

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
80009	AUTOMATED MULTICHANNEL TEST; 9 CLINICAL CHEMISTRY TESTS	L1	\$13.51	7/1/2021	12/31/2382
80031	THERAPEUTIC QUANTITATIVE DRUG MONITORING IN BODY FLUIDS AND/OR EXCRETA (IF DRUG NOT SPECIFIED BY INDIVIDUAL CO		\$42.92	7/1/2021	12/31/2382
80040	SERUM RADIOIMMUNOASSAY FOR CIRCULATING ANTIBIOTIC LEVELS		\$24.34	7/1/2021	12/31/2382
80042	SERUM ANTIMICROBIAL LEVEL, BIOASSAY METHOD		\$25.86	7/1/2021	12/31/2382
80047	BASIC METABOLIC PANEL (CALCIUM, IONIZED)		\$22.97	7/1/2021	12/31/2382
80047	BASIC METABOLIC PANEL (CALCIUM, IONIZED)	59	\$16.63	7/1/2021	12/31/2382
80047	BASIC METABOLIC PANEL (CALCIUM, IONIZED)	91	\$22.97	7/1/2021	12/31/2382
80047	BASIC METABOLIC PANEL (CALCIUM, IONIZED)	L1	\$16.63	7/1/2021	12/31/2382
80047	BASIC METABOLIC PANEL (CALCIUM, IONIZED)	XU	\$22.97	7/1/2021	12/31/2382
80048	BASIC METABOLIC PANEL		\$13.32	7/1/2021	12/31/2382
80048	BASIC METABOLIC PANEL	59	\$13.32	7/1/2021	12/31/2382
80048	BASIC METABOLIC PANEL	91	\$13.32	7/1/2021	12/31/2382
80048	BASIC METABOLIC PANEL	CR	\$13.32	7/1/2021	12/31/2382
80048	BASIC METABOLIC PANEL	L1	\$13.32	7/1/2021	12/31/2382
80048	BASIC METABOLIC PANEL	QJ	\$13.32	7/1/2021	12/31/2382
80048	BASIC METABOLIC PANEL	XU	\$13.32	7/1/2021	12/31/2382
80050	GENERAL HEALTH PANEL THIS PANEL MUST INCLUDE THE FOLLOWING: AUTOMATED CHEMISTRIES, 12 OR MORE (80012-80019) HE		\$56.46	7/1/2021	12/31/2382
80050	GENERAL HEALTH PANEL THIS PANEL MUST INCLUDE THE FOLLOWING: AUTOMATED CHEMISTRIES, 12 OR MORE (80012-80019) HE	L1	\$56.46	7/1/2021	12/31/2382
80051	ELECTROLYTE PANEL		\$11.04	7/1/2021	12/31/2382
80051	ELECTROLYTE PANEL	59	\$11.04	7/1/2021	12/31/2382
80051	ELECTROLYTE PANEL	91	\$11.04	7/1/2021	12/31/2382
80051	ELECTROLYTE PANEL	ET	\$11.04	7/1/2021	12/31/2382

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80051	ELECTROLYTE PANEL	L1	\$11.04	7/1/2021	12/31/2382
80051	ELECTROLYTE PANEL	XU	\$11.04	7/1/2021	12/31/2382
80053	EXECUTIVE PROFILE- AS OF 2000 COMPREHENSIVE METABOLIC PANEL		\$16.63	7/1/2021	12/31/2382
80053	EXECUTIVE PROFILE- AS OF 2000 COMPREHENSIVE METABOLIC PANEL	59	\$16.63	7/1/2021	12/31/2382
80053	EXECUTIVE PROFILE- AS OF 2000 COMPREHENSIVE METABOLIC PANEL	91	\$16.63	7/1/2021	12/31/2382
80053	EXECUTIVE PROFILE- AS OF 2000 COMPREHENSIVE METABOLIC PANEL	GY	\$16.63	7/1/2021	12/31/2382
80053	EXECUTIVE PROFILE- AS OF 2000 COMPREHENSIVE METABOLIC PANEL	L1	\$16.63	7/1/2021	12/31/2382
80053	EXECUTIVE PROFILE- AS OF 2000 COMPREHENSIVE METABOLIC PANEL	PN	\$16.63	7/1/2021	12/31/2382
80053	EXECUTIVE PROFILE- AS OF 2000 COMPREHENSIVE METABOLIC PANEL	PO	\$16.63	7/1/2021	12/31/2382
80053	EXECUTIVE PROFILE- AS OF 2000 COMPREHENSIVE METABOLIC PANEL	Q1	\$16.63	7/1/2021	12/31/2382
80053	EXECUTIVE PROFILE- AS OF 2000 COMPREHENSIVE METABOLIC PANEL	Q6	\$16.63	7/1/2021	12/31/2382
80053	EXECUTIVE PROFILE- AS OF 2000 COMPREHENSIVE METABOLIC PANEL	QV	\$16.63	7/1/2021	12/31/2382
80053	EXECUTIVE PROFILE- AS OF 2000 COMPREHENSIVE METABOLIC PANEL	XU	\$16.63	7/1/2021	12/31/2382
80055	OBSTETRIC PANEL THIS PANEL MUST INCLUDE THE FOLLOWING: HEMATOCRIT, HEMOGRAM, AUTOMATED, AND MANUAL DIFFERENTIA		\$31.22	7/1/2021	12/31/2382
80055	OBSTETRIC PANEL THIS PANEL MUST INCLUDE THE FOLLOWING: HEMATOCRIT, HEMOGRAM, AUTOMATED, AND MANUAL DIFFERENTIA	L1	\$31.22	7/1/2021	12/31/2382
80061	LIPID PANEL THIS PANEL MUST INCLUDE THE FOLLOWING: CHOLESTEROL, SERUM, TOTAL (82465) LIPOPROTEIN, DIRECT MEASU		\$21.08	7/1/2021	12/31/2382
80061	LIPID PANEL THIS PANEL MUST INCLUDE THE FOLLOWING: CHOLESTEROL, SERUM, TOTAL (82465) LIPOPROTEIN, DIRECT MEASU	59	\$21.08	7/1/2021	12/31/2382
80061	LIPID PANEL THIS PANEL MUST INCLUDE THE FOLLOWING: CHOLESTEROL, SERUM, TOTAL (82465) LIPOPROTEIN, DIRECT MEASU	91	\$21.08	7/1/2021	12/31/2382
80061	LIPID PANEL THIS PANEL MUST INCLUDE THE FOLLOWING: CHOLESTEROL, SERUM, TOTAL (82465) LIPOPROTEIN, DIRECT MEASU	ET	\$21.08	7/1/2021	12/31/2382
80061	LIPID PANEL THIS PANEL MUST INCLUDE THE FOLLOWING: CHOLESTEROL, SERUM, TOTAL (82465) LIPOPROTEIN, DIRECT MEASU	GA	\$21.08	7/1/2021	12/31/2382
80061	LIPID PANEL THIS PANEL MUST INCLUDE THE FOLLOWING: CHOLESTEROL, SERUM, TOTAL (82465) LIPOPROTEIN, DIRECT MEASU	GY	\$21.08	7/1/2021	12/31/2382
80061	LIPID PANEL THIS PANEL MUST INCLUDE THE FOLLOWING: CHOLESTEROL, SERUM, TOTAL (82465) LIPOPROTEIN, DIRECT MEASU	GZ	\$21.08	7/1/2021	12/31/2382

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80061	LIPID PANEL THIS PANEL MUST INCLUDE THE FOLLOWING: CHOLESTEROL, SERUM, TOTAL (82465) LIPOPROTEIN, DIRECT MEASU	L1	\$21.08	7/1/2021	12/31/2382
80061	LIPID PANEL THIS PANEL MUST INCLUDE THE FOLLOWING: CHOLESTEROL, SERUM, TOTAL (82465) LIPOPROTEIN, DIRECT MEASU	PN	\$21.08	7/1/2021	12/31/2382
80061	LIPID PANEL THIS PANEL MUST INCLUDE THE FOLLOWING: CHOLESTEROL, SERUM, TOTAL (82465) LIPOPROTEIN, DIRECT MEASU	PO	\$21.08	7/1/2021	12/31/2382
80061	LIPID PANEL THIS PANEL MUST INCLUDE THE FOLLOWING: CHOLESTEROL, SERUM, TOTAL (82465) LIPOPROTEIN, DIRECT MEASU	QW	\$21.08	7/1/2021	12/31/2382
80061	LIPID PANEL THIS PANEL MUST INCLUDE THE FOLLOWING: CHOLESTEROL, SERUM, TOTAL (82465) LIPOPROTEIN, DIRECT MEASU	XU	\$21.08	7/1/2021	12/31/2382
80069	RENAL FUNCTION PANEL		\$13.66	7/1/2021	12/31/2382
80069	RENAL FUNCTION PANEL	59	\$13.66	7/1/2021	12/31/2382
80069	RENAL FUNCTION PANEL	L1	\$13.66	7/1/2021	12/31/2382
80074	ACUTE HEPATITIS PANEL		\$74.12	7/1/2021	12/31/2382
80074	ACUTE HEPATITIS PANEL	59	\$74.12	7/1/2021	12/31/2382
