTHER SOURCE; SCREENING AND INTERPRETATION	\$ 20.32	\$ 20.32	9/1/2010
88161		CYTOPATHOLOGY,ANY OTHR SOURCE; PREP,SCREEN & INTER	\$ 42.90	\$ 42.90	9/1/2010
88161	26	CYTOPATHOLOGY,ANY OTHR SOURCE; PREP,SCREEN & INTER	\$ 20.04	\$ 20.04	9/1/2010
88161	TC	CYTOPATHOLOGY,ANY OTHR SOURCE; PREP,SCREEN & INTER	\$ 22.87	\$ 22.87	9/1/2010
88162	26	CYTOPATHOLOGY, EXTEND STDY INVOLV OVER5SLID &/ORMU	\$ 31.07	\$ 31.07	9/1/2010
88162	TC	CYTOPATHOLOGY, EXTEND STDY INVOLV OVER5SLID &/ORMU	\$ 31.11	\$ 31.11	9/1/2010
88164		CYTOPATHOLOGY, SLIDES, CERVICAL OR VAGINAL (THE BETHESDA SYSTEM); MANUAL	\$ 13.25	\$ 13.25	9/1/2010
88172		CYTOPATHOLOGY, EVALUATION OF FINE NEEDLE ASPIRATE; IMMEDIATE CYTOHISTOLOGIC	\$ 42.00	\$ 42.00	9/1/2010
88172	TC	CYTOPATHOLOGY, EVALUATION OF FINE NEEDLE ASPIRATE; IMMEDIATE CYTOHISTOLOGIC	\$ 17.46	\$ 17.46	9/1/2010
88173		EVAL FN NDL SSSPIR W/WO PREP SM; INTERPRET & REPORT	\$ 106.43	\$ 106.43	9/1/2010
88173	26	EVAL FN NDL SSSPIR W/WO PREP SM; INTERPRET & REPORT	\$ 56.53	\$ 56.53	9/1/2010
88173	TC	EVAL FN NDL SSSPIR W/WO PREP SM; INTERPRET & REPORT	\$ 49.90	\$ 49.90	9/1/2010
88174		CYTOPATHOLOGY, CERVICAL OR VAGINAL (ANY REPORTING SYSTEM), COLLECTED IN PRESERVA	\$ 26.79	\$ 26.79	9/1/2010

**Laboratory Fee Schedule  
Provider Specialty 069**

Medicaid Maximum Allowable
-------------------------------

CODE	MODE	Description	FACILITY	NON-FACILITY	EFFECTIVE DATE
88175		CYTOPATHOLOGY, CERVICAL OR VAGINAL (ANY REPORTING SYSTEM), COLLECTED IN	\$ 32.59	\$ 32.59	9/1/2010
88182		CELL CYCLE OR DNA ANALYSIS	\$ 80.81	\$ 80.81	9/1/2010
88184		FLOW CYTOMETRY, CELL SURFACE, CYTOPLASMIC, OR NUCLEAR MARKER, TECHNICAL	\$ 61.57	\$ 61.57	9/1/2010
88185		FLOW CYTOMETRY, CELL SURFACE, CYTOPLASMIC, OR NUCLEAR MARKER, TECHNICAL	\$ 36.53	\$ 36.53	9/1/2010
88187		FLOW CYTOMETRY, INTERPRETATION; 2 TO 8 MARKERS	\$ 53.70	\$ 53.70	9/1/2010
88188		FLOW CYTOMETRY, INTERPRETATION; 9 TO 15 MARKERS	\$ 66.12	\$ 66.12	9/1/2010
88189		FLOW CYTOMETRY, INTERPRETATION; 16 OR MORE MARKERS	\$ 84.43	\$ 84.43	9/1/2010
88230		TISSUE CULTURE FOR NON-NEOPLASTIC DISEASE	\$ 146.12	\$ 146.12	9/1/2010
88233		TISSUE CULTURE, SKIN	\$ 176.51	\$ 176.51	9/1/2010
88235		TISSUE CULTURE, PLACENTA	\$ 184.69	\$ 184.69	9/1/2010

**Laboratory Fee Schedule  
Provider Specialty 069**