80074	ACUTE HEPATITIS PANEL	91	\$74.12	7/1/2021	12/31/2382
80074	ACUTE HEPATITIS PANEL	GA	\$74.12	7/1/2021	12/31/2382
80074	ACUTE HEPATITIS PANEL	GZ	\$74.12	7/1/2021	12/31/2382
80074	ACUTE HEPATITIS PANEL	L1	\$74.12	7/1/2021	12/31/2382
80076	HEPATIC FUNCTION PANEL		\$12.86	7/1/2021	12/31/2382
80076	HEPATIC FUNCTION PANEL	59	\$12.86	7/1/2021	12/31/2382
80076	HEPATIC FUNCTION PANEL	91	\$12.86	7/1/2021	12/31/2382
80076	HEPATIC FUNCTION PANEL	CR	\$12.86	7/1/2021	12/31/2382
80076	HEPATIC FUNCTION PANEL	L1	\$12.86	7/1/2021	12/31/2382
80076	HEPATIC FUNCTION PANEL	PO	\$12.86	7/1/2021	12/31/2382
80081	BLOOD TEST PANEL FOR OBSTETRICS (CBC, DIFFERENTIAL WBC COUNT, HEPATITIS B, HIV, RUBELLA, SYPHILIS, ANTIBODY SCREENING, RBC, BLOOD TYPING)		\$114.84	7/1/2021	12/31/2382
80100	DRUG, SCREEN; MULTIPLE DRUG CLASSES, EACH PROCEDURE		\$22.89	7/1/2021	12/31/2382

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80100	DRUG, SCREEN; MULTIPLE DRUG CLASSES, EACH PROCEDURE	91	\$22.89	7/1/2021	12/31/2382
80100	DRUG, SCREEN; MULTIPLE DRUG CLASSES, EACH PROCEDURE	L1	\$22.89	7/1/2021	12/31/2382
80101	DRUG, SCREEN; SINGLE DRUG CLASS, EACH DRUG CLASS		\$19.68	7/1/2021	12/31/2382
80101	DRUG, SCREEN; SINGLE DRUG CLASS, EACH DRUG CLASS	59	\$19.68	7/1/2021	12/31/2382
80101	DRUG, SCREEN; SINGLE DRUG CLASS, EACH DRUG CLASS	90	\$19.68	7/1/2021	12/31/2382
80101	DRUG, SCREEN; SINGLE DRUG CLASS, EACH DRUG CLASS	91	\$19.68	7/1/2021	12/31/2382
80101	DRUG, SCREEN; SINGLE DRUG CLASS, EACH DRUG CLASS	L1	\$19.68	7/1/2021	12/31/2382
80101	DRUG, SCREEN; SINGLE DRUG CLASS, EACH DRUG CLASS	QW	\$19.68	7/1/2021	12/31/2382
80102	DRUG, CONFIRMATION, EACH PROCEDURE		\$19.87	7/1/2021	12/31/2382
80102	DRUG, CONFIRMATION, EACH PROCEDURE	59	\$19.87	7/1/2021	12/31/2382
80102	DRUG, CONFIRMATION, EACH PROCEDURE	91	\$19.87	7/1/2021	12/31/2382
80102	DRUG, CONFIRMATION, EACH PROCEDURE	L1	\$19.87	7/1/2021	12/31/2382
80143	MEASUREMENT OF ACETAMINOPHEN		\$19.09	7/1/2021	12/31/2382
80145	ADALIMUMAB		\$40.52	7/1/2021	12/31/2382
80150	AMIKACIN		\$23.73	7/1/2021	12/31/2382
80150	AMIKACIN	91	\$23.73	7/1/2021	12/31/2382
80150	AMIKACIN	L1	\$23.73	7/1/2021	12/31/2382
80151	MEASUREMENT OF AMIODARONE		\$19.09	7/1/2021	12/31/2382
80152	AMITRIPTYLINE		\$11.70	7/1/2021	12/31/2382
80152	AMITRIPTYLINE	L1	\$11.70	7/1/2021	12/31/2382
80154	BENZODIAZEPINES		\$29.10	7/1/2021	12/31/2382
80154	BENZODIAZEPINES	91	\$29.10	7/1/2021	12/31/2382

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80155	CAFFEINE LEVELS		\$21.74	7/1/2021	12/31/2382
80155	CAFFEINE LEVELS	L1	\$21.74	7/1/2021	12/31/2382
80156	CARBAMAZEPINE		\$22.91	7/1/2021	12/31/2382
80156	CARBAMAZEPINE	91	\$22.91	7/1/2021	12/31/2382
80156	CARBAMAZEPINE	L1	\$22.91	7/1/2021	12/31/2382
80157	CARBAMAZEPINE; FREE		\$20.86	7/1/2021	12/31/2382
80157	CARBAMAZEPINE; FREE	L1	\$20.86	7/1/2021	12/31/2382
80158	CYCLOSPORINE		\$28.42	7/1/2021	12/31/2382
80158	CYCLOSPORINE	91	\$28.42	7/1/2021	12/31/2382
80158	CYCLOSPORINE	L1	\$28.42	7/1/2021	12/31/2382
80159	CLOZAPINE LEVEL		\$28.42	7/1/2021	12/31/2382
80159	CLOZAPINE LEVEL	L1	\$28.42	7/1/2021	12/31/2382
80160	DESIPRAMINE		\$27.08	7/1/2021	12/31/2382
80161	MEASUREMENT OF CARBAMAZEPINE-10,11-EPOXIDE		\$19.09	7/1/2021	12/31/2382
80162	DIGOXIN		\$20.90	7/1/2021	12/31/2382
80162	DIGOXIN	L1	\$20.90	7/1/2021	12/31/2382
80163	DIGOXIN; FREE		\$20.35	7/1/2021	12/31/2382
80164	DIPROPYLACETIC ACID (VALPROIC ACID)		\$21.32	7/1/2021	12/31/2382
80164	DIPROPYLACETIC ACID (VALPROIC ACID)	91	\$21.32	7/1/2021	12/31/2382
80164	DIPROPYLACETIC ACID (VALPROIC ACID)	L1	\$21.32	7/1/2021	12/31/2382
80164	DIPROPYLACETIC ACID (VALPROIC ACID)	XU	\$21.32	7/1/2021	12/31/2382
80165	VALPROIC ACID (DIPROPYLACETIC); FREE		\$20.77	7/1/2021	12/31/2382

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80166	DOXEPIN		\$24.39	7/1/2021	12/31/2382
80167	MEASUREMENT OF FELBAMATE		\$19.09	7/1/2021	12/31/2382
80168	ETHOSUXIMIDE		\$25.71	7/1/2021	12/31/2382
80168	ETHOSUXIMIDE	L1	\$25.71	7/1/2021	12/31/2382
80169	EVEROLIMUS LEVEL		\$19.42	7/1/2021	12/31/2382
80169	EVEROLIMUS LEVEL	L1	\$19.42	7/1/2021	12/31/2382
80170	GENTAMICIN		\$25.79	7/1/2021	12/31/2382
80170	GENTAMICIN	L1	\$25.79	7/1/2021	12/31/2382
80171	GABAPENTIN LEVEL		\$20.37	7/1/2021	12/31/2382
80171	GABAPENTIN LEVEL	L1	\$20.37	7/1/2021	12/31/2382
80172	GOLD		\$25.63	7/1/2021	12/31/2382
80173	HALOPERIDOL		\$22.91	7/1/2021	12/31/2382
80173	HALOPERIDOL	L1	\$22.91	7/1/2021	12/31/2382
80174	IMIPRAMINE		\$27.08	7/1/2021	12/31/2382
80175	LAMOTRIGINE LEVEL		\$20.37	7/1/2021	12/31/2382
80175	LAMOTRIGINE LEVEL	L1	\$20.37	7/1/2021	12/31/2382
80176	LIDOCAINE		\$14.05	7/1/2021	12/31/2382
80176	LIDOCAINE	L1	\$14.05	7/1/2021	12/31/2382
80177	LEVETIRACETAM LEVEL		\$20.37	7/1/2021	12/31/2382
80177	LEVETIRACETAM LEVEL	L1	\$20.37	7/1/2021	12/31/2382
80178	LITHIUM		\$10.41	7/1/2021	12/31/2382
80178	LITHIUM	59	\$10.41	7/1/2021	12/31/2382

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80178	LITHIUM	91	\$10.41	7/1/2021	12/31/2382
80178	LITHIUM	L1	\$10.41	7/1/2021	12/31/2382
80179	MEASUREMENT OF SALICYLATE		\$19.09	7/1/2021	12/31/2382
80180	MYCOPHENOLATE (MYCOPHENOLIC ACID) LEVEL		\$27.74	7/1/2021	12/31/2382
80180	MYCOPHENOLATE (MYCOPHENOLIC ACID) LEVEL	L1	\$27.74	7/1/2021	12/31/2382
80181	MEASUREMENT OF FLECAINIDE		\$19.09	7/1/2021	12/31/2382
80182	NORTRIPTYLINE		\$21.32	7/1/2021	12/31/2382
80183	OXCARBAZEPINE LEVEL		\$20.37	7/1/2021	12/31/2382
80183	OXCARBAZEPINE LEVEL	L1	\$20.37	7/1/2021	12/31/2382