CODE	MODE	Description	Medicaid Maximum Allowable		EFFECTIVE DATE
			FACILITY	NON-FACILITY	
88237		TISSUE CULTURE FOR NEOPLASTIC DISORDERS; BONE MARROW, BLOOD CELLS	\$ 158.42	\$ 158.42	9/1/2010
88239		TISSUE CULTURE FOR NEOPLASTIC DISORDERS; SOLID TUMOR	\$ 185.04	\$ 185.04	9/1/2010
88261		CHROMOSOME ANALYSIS; COUNT 5 CELLS, 1 KARYOTYPE, WITH BANDING	\$ 221.68	\$ 221.68	9/1/2010
88262		CHROMOSOME ANALYSIS, OPTION III	\$ 156.33	\$ 156.33	9/1/2010
88263		CHROMOSOME ANALYSIS	\$ 188.49	\$ 188.49	9/1/2010
88264		CHROMOSOME ANALYSIS; ANALYZE 20-25 CELLS	\$ 156.33	\$ 156.33	9/1/2010
88267		CHROMOSOME ANALYSIS, AMNIOTIC FLUID OR CHORIOIC VILLUS, 15 CELLS	\$ 225.47	\$ 225.47	9/1/2010
88269		CHROMOSOME ANALYSIS, AMNIOTIC FLUID	\$ 208.62	\$ 208.62	9/1/2010
88271		MOLECULAR CYTOGENETICS; DNA PROBE, EACH (EG, FISH)	\$ 18.15	\$ 18.15	9/1/2010
88273		MOLECULAR CYTOGENETICS; IN SITU HYBRIDIZATION, ANALYZE 10-30 CELLS	\$ 40.30	\$ 40.30	9/1/2010
88275		MOLECULAR CYTOGENETICS; INTERPHASE IN SITU HYBRIDIZATION, ANALYZE 100-300 CELLS	\$ 50.37	\$ 50.37	9/1/2010
88280		CHROM ANALYSIS ADDITIONAL KARYOTYPING	\$ 31.48	\$ 31.48	9/1/2010
88285		CHROMOSOME ANALYSIS, ADDITIONAL CELLS COUNTED, EACH STUDY	\$ 23.82	\$ 23.82	9/1/2010
88289		HIGH RESOLUTION FOR CHROMOSOME ANALYSIS	\$ 42.54	\$ 42.54	9/1/2010
88291		CYTOGENETICS AND MOLECULAR CYTOGENETICS, INTERPRETATION AND REPORT	\$ 23.49	\$ 23.49	9/1/2010
88300		LEVEL I-SURGICAL PATHOLOGY, GROSS EXAM ONLY	\$ 18.21	\$ 18.21	9/1/2010
88300	26	LEVEL I-SURGICAL PATHOLOGY, GROSS EXAM ONLY	\$ 3.51	\$ 3.51	9/1/2010
88300	TC	LEVEL I-SURGICAL PATHOLOGY, GROSS EXAM ONLY	\$ 14.71	\$ 14.71	9/1/2010
88302		LEVEL II-SURGICAL PATHOLOGY, GROSS&MICRO EXAM	\$ 38.16	\$ 38.16	9/1/2010
88302	26	LEVEL II-SURGICAL PATHOLOGY, GROSS&MICRO EXAM	\$ 5.34	\$ 5.34	9/1/2010
88304		LEVEL III - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION	\$ 48.61	\$ 48.61	9/1/2010
88304	26	LEVEL III - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION	\$ 8.96	\$ 8.96	9/1/2010
88304	TC	LEVEL III - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION	\$ 39.65	\$ 39.65	9/1/2010
88305		LEVEL IV - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION	\$ 83.04	\$ 83.04	9/1/2010
88305	26	LEVEL IV - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION	\$ 30.77	\$ 30.77	9/1/2010
88305	TC	LEVEL IV - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION	\$ 52.27	\$ 52.27	9/1/2010
88307		LEVEL V - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION	\$ 166.47	\$ 166.47	9/1/2010
88307	26	LEVEL V - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION	\$ 65.44	\$ 65.44	9/1/2010
88307	TC	LEVEL V - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION	\$ 101.04	\$ 101.04	9/1/2010
88309	26	LEVEL VI-SURGICAL PATHOLOGY, GROSS & MICRO EXAM	\$ 113.00	\$ 113.00	9/1/2010
88311		DECALCIFICATION PROCEDURE	\$ 14.60	\$ 14.60	9/1/2010
88311	26	DECALCIFICATION PROCEDURE	\$ 9.86	\$ 9.86	9/1/2010
88311	TC	DECALCIFICATION PROCEDURE	\$ 4.75	\$ 4.75	9/1/2010
88312		SPECIAL STAINS; GROUP I FOR MICROORGANISMS, EACH	\$ 78.08	\$ 78.08	9/1/2010
88312	26	SPECIAL STAINS; GROUP I FOR MICROORGANISMS, EACH	\$ 21.83	\$ 21.83	9/1/2010
88312	TC	SPECIAL STAINS; GROUP I FOR MICROORGANISMS, EACH	\$ 56.24	\$ 56.24	9/1/2010
88313		GROUP II, ALL OTHER, EXCEPT IMMUNOCYTOCHEM & IMMUNOPE	\$ 56.70	\$ 56.70	9/1/2010
88313	26	GROUP II, ALL OTHER, EXCEPT IMMUNOCYTOCHEM & IMMUNOPE	\$ 9.57	\$ 9.57	9/1/2010
88313	TC	GROUP II, ALL OTHER, EXCEPT IMMUNOCYTOCHEM & IMMUNOPE	\$ 47.13	\$ 47.13	9/1/2010
88318		DETERMINATIVE HISTOCHEMISTRY IDENTIFY CHEMICAL COMPONENTS	\$ 78.09	\$ 78.09	9/1/2010
88318	TC	DETERMINATIVE HISTOCHEMISTRY IDENTIFY CHEMICAL COMPONENTS	\$ 61.08	\$ 61.08	9/1/2010
88319		DETERMINATIVE HISTOCHEMISTRY OR CYTOCHEMISTRY/ENZYME /EACH	\$ 108.41	\$ 108.41	9/1/2010
88321		CONSULTATION ON TISSUE EXAM	\$ 65.34	\$ 72.16	9/1/2010
88323		CONSULT & REPORT ON REFERRED MAT' REQ.PREP OF SLD	\$ 115.12	\$ 115.12	9/1/2010
88325		COMPREHENSIVE REVIEW RECORDS SLIDES W/REPORT	\$ 101.59	\$ 153.37	9/1/2010
88329		OPERATING ROOM CONSULTATION	\$ 27.54	\$ 39.78	9/1/2010
88331		PATHOLOGY CONSULTATION DURING SURGERY; FIRST TISSUE BLOCK, WITH FROZEN	\$ 72.02	\$ 72.02	9/1/2010
88331	26	PATHOLOGY CONSULTATION DURING SURGERY; FIRST TISSUE BLOCK, WITH FROZEN	\$ 49.33	\$ 49.33	9/1/2010
88331	TC	PATHOLOGY CONSULTATION DURING SURGERY; FIRST TISSUE BLOCK, WITH FROZEN	\$ 22.69	\$ 22.69	9/1/2010
88332		PATHOLOGY CONSULT DUR. SURG; EA ADD TIS BLK W/FRZ SC	\$ 32.30	\$ 32.30	9/1/2010