80184	PHENOBARBITAL		\$18.03	7/1/2021	12/31/2382
80184	PHENOBARBITAL	59	\$18.03	7/1/2021	12/31/2382
80184	PHENOBARBITAL	91	\$18.03	7/1/2021	12/31/2382
80184	PHENOBARBITAL	L1	\$18.03	7/1/2021	12/31/2382
80185	PHENYTOIN; TOTAL		\$20.86	7/1/2021	12/31/2382
80185	PHENYTOIN; TOTAL	59	\$20.86	7/1/2021	12/31/2382
80185	PHENYTOIN; TOTAL	91	\$20.86	7/1/2021	12/31/2382
80185	PHENYTOIN; TOTAL	L1	\$12.51	7/1/2021	12/31/2382
80186	PHENYTOIN; FREE		\$21.66	7/1/2021	12/31/2382
80186	PHENYTOIN; FREE	L1	\$21.66	7/1/2021	12/31/2382
80187	POSACONAZOLE		\$28.48	7/1/2021	12/31/2382
80188	PRIMIDONE		\$26.11	7/1/2021	12/31/2382
80188	PRIMIDONE	L1	\$26.11	7/1/2021	12/31/2382

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80189	MEASUREMENT OF ITRACONAZOLE		\$19.09	7/1/2021	12/31/2382
80190	PROCAINAMIDE;		\$26.37	7/1/2021	12/31/2382
80190	PROCAINAMIDE;	L1	\$26.37	7/1/2021	12/31/2382
80192	PROCAINAMIDE; WITH METABOLITES (EG, N-ACETYL PROCAINAMIDE)		\$26.37	7/1/2021	12/31/2382
80192	PROCAINAMIDE; WITH METABOLITES (EG, N-ACETYL PROCAINAMIDE)	L1	\$26.37	7/1/2021	12/31/2382
80193	MEASUREMENT OF LEFLUNOMIDE		\$19.09	7/1/2021	12/31/2382
80194	QUINIDINE		\$22.97	7/1/2021	12/31/2382
80194	QUINIDINE	L1	\$22.97	7/1/2021	12/31/2382
80195	SIROLIMUS		\$19.89	7/1/2021	12/31/2382
80195	SIROLIMUS	L1	\$19.89	7/1/2021	12/31/2382
80196	SALICYLATE		\$11.17	7/1/2021	12/31/2382
80196	SALICYLATE	59	\$11.17	7/1/2021	12/31/2382
80196	SALICYLATE	91	\$11.17	7/1/2021	12/31/2382
80197	TACROLIMUS		\$19.89	7/1/2021	12/31/2382
80197	TACROLIMUS	91	\$19.89	7/1/2021	12/31/2382
80197	TACROLIMUS	L1	\$19.89	7/1/2021	12/31/2382
80198	THEOPHYLLINE		\$22.26	7/1/2021	12/31/2382
80198	THEOPHYLLINE	91	\$22.26	7/1/2021	12/31/2382
80198	THEOPHYLLINE	L1	\$22.26	7/1/2021	12/31/2382
80199	TIAGABINE LEVEL		\$27.74	7/1/2021	12/31/2382
80199	TIAGABINE LEVEL	L1	\$27.74	7/1/2021	12/31/2382
80200	TOBRAMYCIN		\$14.05	7/1/2021	12/31/2382

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80200	TOBRAMYCIN	L1	\$14.05	7/1/2021	12/31/2382
80201	TOPIRAMATE		\$18.76	7/1/2021	12/31/2382
80201	TOPIRAMATE	L1	\$18.76	7/1/2021	12/31/2382
80202	VANCOMYCIN		\$21.32	7/1/2021	12/31/2382
80202	VANCOMYCIN	59	\$21.32	7/1/2021	12/31/2382
80202	VANCOMYCIN	91	\$21.32	7/1/2021	12/31/2382
80202	VANCOMYCIN	L1	\$21.32	7/1/2021	12/31/2382
80203	ZONISAMIDE LEVEL		\$20.37	7/1/2021	12/31/2382
80203	ZONISAMIDE LEVEL	L1	\$20.37	7/1/2021	12/31/2382
80204	MEASUREMENT OF METHOTREXATE		\$19.09	7/1/2021	12/31/2382
80210	MEASUREMENT OF RUFINAMIDE		\$27.76	7/1/2021	12/31/2382
80220	HYDROXYCHLOROQUINE		\$18.64	1/1/2022	12/31/2382
80230	INFLIXIMAB		\$40.52	7/1/2021	12/31/2382
80235	LACOSAMIDE		\$28.48	7/1/2021	12/31/2382
80280	VEDOLIZUMAB		\$40.52	7/1/2021	12/31/2382
80285	VORICONAZOLE		\$28.48	7/1/2021	12/31/2382
80299	QUANTITATION OF DRUG, NOT ELSEWHERE SPECIFIED		\$21.54	7/1/2021	12/31/2382
80299	QUANTITATION OF DRUG, NOT ELSEWHERE SPECIFIED	90	\$21.54	7/1/2021	12/31/2382
80299	QUANTITATION OF DRUG, NOT ELSEWHERE SPECIFIED	91	\$21.54	7/1/2021	12/31/2382
80299	QUANTITATION OF DRUG, NOT ELSEWHERE SPECIFIED	L1	\$21.54	7/1/2021	12/31/2382
80305	DRUG TEST(S), PRESUMPTIVE, ANY NUMBER OF DRUG CLASSES, ANY NUMBER OF DEVICES OR PROCEDURES; CAPABLE OF BEING READ BY DIRECT OPTICAL OBSERVATION ONLY		\$16.86	7/1/2021	12/31/2382
80305	DRUG TEST(S), PRESUMPTIVE, ANY NUMBER OF DRUG CLASSES, ANY NUMBER OF DEVICES OR PROCEDURES; CAPABLE OF BEING READ BY DIRECT OPTICAL OBSERVATION ONLY	PN	\$16.86	7/1/2021	12/31/2382

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80305	DRUG TEST(S), PRESUMPTIVE, ANY NUMBER OF DRUG CLASSES, ANY NUMBER OF DEVICES OR PROCEDURES; CAPABLE OF BEING READ BY DIRECT OPTICAL OBSERVATION ONLY	QW	\$16.86	7/1/2021	12/31/2382
80306	DRUG TEST(S), PRESUMPTIVE, ANY NUMBER OF DRUG CLASSES, ANY NUMBER OF DEVICES OR PROCEDURES; READ BY INSTRUMENT ASSISTED DIRECT OPTICAL OBSERVATION ONLY		\$22.48	7/1/2021	12/31/2382
80307	DRUG TEST(S), PRESUMPTIVE, ANY NUMBER OF DRUG CLASSES, ANY NUMBER OF DEVICES OR PROCEDURES; BY INSTRUMENT CHEMISTRY ANALYZERS, CHROMATOGRAPHY, AND MASS SPECTROMETRY		\$89.89	7/1/2021	12/31/2382
80307	DRUG TEST(S), PRESUMPTIVE, ANY NUMBER OF DRUG CLASSES, ANY NUMBER OF DEVICES OR PROCEDURES; BY INSTRUMENT CHEMISTRY ANALYZERS, CHROMATOGRAPHY, AND MASS SPECTROMETRY	59	\$89.89	7/1/2021	12/31/2382
80307	DRUG TEST(S), PRESUMPTIVE, ANY NUMBER OF DRUG CLASSES, ANY NUMBER OF DEVICES OR PROCEDURES; BY INSTRUMENT CHEMISTRY ANALYZERS, CHROMATOGRAPHY, AND MASS SPECTROMETRY	91	\$89.89	7/1/2021	12/31/2382
80307	DRUG TEST(S), PRESUMPTIVE, ANY NUMBER OF DRUG CLASSES, ANY NUMBER OF DEVICES OR PROCEDURES; BY INSTRUMENT CHEMISTRY ANALYZERS, CHROMATOGRAPHY, AND MASS SPECTROMETRY	GZ	\$89.89	7/1/2021	12/31/2382
80307	DRUG TEST(S), PRESUMPTIVE, ANY NUMBER OF DRUG CLASSES, ANY NUMBER OF DEVICES OR PROCEDURES; BY INSTRUMENT CHEMISTRY ANALYZERS, CHROMATOGRAPHY, AND MASS SPECTROMETRY	PN	\$89.89	7/1/2021	12/31/2382
80400	ACTH STIMULATION PANEL; FOR ADRENAL INSUFFICIENCY		\$51.31	7/1/2021	12/31/2382
80402	ACTH STIMULATION PANEL; FOR 21 HYDROXYLASE DEFICIENCY		\$136.81	7/1/2021	12/31/2382
80402	ACTH STIMULATION PANEL; FOR 21 HYDROXYLASE DEFICIENCY	L1	\$136.81	7/1/2021	12/31/2382
80406	ACTH STIMULATION PANEL; FOR 3 BETA-HYDROXYDEHYDROGENASE DEFICIENCY		\$93.03	7/1/2021	12/31/2382
80406	ACTH STIMULATION PANEL; FOR 3 BETA-HYDROXYDEHYDROGENASE DEFICIENCY	L1	\$93.03	7/1/2021	12/31/2382
80408	ALDOSTERONE SUPPRESSION EVALUATION PANEL (EG, SALINE INFUSION)		\$197.48	7/1/2021	12/31/2382
80408	ALDOSTERONE SUPPRESSION EVALUATION PANEL (EG, SALINE INFUSION)	L1	\$197.48	7/1/2021	12/31/2382
80410	CLACITONIN STIMULATION PANEL (EG, CALCIUM, PENTAGASTRIN)		\$126.40	7/1/2021	12/31/2382
80410	CLACITONIN STIMULATION PANEL (EG, CALCIUM, PENTAGASTRIN)	L1	\$126.40	7/1/2021	12/31/2382
80412	CORTICOTROPIC RELEASING HORMONE (CRH) STIMULATION PANEL		\$518.66	7/1/2021	12/31/2382
80412	CORTICOTROPIC RELEASING HORMONE (CRH) STIMULATION PANEL	L1	\$518.66	7/1/2021	12/31/2382
80414	CHORIONIC GONADOTROPIN STIMULATION PANEL; TESTOSTERON RESPONSE		\$81.27	7/1/2021	12/31/2382
80414	CHORIONIC GONADOTROPIN STIMULATION PANEL; TESTOSTERON RESPONSE	L1	\$81.27	7/1/2021	12/31/2382
80415	CHORIONIC GONADOTROPIN STIMULATION PANEL; ESTRADIOL RESPONSE		\$87.94	7/1/2021	12/31/2382
80415	CHORIONIC GONADOTROPIN STIMULATION PANEL; ESTRADIOL RESPONSE	L1	\$87.94	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
80416	RENAL VEIN RENIN STIMULATION PANEL (EG, CAPROPRIIL)		\$207.67	7/1/2021	12/31/2382
80416	RENAL VEIN RENIN STIMULATION PANEL (EG, CAPROPRIIL)	L1	\$207.67	7/1/2021	12/31/2382
80417	PERIPHERAL VEIN RENIN STIMULATION PANEL (EG, CAPTOPRIL)		\$69.22	7/1/2021	12/31/2382
80417	PERIPHERAL VEIN RENIN STIMULATION PANEL (EG, CAPTOPRIL)	L1	\$69.22	7/1/2021	12/31/2382
80418	COMBINED RAPID ANTERIOR PETUITARY EVALUATION PANEL		\$912.01	7/1/2021	12/31/2382
80418	COMBINED RAPID ANTERIOR PETUITARY EVALUATION PANEL	L1	\$912.01	7/1/2021	12/31/2382
80420	DEXAMETHASONE SUPPRESSION PANEL, 48 HOUR		\$113.36	7/1/2021	12/31/2382
80420	DEXAMETHASONE SUPPRESSION PANEL, 48 HOUR	L1	\$113.36	7/1/2021	12/31/2382
80422	GLUCAGON TOLERANCE PANEL; FOR INSULINOMA		\$72.51	7/1/2021	12/31/2382
80422	GLUCAGON TOLERANCE PANEL; FOR INSULINOMA	L1	\$72.51	7/1/2021	12/31/2382
80424	GLUCAGON TOLERANCE PANEL; FOR PHEOCHROMOCYTOMA		\$73.54	7/1/2021	12/31/2382
80424	GLUCAGON TOLERANCE PANEL; FOR PHEOCHROMOCYTOMA	L1	\$73.54	7/1/2021	12/31/2382
80426	GONADOTROPIN RELEASING HORMONE STIMULATION PANEL		\$233.58	7/1/2021	12/31/2382
80426	GONADOTROPIN RELEASING HORMONE STIMULATION PANEL	L1	\$233.58	7/1/2021	12/31/2382
80428	GROWTH HORMONE STIMULATION PANEL (EG, ARGININE INFUSION, I-DOPA ADMINISTRATION)		\$104.93	7/1/2021	12/31/2382
80428	GROWTH HORMONE STIMULATION PANEL (EG, ARGININE INFUSION, I-DOPA ADMINISTRATION)	L1	\$104.93	7/1/2021	12/31/2382
80430	GROWTH HORMONE SUPPRESSION PANEL (GLUCOSE ADMINISTRATION)		\$123.43	7/1/2021	12/31/2382
80430	GROWTH HORMONE SUPPRESSION PANEL (GLUCOSE ADMINISTRATION)	L1	\$123.43	7/1/2021	12/31/2382
80432	INSULIN-INDUCED C-PEPTIDE SUPPRESSION PANEL		\$212.56	7/1/2021	12/31/2382
80432	INSULIN-INDUCED C-PEPTIDE SUPPRESSION PANEL	L1	\$212.56	7/1/2021	12/31/2382
80434	INSULIN TOLERANCE PANEL' FOR ACTH INSUFFICIENCY		\$159.14	7/1/2021	12/31/2382
80434	INSULIN TOLERANCE PANEL' FOR ACTH INSUFFICIENCY	L1	\$159.14	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
80435	INSULIN TOLERANCE PANEL; FOR GROWTH HORMONE DEFICIENCY		\$162.02	7/1/2021	12/31/2382
80435	INSULIN TOLERANCE PANEL; FOR GROWTH HORMONE DEFICIENCY	L1	\$162.02	7/1/2021	12/31/2382
80436	METYRAPONE PANEL		\$143.44	7/1/2021	12/31/2382
80436	METYRAPONE PANEL	L1	\$143.44	7/1/2021	12/31/2382
80438	THUROTROPIN RELEASING HORMONE (TRH) STIMULATION PANEL; ONE HOUR		\$79.30	7/1/2021	12/31/2382
80438	THUROTROPIN RELEASING HORMONE (TRH) STIMULATION PANEL; ONE HOUR	L1	\$79.30	7/1/2021	12/31/2382
80439	THYROTROPIN RELEASING HORMONE (TRH) STIMULATION PANEL; TWO HOUR		\$105.74	7/1/2021	12/31/2382
80439	THYROTROPIN RELEASING HORMONE (TRH) STIMULATION PANEL; TWO HOUR	L1	\$105.74	7/1/2021	12/31/2382
80440	THYROTROPIN RELEASING HORMONE (TRH) STIMULATION PANEL; FOR HYPERPROLACTINEMIA		\$91.49	7/1/2021	12/31/2382
80440	THYROTROPIN RELEASING HORMONE (TRH) STIMULATION PANEL; FOR HYPERPROLACTINEMIA	L1	\$91.49	7/1/2021	12/31/2382
80500	CLINICAL PATHOLOGY CONSULTATION; LIMITED, WITHOUT REVIEW OF PATIENT'S HISTORY AND MEDICAL RECORDS		\$20.43	7/1/2021	12/31/2382
80500	CLINICAL PATHOLOGY CONSULTATION; LIMITED, WITHOUT REVIEW OF PATIENT'S HISTORY AND MEDICAL RECORDS	59	\$20.43	7/1/2021	12/31/2382
80500	CLINICAL PATHOLOGY CONSULTATION; LIMITED, WITHOUT REVIEW OF PATIENT'S HISTORY AND MEDICAL RECORDS	L1	\$20.43	7/1/2021	12/31/2382
80502	CLINICAL PATHOLOGY CONSULTATION; COMPREHENSIVE, FOR A COMPLEX DIAGNOSTIC PROBLEM, WITH REVIEW OF PATIENT'S HIS		\$60.40	7/1/2021	12/31/2382
80502	CLINICAL PATHOLOGY CONSULTATION; COMPREHENSIVE, FOR A COMPLEX DIAGNOSTIC PROBLEM, WITH REVIEW OF PATIENT'S HIS	L1	\$60.40	7/1/2021	12/31/2382
80503	PATHOLOGY CLINICAL CONSULTATION; FOR A CLINICAL PROBLEM, WITH LIMITED REVIEW OF PATIENT'S HISTORY AND MEDICAL RECORDS AND STRAIGHTFORWARD MEDICAL DECISION MAKING		\$15.89	1/1/2022	12/31/2382
80504	PATHOLOGY CLINICAL CONSULTATION; FOR A MODERATELY COMPLEX CLINICAL PROBLEM, WITH REVIEW OF PATIENT'S HISTORY AND MEDICAL RECORDS AND MODERATE LEVEL OF MEDICAL DECISION MAKING		\$31.79	1/1/2022	12/31/2382
80505	COMPREHENSIVE REVIEW OF PATIENT'S HISTORY AND MEDICAL RECORDS AND HIGH LEVEL OF MEDICAL DECISION MAKING		\$57.59	1/1/2022	12/31/2382
80506	PATHOLOGY CLINICAL CONSULTATION; PROLONGED SERVICE, EACH ADDITIONAL 30 MINUTES (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)		\$25.80	1/1/2022	12/31/2382
81000	URINALYSIS, BY DIP STICK OR TABLET REAGENT FOR BILIRUBIN, GLUCOSE, HEMOGLOBIN, KETONES, LEUKOCYTES, NITRITE, P		\$4.99	7/1/2021	12/31/2382