88332	26	PATHOLOGY CONSULT DUR. SURG; EA ADD TIS BLK W/FRZ SC	\$ 24.23	\$ 24.23	9/1/2010
88332	TC	PATHOLOGY CONSULT DUR. SURG; EA ADD TIS BLK W/FRZ SC	\$ 8.07	\$ 8.07	9/1/2010
88333	26	PATHOLOGY CONSULTATION DURING SURGERY; CYTOLOGIC EXAMINATION (EG, TOUCH PREP,	\$ 49.35	\$ 49.35	9/1/2010
88333	TC	PATHOLOGY CONSULTATION DURING SURGERY; CYTOLOGIC EXAMINATION (EG, TOUCH PREP,	\$ 24.39	\$ 24.39	9/1/2010
88334	26	PATHOLOGY CONSULTATION DURING SURGERY; CYTOLOGIC EXAMINATION (EG, TOUCH PREP,	\$ 29.67	\$ 29.67	9/1/2010
88334	TC	PATHOLOGY CONSULTATION DURING SURGERY; CYTOLOGIC EXAMINATION (EG, TOUCH PREP,	\$ 14.91	\$ 14.91	9/1/2010
88342		IMMUNOCYTOCHEMISTRY EACH ANTIBODY	\$ 78.90	\$ 78.90	9/1/2010
88342	26	IMMUNOCYTOCHEMISTRY EACH ANTIBODY	\$ 34.13	\$ 34.13	9/1/2010
88342	TC	IMMUNOCYTOCHEMISTRY EACH ANTIBODY	\$ 44.78	\$ 44.78	9/1/2010
88346		IMMUNOFLUORESCENT STDY, EA. ANTIBDY; DIRECT METHOD	\$ 79.21	\$ 79.21	9/1/2010
88346	26	IMMUNOFLUORESCENT STDY, EA. ANTIBDY; DIRECT METHOD	\$ 34.72	\$ 34.72	9/1/2010
88346	TC	IMMUNOFLUORESCENT STDY, EA. ANTIBDY; DIRECT METHOD	\$ 44.49	\$ 44.49	9/1/2010
88348		ELECTRON MICROSCOPY DIAGNOSTIC	\$ 489.41	\$ 489.41	9/1/2010
88358		MORPHOMETRIC ANALYSIS OF TUMOR	\$ 61.84	\$ 61.84	9/1/2010
88360		MORPHOMETRIC ANALYSIS, TUMOR IMMUNOHISTOCHEMISTRY (EG, HER-2/NEU, ESTROGEN	\$ 95.42	\$ 95.42	9/1/2010
88360	26	MORPHOMETRIC ANALYSIS, TUMOR IMMUNOHISTOCHEMISTRY (EG, HER-2/NEU, ESTROGEN	\$ 44.39	\$ 44.39	9/1/2010
88360	TC	MORPHOMETRIC ANALYSIS, TUMOR IMMUNOHISTOCHEMISTRY (EG, HER-2/NEU, ESTROGEN	\$ 51.03	\$ 51.03	9/1/2010
88361		MORPHOMETRIC ANALYSIS; TUMOR IMMUNOHISTOCHEMISTRY (EG, HER-2/NEU, ESTROGEN	\$ 119.85	\$ 119.85	9/1/2010
88361	26	MORPHOMETRIC ANALYSIS; TUMOR IMMUNOHISTOCHEMISTRY (EG, HER-2/NEU, ESTROGEN	\$ 47.63	\$ 47.63	9/1/2010
88361	TC	MORPHOMETRIC ANALYSIS; TUMOR IMMUNOHISTOCHEMISTRY (EG, HER-2/NEU, ESTROGEN	\$ 72.21	\$ 72.21	9/1/2010
88365		TISSUE IN SITU HYBRIDIZATION, INTERPRETATION AND REPORT	\$ 124.09	\$ 124.09	9/1/2010
88365	26	TISSUE IN SITU HYBRIDIZATION, INTERPRETATION AND REPORT	\$ 47.74	\$ 47.74	9/1/2010

**Laboratory Fee Schedule  
Provider Specialty 069**

			Medicaid Maximum Allowable		
CODE	MODE	Description	FACILITY	NON-FACILITY	EFFECTIVE DATE
88365	TC	TISSUE IN SITU HYBRIDIZATION, INTERPRETATION AND REPORT	\$ 76.36	\$ 76.36	9/1/2010