81000	URINALYSIS, BY DIP STICK OR TABLET REAGENT FOR BILIRUBIN, GLUCOSE, HEMOGLOBIN, KETONES, LEUKOCYTES, NITRITE, P	59	\$4.99	7/1/2021	12/31/2382
81000	URINALYSIS, BY DIP STICK OR TABLET REAGENT FOR BILIRUBIN, GLUCOSE, HEMOGLOBIN, KETONES, LEUKOCYTES, NITRITE, P	L1	\$4.99	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
81001	URINALYSIS, BY DIP STICK OR TABLET REAGENT FOR BILIRUBIN, GLUCOSE, HEMOGLOBIN, KETONES,;AUTOMATED, WITH MICROS		\$4.99	7/1/2021	12/31/2382
81001	URINALYSIS, BY DIP STICK OR TABLET REAGENT FOR BILIRUBIN, GLUCOSE, HEMOGLOBIN, KETONES,;AUTOMATED, WITH MICROS	59	\$4.99	7/1/2021	12/31/2382
81001	URINALYSIS, BY DIP STICK OR TABLET REAGENT FOR BILIRUBIN, GLUCOSE, HEMOGLOBIN, KETONES,;AUTOMATED, WITH MICROS	91	\$4.99	7/1/2021	12/31/2382
81001	URINALYSIS, BY DIP STICK OR TABLET REAGENT FOR BILIRUBIN, GLUCOSE, HEMOGLOBIN, KETONES,;AUTOMATED, WITH MICROS	L1	\$4.99	7/1/2021	12/31/2382
81001	URINALYSIS, BY DIP STICK OR TABLET REAGENT FOR BILIRUBIN, GLUCOSE, HEMOGLOBIN, KETONES,;AUTOMATED, WITH MICROS	Q6	\$4.99	7/1/2021	12/31/2382
81001	URINALYSIS, BY DIP STICK OR TABLET REAGENT FOR BILIRUBIN, GLUCOSE, HEMOGLOBIN, KETONES,;AUTOMATED, WITH MICROS	XS	\$4.99	7/1/2021	12/31/2382
81001	URINALYSIS, BY DIP STICK OR TABLET REAGENT FOR BILIRUBIN, GLUCOSE, HEMOGLOBIN, KETONES,;AUTOMATED, WITH MICROS	XU	\$4.99	7/1/2021	12/31/2382
81002	URINALYSIS, BY DIP STICK OR TABLET REAGENT FOR BILIRUBIN, GLUCOSE, HEMOGLOBIN, KETONES, LEUKOCYTES, NITRITE, P		\$4.02	7/1/2021	12/31/2382
81002	URINALYSIS, BY DIP STICK OR TABLET REAGENT FOR BILIRUBIN, GLUCOSE, HEMOGLOBIN, KETONES, LEUKOCYTES, NITRITE, P	59	\$4.02	7/1/2021	12/31/2382
81002	URINALYSIS, BY DIP STICK OR TABLET REAGENT FOR BILIRUBIN, GLUCOSE, HEMOGLOBIN, KETONES, LEUKOCYTES, NITRITE, P	L1	\$4.02	7/1/2021	12/31/2382
81002	URINALYSIS, BY DIP STICK OR TABLET REAGENT FOR BILIRUBIN, GLUCOSE, HEMOGLOBIN, KETONES, LEUKOCYTES, NITRITE, P	XU	\$4.02	7/1/2021	12/31/2382
81003	URINALYSIS, BY DIP STICK OR TABLET REAGENT FOR BILIRUBIN, GLUCOSE, HEMOGLOBIN, KETONES, LEUKOCYTES, NITRITE, P		\$3.00	7/1/2021	12/31/2382
81003	URINALYSIS, BY DIP STICK OR TABLET REAGENT FOR BILIRUBIN, GLUCOSE, HEMOGLOBIN, KETONES, LEUKOCYTES, NITRITE, P	59	\$3.00	7/1/2021	12/31/2382
81003	URINALYSIS, BY DIP STICK OR TABLET REAGENT FOR BILIRUBIN, GLUCOSE, HEMOGLOBIN, KETONES, LEUKOCYTES, NITRITE, P	91	\$3.00	7/1/2021	12/31/2382
81003	URINALYSIS, BY DIP STICK OR TABLET REAGENT FOR BILIRUBIN, GLUCOSE, HEMOGLOBIN, KETONES, LEUKOCYTES, NITRITE, P	L1	\$3.00	7/1/2021	12/31/2382
81003	URINALYSIS, BY DIP STICK OR TABLET REAGENT FOR BILIRUBIN, GLUCOSE, HEMOGLOBIN, KETONES, LEUKOCYTES, NITRITE, P	QW	\$3.00	7/1/2021	12/31/2382
81003	URINALYSIS, BY DIP STICK OR TABLET REAGENT FOR BILIRUBIN, GLUCOSE, HEMOGLOBIN, KETONES, LEUKOCYTES, NITRITE, P	XU	\$3.00	7/1/2021	12/31/2382
81005	URINALYSIS; QUALITATIVE OR SEMIQUANTITATIVE, EXCEPT IMMUNOASSAYS		\$3.41	7/1/2021	12/31/2382
81005	URINALYSIS; QUALITATIVE OR SEMIQUANTITATIVE, EXCEPT IMMUNOASSAYS	L1	\$3.41	7/1/2021	12/31/2382
81005	URINALYSIS; QUALITATIVE OR SEMIQUANTITATIVE, EXCEPT IMMUNOASSAYS	XU	\$3.41	7/1/2021	12/31/2382
81007	URINALYSIS; BACTERIURIA SCREEN, BY NON-CULTURE TECHNIQUE, COMMERCIAL KIT (SPECIFY TYPE)		\$4.04	7/1/2021	12/31/2382
81007	URINALYSIS; BACTERIURIA SCREEN, BY NON-CULTURE TECHNIQUE, COMMERCIAL KIT (SPECIFY TYPE)	L1	\$4.04	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
81007	URINALYSIS; BACTERIURIA SCREEN, BY NON-CULTURE TECHNIQUE, COMMERCIAL KIT (SPECIFY TYPE)	QW	\$4.04	7/1/2021	12/31/2382
81015	URINALYSIS; MICROSCOPIC ONLY		\$4.78	7/1/2021	12/31/2382
81015	URINALYSIS; MICROSCOPIC ONLY	59	\$4.78	7/1/2021	12/31/2382
81015	URINALYSIS; MICROSCOPIC ONLY	91	\$4.78	7/1/2021	12/31/2382
81015	URINALYSIS; MICROSCOPIC ONLY	L1	\$4.78	7/1/2021	12/31/2382
81020	URINALYSIS; TWO OR THREE GLASS TEST		\$5.80	7/1/2021	12/31/2382
81020	URINALYSIS; TWO OR THREE GLASS TEST	L1	\$5.80	7/1/2021	12/31/2382
81025	URINE PREGNANCY TEST, BY VISUAL COLOR COMPARISON METHODS		\$9.96	7/1/2021	12/31/2382
81025	URINE PREGNANCY TEST, BY VISUAL COLOR COMPARISON METHODS	59	\$9.96	7/1/2021	12/31/2382
81025	URINE PREGNANCY TEST, BY VISUAL COLOR COMPARISON METHODS	91	\$9.96	7/1/2021	12/31/2382
81025	URINE PREGNANCY TEST, BY VISUAL COLOR COMPARISON METHODS	L1	\$9.96	7/1/2021	12/31/2382
81025	URINE PREGNANCY TEST, BY VISUAL COLOR COMPARISON METHODS	QW	\$9.96	7/1/2021	12/31/2382
81050	VOLUME MEASUREMENT FOR TIMED COLLECTION, EACH		\$4.72	7/1/2021	12/31/2382
81050	VOLUME MEASUREMENT FOR TIMED COLLECTION, EACH	L1	\$4.72	7/1/2021	12/31/2382
81329	GENE ANALYSIS (SURVIVAL OF MOTOR NEURON 1, TELOMERIC) FOR DOSAGE/DELETION		\$143.93	7/1/2021	12/31/2382
81513	MEASUREMENT OF RNA OF BACTERIA IN VAGINAL FLUID SPECIMEN		\$146.05	7/1/2021	12/31/2382
81514	MEASUREMENT OF DNA OF BACTERIA IN VAGINAL FLUID SPECIMEN		\$269.30	7/1/2021	12/31/2382
81519	ONCOLOGY, MRNA, GENE EXPRESSION PROFILING BY REAL-TIME RT-PCR OF 21 GENES, UTILIZING FORMALIN		\$3,878.14	7/1/2021	12/31/2382
81523	CONTENT GENES AND 31 HOUSEKEEPING GENES, UTILIZING FORMALIN-FIXED PARAFFIN-EMBEDDED TISSUE, ALGORITHM REPORTED AS INDEX RELATED TO RISK TO DISTANT		\$3,873.00	1/1/2022	12/31/2382
81528	GENE ANALYSIS (COLORECTAL CANCER)		\$534.63	7/1/2021	12/31/2382
81596	BIOCHEMICAL ASSAYS FOR EVALUATION OF CHRONIC HEPATITIS C VIRUS INFECTION		\$81.31	7/1/2021	12/31/2382
82000	ACETALDEHYDE, BLOOD		\$16.81	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
82003	ACETAMINOPHEN		\$31.86	7/1/2021	12/31/2382
82003	ACETAMINOPHEN	59	\$31.86	7/1/2021	12/31/2382
82003	ACETAMINOPHEN	91	\$31.86	7/1/2021	12/31/2382
82005	ACETOACETIC ACID		\$17.39	7/1/2021	12/31/2382
82005	ACETOACETIC ACID	L1	\$17.39	7/1/2021	12/31/2382
82009	ACETONE OR OTHER KETONE BODIES, SERUM; QUALITATIVE		\$7.11	7/1/2021	12/31/2382
82009	ACETONE OR OTHER KETONE BODIES, SERUM; QUALITATIVE	91	\$7.11	7/1/2021	12/31/2382
82009	ACETONE OR OTHER KETONE BODIES, SERUM; QUALITATIVE	L1	\$7.11	7/1/2021	12/31/2382
82010	ACETONE OR OTHER KETONE BODIES, SERUM; QUANTITATIVE		\$12.86	7/1/2021	12/31/2382
82010	ACETONE OR OTHER KETONE BODIES, SERUM; QUANTITATIVE	91	\$12.86	7/1/2021	12/31/2382
82010	ACETONE OR OTHER KETONE BODIES, SERUM; QUANTITATIVE	L1	\$12.86	7/1/2021	12/31/2382
82010	ACETONE OR OTHER KETONE BODIES, SERUM; QUANTITATIVE	QW	\$12.86	7/1/2021	12/31/2382
82011	ACETYLSALICYLIC ACID; QUANTITATIVE		\$12.27	7/1/2021	12/31/2382
82012	ACETYLSALICYLIC ACID; QUALITATIVE		\$11.21	7/1/2021	12/31/2382
82013	ACETYLCHOLINESTERASE		\$17.57	7/1/2021	12/31/2382
82013	ACETYLCHOLINESTERASE	L1	\$17.57	7/1/2021	12/31/2382
82015	ACIDITY, TITRATABLE, URINE		\$10.37	7/1/2021	12/31/2382
82016	ACYLCARNITINES;QUALITATIVE,EACH SPECIMEN		\$21.81	7/1/2021	12/31/2382
82016	ACYLCARNITINES;QUALITATIVE,EACH SPECIMEN	L1	\$21.81	7/1/2021	12/31/2382
82017	ACYLCARNITINES;QUANTITIVE,EACH SPECIMEN		\$26.55	7/1/2021	12/31/2382
82017	ACYLCARNITINES;QUANTITIVE,EACH SPECIMEN	L1	\$26.55	7/1/2021	12/31/2382
82024	ADRENOCORTICOTROPIC HORMONE (ACTH)		\$60.78	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
82024	ADRENOCORTICOTROPIC HORMONE (ACTH)	L1	\$60.78	7/1/2021	12/31/2382
82030	ADENOSINE; 5'-MONOPHOSPHATE, CYCLIC (CYCLIC AMP)		\$40.60	7/1/2021	12/31/2382
82030	ADENOSINE; 5'-MONOPHOSPHATE, CYCLIC (CYCLIC AMP)	L1	\$40.60	7/1/2021	12/31/2382
82035	ADENOSINE; 5'-TRIPHOSPHATE, BLOOD		\$25.49	7/1/2021	12/31/2382
82035	ADENOSINE; 5'-TRIPHOSPHATE, BLOOD	L1	\$25.49	7/1/2021	12/31/2382
82040	ALBUMIN; SERUM		\$5.44	7/1/2021	12/31/2382
82040	ALBUMIN; SERUM	59	\$5.44	7/1/2021	12/31/2382
82040	ALBUMIN; SERUM	91	\$5.44	7/1/2021	12/31/2382
82040	ALBUMIN; SERUM	L1	\$5.44	7/1/2021	12/31/2382
82040	ALBUMIN; SERUM	XU	\$5.44	7/1/2021	12/31/2382
82042	ALBUMIN; URINE, QUANTITATIVE		\$5.44	7/1/2021	12/31/2382
82042	ALBUMIN; URINE, QUANTITATIVE	L1	\$5.44	7/1/2021	12/31/2382
82043	ALBUMIN; URINE, MICROALBUMIN, QUANTITATIVE		\$9.11	7/1/2021	12/31/2382
82043	ALBUMIN; URINE, MICROALBUMIN, QUANTITATIVE	L1	\$9.11	7/1/2021	12/31/2382
82043	ALBUMIN; URINE, MICROALBUMIN, QUANTITATIVE	PN	\$9.11	7/1/2021	12/31/2382
82043	ALBUMIN; URINE, MICROALBUMIN, QUANTITATIVE	PO	\$9.11	7/1/2021	12/31/2382
82044	ALBUMIN; URINE, MICROALBUMIN, SEMIQUANTITATIVE (EG, REAGENT STRIP ASSAY)		\$7.20	7/1/2021	12/31/2382
82044	ALBUMIN; URINE, MICROALBUMIN, SEMIQUANTITATIVE (EG, REAGENT STRIP ASSAY)	L1	\$7.20	7/1/2021	12/31/2382
82044	ALBUMIN; URINE, MICROALBUMIN, SEMIQUANTITATIVE (EG, REAGENT STRIP ASSAY)	QW	\$7.20	7/1/2021	12/31/2382
82045	ALBUMIN; ISCHEMIA MODIFIED		\$53.41	7/1/2021	12/31/2382
82045	ALBUMIN; ISCHEMIA MODIFIED	L1	\$53.41	7/1/2021	12/31/2382
82055	ALCOHOL (ETHANOL); ANY SPECIMEN EXCEPT BREATH		\$17.01	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
82055	ALCOHOL (ETHANOL); ANY SPECIMEN EXCEPT BREATH	59	\$17.01	7/1/2021	12/31/2382
82055	ALCOHOL (ETHANOL); ANY SPECIMEN EXCEPT BREATH	90	\$17.01	7/1/2021	12/31/2382
82055	ALCOHOL (ETHANOL); ANY SPECIMEN EXCEPT BREATH	91	\$17.01	7/1/2021	12/31/2382
82055	ALCOHOL (ETHANOL); ANY SPECIMEN EXCEPT BREATH	QW	\$17.01	7/1/2021	12/31/2382
82060	ALCOHOL (ETHANOL), BLOOD; BY GAS-LIQUID CHROMATOGRAPHY		\$17.39	7/1/2021	12/31/2382
82065	ALCOHOL (ETHANOL), URINE; CHEMICAL		\$18.59	7/1/2021	12/31/2382
82070	ALCOHOL (ETHANOL), URINE; BY GAS-LIQUID CHROMATOGRAPHY		\$17.39	7/1/2021	12/31/2382
82072	ALCOHOL (ETHANOL) GELATION		\$15.79	7/1/2021	12/31/2382
82075	ALCOHOL (ETHANOL); BREATH		\$18.96	7/1/2021	12/31/2382
82075	ALCOHOL (ETHANOL); BREATH	L1	\$18.96	7/1/2021	12/31/2382
82076	ALCOHOL; ISOPROPYL		\$17.87	7/1/2021	12/31/2382
82077	MEASUREMENT OF ALCOHOL LEVEL IN SPECIMEN OTHER THAN BREATH OR URINE		\$17.68	7/1/2021	12/31/2382
82078	ALCOHOL; METHYL		\$20.77	7/1/2021	12/31/2382
82085	ALDOLASE		\$15.28	7/1/2021	12/31/2382
82085	ALDOLASE	L1	\$15.28	7/1/2021	12/31/2382
82086	ALDOLASE, BLOOD; COLORIMETRIC		\$14.52	7/1/2021	12/31/2382
82087	ALDOSTERONE; DOUBLE ISOTOPE TECHNIQUE		\$72.52	7/1/2021	12/31/2382
82088	ALDOSTERONE;		\$64.13	7/1/2021	12/31/2382
82088	ALDOSTERONE;	L1	\$64.13	7/1/2021	12/31/2382
82089	ALDOSTERONE; RIA, URINE		\$69.03	7/1/2021	12/31/2382
82091	ALDOSTERONE; SALINE INFUSION TEST		\$69.11	7/1/2021	12/31/2382
82095	ALKALOIDS, TISSUE; SCREENING		\$29.71	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
82096	ALKALOIDS, TISSUE; QUANTITATIVE		\$51.85	7/1/2021	12/31/2382
82100	ALKALOIDS, URINE; SCREENING		\$21.71	7/1/2021	12/31/2382
82101	ALKALOIDS, URINE, QUANTITATIVE		\$47.24	7/1/2021	12/31/2382
82103	ALPHA-1-ANTITRYPSIN; TOTAL		\$21.14	7/1/2021	12/31/2382
82103	ALPHA-1-ANTITRYPSIN; TOTAL	91	\$21.14	7/1/2021	12/31/2382
82103	ALPHA-1-ANTITRYPSIN; TOTAL	L1	\$21.14	7/1/2021	12/31/2382
82104	ALPHA-1-ANTITRYPSIN; PHENOTYPE		\$22.74	7/1/2021	12/31/2382
82104	ALPHA-1-ANTITRYPSIN; PHENOTYPE	L1	\$22.74	7/1/2021	12/31/2382
82105	ALPHA-FETOPROTEIN; SERUM		\$26.40	7/1/2021	12/31/2382