88367		MORPHOMETRIC ANALYSIS, IN SITU HYBRIDIZATION, (QUANTITATIVE OR	\$ 189.14	\$ 189.14	9/1/2010
88367	26	MORPHOMETRIC ANALYSIS, IN SITU HYBRIDIZATION, (QUANTITATIVE OR	\$ 51.12	\$ 51.12	9/1/2010
88367	TC	MORPHOMETRIC ANALYSIS, IN SITU HYBRIDIZATION, (QUANTITATIVE OR	\$ 138.02	\$ 138.02	9/1/2010
88368		MORPHOMETRIC ANALYSIS, IN SITU HYBRIDIZATION, (QUANTITATIVE OR	\$ 166.90	\$ 166.90	9/1/2010
88368	26	MORPHOMETRIC ANALYSIS, IN SITU HYBRIDIZATION, (QUANTITATIVE OR	\$ 53.91	\$ 53.91	9/1/2010
88368	TC	MORPHOMETRIC ANALYSIS, IN SITU HYBRIDIZATION, (QUANTITATIVE OR	\$ 112.98	\$ 112.98	9/1/2010
88387		MACROSCOPIC EXAMINATION, DISSECTION, AND PREPARATION OF TISSUE FOR	\$ 24.85	\$ 24.85	9/1/2010
88387	TC	MACROSCOPIC EXAMINATION, DISSECTION, AND PREPARATION OF TISSUE FOR	\$ 4.83	\$ 4.83	9/1/2010
88388		MACROSCOPIC EXAMINATION, DISSECTION, AND PREPARATION OF TISSUE FOR	\$ 14.85	\$ 14.85	9/1/2010
88388	TC	MACROSCOPIC EXAMINATION, DISSECTION, AND PREPARATION OF TISSUE FOR	\$ 2.38	\$ 2.38	9/1/2010
88738		HEMOGLOBIN (HGB), QUANTITATIVE, TRANSCUTANEOUS	\$ 6.45	\$ 6.45	9/1/2010
89050		CELL COUNT, MISCELLANEOUS BODY FLUIDS (EG, CEREBROSPINAL FLUID, JOINT FLUID),	\$ 5.94	\$ 5.94	9/1/2010
89051		SYNOVIAL FLUID DIFF	\$ 6.53	\$ 6.53	9/1/2010
89055		LEUKOCYTE ASSESSMENT, FECAL, QUALITATIVE OR SEMIQUANTITATIVE	\$ 5.35	\$ 5.35	9/1/2010
89060		CRYSTAL ID, SYNOVIAL FLUID	\$ 8.97	\$ 8.97	9/1/2010
89125		FAT STAIN, FECES, URINE, OR RESPIRATORY SECRETIONS	\$ 5.42	\$ 5.42	9/1/2010
89160		MEAT FIBERS FECES	\$ 4.63	\$ 4.63	9/1/2010
89190		NASAL SMEAR FOR EOSINOPHILS	\$ 5.84	\$ 5.84	9/1/2010
89320		SEMEN ANALYSIS COMPLETE	\$ 15.11	\$ 15.11	9/1/2010
94010		SPIROMETRY, INCLUDING GRAPHIC RECORD, TOTAL AND TIMED VITAL CAPACITY,	\$ 26.01	\$ 26.01	9/1/2010
G0430		DRUG SCREEN, QUALITATIVE; MULTIPLE DRUG CLASSES OTHER THAN CHROMATOGRAPHIC	\$ 18.96	\$ 18.96	4/1/2010
G0430		DRUG SCREEN, QUALITATIVE; MULTIPLE DRUG CLASSES OTHER THAN CHROMATOGRAPHIC	\$ 18.70	\$ 18.70	9/1/2010
G0431		DRUG SCREEN, QUALITATIVE; SINGLE DRUG CLASS METHOD (E.G., IMMUNOASSAY, ENZYME	\$ 17.95	\$ 17.95	4/1/2010
G0431		DRUG SCREEN, QUALITATIVE; SINGLE DRUG CLASS METHOD (E.G., IMMUNOASSAY, ENZYME	\$ 17.70	\$ 17.70	9/1/2010

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