82105	ALPHA-FETOPROTEIN; SERUM	91	\$26.40	7/1/2021	12/31/2382
82105	ALPHA-FETOPROTEIN; SERUM	GA	\$26.40	7/1/2021	12/31/2382
82105	ALPHA-FETOPROTEIN; SERUM	GZ	\$26.40	7/1/2021	12/31/2382
82105	ALPHA-FETOPROTEIN; SERUM	L1	\$26.40	7/1/2021	12/31/2382
82106	ALPHA-FETOPROTEIN; AMNIOTIC FLUID		\$26.40	7/1/2021	12/31/2382
82106	ALPHA-FETOPROTEIN; AMNIOTIC FLUID	L1	\$26.40	7/1/2021	12/31/2382
82107	AFP-L3 FRACTION ISOFORM AND TOTAL AFP (INCLUDING RATIO)		\$101.36	7/1/2021	12/31/2382
82107	AFP-L3 FRACTION ISOFORM AND TOTAL AFP (INCLUDING RATIO)	L1	\$101.36	7/1/2021	12/31/2382
82108	ALUMINUM		\$40.09	7/1/2021	12/31/2382
82108	ALUMINUM	L1	\$40.09	7/1/2021	12/31/2382
82112	AMIKACIN		\$26.07	7/1/2021	12/31/2382
82112	AMIKACIN	L1	\$26.07	7/1/2021	12/31/2382
82120	AMINES,VAGINAL FLUID,QUALITATIVE		\$5.92	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
82120	AMINES,VAGINAL FLUID,QUALITATIVE	L1	\$5.92	7/1/2021	12/31/2382
82120	AMINES,VAGINAL FLUID,QUALITATIVE	QW	\$5.92	7/1/2021	12/31/2382
82126	AMINO ACID NITROGEN, ALPHA		\$21.74	7/1/2021	12/31/2382
82127	AMINO ACIDS;SINGLE,QUALITIVE,EACH SPECIMEN		\$21.81	7/1/2021	12/31/2382
82127	AMINO ACIDS;SINGLE,QUALITIVE,EACH SPECIMEN	L1	\$21.81	7/1/2021	12/31/2382
82128	AMINO ACIDS, QUALITATIVE		\$21.81	7/1/2021	12/31/2382
82128	AMINO ACIDS, QUALITATIVE	L1	\$21.81	7/1/2021	12/31/2382
82131	AMINO ACIDS, FRACTIONATION AND QUANTITATION, EACH		\$26.55	7/1/2021	12/31/2382
82131	AMINO ACIDS, FRACTIONATION AND QUANTITATION, EACH	L1	\$26.55	7/1/2021	12/31/2382
82134	AMINOHIPPURATE, PARA (PAH)		\$15.69	7/1/2021	12/31/2382
82134	AMINOHIPPURATE, PARA (PAH)	L1	\$15.69	7/1/2021	12/31/2382
82135	AMINOLEVULINIC ACID, DELTA (ALA)		\$25.49	7/1/2021	12/31/2382
82135	AMINOLEVULINIC ACID, DELTA (ALA)	L1	\$25.49	7/1/2021	12/31/2382
82136	AMINO ACIDS, 2 TO 5 AMINO ACIDS, QUANMTITATIVE, EACH SPECIMEN		\$26.55	7/1/2021	12/31/2382
82136	AMINO ACIDS, 2 TO 5 AMINO ACIDS, QUANMTITATIVE, EACH SPECIMEN	L1	\$26.55	7/1/2021	12/31/2382
82137	AMINOPHYLLINE		\$23.80	7/1/2021	12/31/2382
82138	AMITRIPTYLINE		\$11.33	7/1/2021	12/31/2382
82139	AMINO ACIDS 6 OR MORE AMINO ACIDS, QUANTITATIVE, EACH SPECIMEN		\$26.55	7/1/2021	12/31/2382
82139	AMINO ACIDS 6 OR MORE AMINO ACIDS, QUANTITATIVE, EACH SPECIMEN	91	\$26.55	7/1/2021	12/31/2382
82139	AMINO ACIDS 6 OR MORE AMINO ACIDS, QUANTITATIVE, EACH SPECIMEN	L1	\$26.55	7/1/2021	12/31/2382
82140	AMMONIA		\$22.94	7/1/2021	12/31/2382
82140	AMMONIA	91	\$22.94	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
82140	AMMONIA	L1	\$22.94	7/1/2021	12/31/2382
82141	AMMONIA; URINE		\$18.59	7/1/2021	12/31/2382
82142	AMMONIUM CHLORIDE LOADING TEST		\$21.74	7/1/2021	12/31/2382
82143	AMNIOTIC FLUID SCAN (SPECTROPHOTOMETRIC)		\$9.27	7/1/2021	12/31/2382
82143	AMNIOTIC FLUID SCAN (SPECTROPHOTOMETRIC)	L1	\$9.27	7/1/2021	12/31/2382
82145	AMPHETAMINE OR METHAMPHETAMINE		\$9.07	7/1/2021	12/31/2382
82150	AMYLASE		\$10.20	7/1/2021	12/31/2382
82150	AMYLASE	91	\$10.20	7/1/2021	12/31/2382
82150	AMYLASE	L1	\$10.20	7/1/2021	12/31/2382
82154	ANDROSTANEDIOL GLUCURONIDE		\$45.37	7/1/2021	12/31/2382
82154	ANDROSTANEDIOL GLUCURONIDE	L1	\$45.37	7/1/2021	12/31/2382
82156	AMYLASE, URINE (DIASTASE)		\$11.21	7/1/2021	12/31/2382
82157	ANDROSTENEDIONE		\$46.06	7/1/2021	12/31/2382
82157	ANDROSTENEDIONE	L1	\$46.06	7/1/2021	12/31/2382
82159	ANDROSTERONE;		\$41.26	7/1/2021	12/31/2382
82160	ANDROSTERONE		\$39.35	7/1/2021	12/31/2382
82160	ANDROSTERONE	L1	\$39.35	7/1/2021	12/31/2382
82163	ANGIOTENSIN II		\$32.30	7/1/2021	12/31/2382
82163	ANGIOTENSIN II	L1	\$32.30	7/1/2021	12/31/2382
82164	ANGIOTENSIN I - CONVERTING ENZYME (ACE)		\$22.97	7/1/2021	12/31/2382
82164	ANGIOTENSIN I - CONVERTING ENZYME (ACE)	L1	\$22.97	7/1/2021	12/31/2382
82165	ANILINE		\$12.27	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
82168	ANTIHISTAMINES		\$21.68	7/1/2021	12/31/2382
82170	ANTIMONY, URINE		\$44.06	7/1/2021	12/31/2382
82170	ANTIMONY, URINE	L1	\$44.06	7/1/2021	12/31/2382
82172	APOLIPOPROTEIN, EACH		\$24.38	7/1/2021	12/31/2382
82172	APOLIPOPROTEIN, EACH	90	\$24.38	7/1/2021	12/31/2382
82172	APOLIPOPROTEIN, EACH	L1	\$24.38	7/1/2021	12/31/2382
82173	ARGININE TOLERANCE TEST		\$23.11	7/1/2021	12/31/2382
82175	ARSENIC		\$29.86	7/1/2021	12/31/2382
82175	ARSENIC	L1	\$29.86	7/1/2021	12/31/2382
82180	ASCORBIC ACID (VITAMIN C), BLOOD		\$15.54	7/1/2021	12/31/2382
82180	ASCORBIC ACID (VITAMIN C), BLOOD	L1	\$15.54	7/1/2021	12/31/2382
82190	ATOMIC ABSORPTION SPECTROSCOPY, EACH ANALYTE		\$23.46	7/1/2021	12/31/2382
82190	ATOMIC ABSORPTION SPECTROSCOPY, EACH ANALYTE	L1	\$23.46	7/1/2021	12/31/2382
82205	BARBITURATES, NOT ELSEWHERE SPECIFIED		\$18.03	7/1/2021	12/31/2382
82210	BARBITURATES; QUANTITATIVE AND IDENTIFICATION		\$20.98	7/1/2021	12/31/2382
82225	BARIUM		\$32.09	7/1/2021	12/31/2382
82231	BETA-2 MICROGLOBULIN, RIA; URINE		\$27.97	7/1/2021	12/31/2382
82232	BETA-2 MICROGLOBULIN		\$25.47	7/1/2021	12/31/2382
82232	BETA-2 MICROGLOBULIN	91	\$25.47	7/1/2021	12/31/2382
82232	BETA-2 MICROGLOBULIN	L1	\$25.47	7/1/2021	12/31/2382
82235	BICARBONATE EXCRETION, URINE		\$8.57	7/1/2021	12/31/2382
82236	BICARBONATE LOADING TEST		\$8.80	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
82239	BILE ACIDS; TOTAL		\$26.96	7/1/2021	12/31/2382
82239	BILE ACIDS; TOTAL	L1	\$26.96	7/1/2021	12/31/2382
82240	BILE ACIDS; CHOLYLGLYCINE		\$22.24	7/1/2021	12/31/2382
82240	BILE ACIDS; CHOLYLGLYCINE	L1	\$22.24	7/1/2021	12/31/2382
82245	BILE PIGMENTS, URINE		\$3.88	7/1/2021	12/31/2382
82247	BILIRUBIN; TOTAL		\$7.92	7/1/2021	12/31/2382
82247	BILIRUBIN; TOTAL	59	\$7.92	7/1/2021	12/31/2382
82247	BILIRUBIN; TOTAL	90	\$7.92	7/1/2021	12/31/2382
82247	BILIRUBIN; TOTAL	91	\$7.92	7/1/2021	12/31/2382
82247	BILIRUBIN; TOTAL	L1	\$7.92	7/1/2021	12/31/2382
82247	BILIRUBIN; TOTAL	XU	\$7.92	7/1/2021	12/31/2382
82248	BILIRUBIN; DIRECT		\$7.92	7/1/2021	12/31/2382
82248	BILIRUBIN; DIRECT	59	\$7.92	7/1/2021	12/31/2382
82248	BILIRUBIN; DIRECT	91	\$7.92	7/1/2021	12/31/2382
82248	BILIRUBIN; DIRECT	L1	\$7.92	7/1/2021	12/31/2382
82248	BILIRUBIN; DIRECT	PO	\$7.92	7/1/2021	12/31/2382
82248	BILIRUBIN; DIRECT	QV	\$7.92	7/1/2021	12/31/2382
82248	BILIRUBIN; DIRECT	XU	\$7.92	7/1/2021	12/31/2382
82252	BILIRUBIN; FECES, QUALITATIVE		\$7.16	7/1/2021	12/31/2382
82252	BILIRUBIN; FECES, QUALITATIVE	L1	\$7.16	7/1/2021	12/31/2382
82260	BILIRUBIN; URINE, QUANTITATIVE		\$6.42	7/1/2021	12/31/2382
82261	BIOTINIDASE, EACH SPECIMEN		\$26.55	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
82261	BIOTINIDASE, EACH SPECIMEN	L1	\$26.55	7/1/2021	12/31/2382
82265	BILIRUBIN; AMNIOTIC FLUID, QUANTITATIVE		\$8.80	7/1/2021	12/31/2382
82268	BISMUTH		\$42.61	7/1/2021	12/31/2382
82270	BLOOD, OCCULT; FECES, 1-3 SIMULTANEOUS DETERMINATIONS		\$5.12	7/1/2021	12/31/2382
82270	BLOOD, OCCULT; FECES, 1-3 SIMULTANEOUS DETERMINATIONS	59	\$5.12	7/1/2021	12/31/2382
82270	BLOOD, OCCULT; FECES, 1-3 SIMULTANEOUS DETERMINATIONS	91	\$5.12	7/1/2021	12/31/2382
82270	BLOOD, OCCULT; FECES, 1-3 SIMULTANEOUS DETERMINATIONS	L1	\$5.12	7/1/2021	12/31/2382
82271	BLOOD, OCCULT BY PEROXIDASE ACTIVITY, QUALITATIVE; OTHER SOURCES		\$5.12	7/1/2021	12/31/2382
82271	BLOOD, OCCULT BY PEROXIDASE ACTIVITY, QUALITATIVE; OTHER SOURCES	L1	\$5.12	7/1/2021	12/31/2382
82272	BLOOD, OCCULT BY PEROXIDASE ACTIVITY, QUALITATIVE, FECES, SINGLE SPECIMEN		\$5.12	7/1/2021	12/31/2382
82272	BLOOD, OCCULT BY PEROXIDASE ACTIVITY, QUALITATIVE, FECES, SINGLE SPECIMEN	59	\$5.12	7/1/2021	12/31/2382
82272	BLOOD, OCCULT BY PEROXIDASE ACTIVITY, QUALITATIVE, FECES, SINGLE SPECIMEN	91	\$5.12	7/1/2021	12/31/2382
82272	BLOOD, OCCULT BY PEROXIDASE ACTIVITY, QUALITATIVE, FECES, SINGLE SPECIMEN	L1	\$5.12	7/1/2021	12/31/2382
82273	BLOOD, OCCULT; OTHER SOURCES, QUALITATIVE		\$5.12	7/1/2021	12/31/2382
82273	BLOOD, OCCULT; OTHER SOURCES, QUALITATIVE	QW	\$5.12	7/1/2021	12/31/2382
82274	BLOOD, OCCULT, BY FECAL HEMOGLOBIN DETERMINATION BY IMMUNOASSAY, QUALITATIVE, FECES, 1-3 SIMULTANEOUS		\$24.74	7/1/2021	12/31/2382
82280	BORIC ACID; BLOOD		\$41.66	7/1/2021	12/31/2382
82285	BORIC ACID; URINE		\$38.35	7/1/2021	12/31/2382
82286	BRADYKININ		\$10.83	7/1/2021	12/31/2382
82286	BRADYKININ	L1	\$10.83	7/1/2021	12/31/2382
82290	BROMIDES; BLOOD		\$10.00	7/1/2021	12/31/2382
82291	BROMIDES; URINE		\$10.49	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
82300	CADMIUM		\$36.02	7/1/2021	12/31/2382
82300	CADMIUM	L1	\$36.02	7/1/2021	12/31/2382
82305	CAFFEINE		\$33.95	7/1/2021	12/31/2382
82306	CALCIFEDIOL (25-OH VITAMIN D-3)		\$46.58	7/1/2021	12/31/2382
82306	CALCIFEDIOL (25-OH VITAMIN D-3)	GA	\$46.58	7/1/2021	12/31/2382
82306	CALCIFEDIOL (25-OH VITAMIN D-3)	GZ	\$46.58	7/1/2021	12/31/2382
82306	CALCIFEDIOL (25-OH VITAMIN D-3)	L1	\$46.58	7/1/2021	12/31/2382
82307	CALCIFEROL (VITAMIN D)		\$36.61	7/1/2021	12/31/2382
82308	CALCITONIN		\$42.13	7/1/2021	12/31/2382
82308	CALCITONIN	L1	\$42.13	7/1/2021	12/31/2382
82310	CALCIUM; TOTAL		\$8.11	7/1/2021	12/31/2382
82310	CALCIUM; TOTAL	59	\$8.11	7/1/2021	12/31/2382
82310	CALCIUM; TOTAL	91	\$5.12	7/1/2021	12/31/2382
82310	CALCIUM; TOTAL	L1	\$8.11	7/1/2021	12/31/2382
82310	CALCIUM; TOTAL	XU	\$8.11	7/1/2021	12/31/2382
82315	CALCIUM, BLOOD; FLUOROMETRIC		\$8.94	7/1/2021	12/31/2382
82320	CALCIUM, BLOOD; EMISSION FLAME PHOTOMETRY		\$8.94	7/1/2021	12/31/2382
82325	CALCIUM, BLOOD; ATOMIC ABSORPTION FLAME PHOTOMETRY		\$7.88	7/1/2021	12/31/2382
82330	CALCIUM; IONIZED		\$10.11	7/1/2021	12/31/2382
82330	CALCIUM; IONIZED	59	\$10.11	7/1/2021	12/31/2382
82330	CALCIUM; IONIZED	91	\$10.11	7/1/2021	12/31/2382
82330	CALCIUM; IONIZED	L1	\$10.11	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
82330	CALCIUM; IONIZED	XU	\$10.11	7/1/2021	12/31/2382
82331	CALCIUM; AFTER CALCIUM INFUSION TEST		\$8.14	7/1/2021	12/31/2382
82331	CALCIUM; AFTER CALCIUM INFUSION TEST	L1	\$8.14	7/1/2021	12/31/2382
82335	CALCIUM, URINE; QUALITATIVE (SULKOWITCH)		\$8.20	7/1/2021	12/31/2382
82340	CALCIUM; URINE QUANTITATIVE, TIMED SPECIMEN		\$9.50	7/1/2021	12/31/2382
82340	CALCIUM; URINE QUANTITATIVE, TIMED SPECIMEN	L1	\$9.50	7/1/2021	12/31/2382
82355	CALCULUS (STONE); QUALITATIVE ANALYSIS, CHEMICAL		\$18.21	7/1/2021	12/31/2382
82355	CALCULUS (STONE); QUALITATIVE ANALYSIS, CHEMICAL	L1	\$18.21	7/1/2021	12/31/2382
82360	CALCULUS (STONE); QUANTITATIVE ANALYSIS, CHEMICAL		\$20.26	7/1/2021	12/31/2382
82360	CALCULUS (STONE); QUANTITATIVE ANALYSIS, CHEMICAL	L1	\$20.26	7/1/2021	12/31/2382
82365	CALCULUS (STONE); INFRARED SPECTROSCOPY		\$20.29	7/1/2021	12/31/2382
82365	CALCULUS (STONE); INFRARED SPECTROSCOPY	L1	\$20.29	7/1/2021	12/31/2382
82370	CALCULUS (STONE); X-RAY DIFFRACTION		\$19.72	7/1/2021	12/31/2382
82370	CALCULUS (STONE); X-RAY DIFFRACTION	L1	\$19.72	7/1/2021	12/31/2382
82372	CARBAMAZEPINE, SERUM		\$25.12	7/1/2021	12/31/2382
82372	CARBAMAZEPINE, SERUM	L1	\$25.12	7/1/2021	12/31/2382
82373	CARBOHYDRATE DEFICIENT TRANSFERRIN		\$28.42	7/1/2021	12/31/2382
82373	CARBOHYDRATE DEFICIENT TRANSFERRIN	L1	\$28.42	7/1/2021	12/31/2382
82374	CARBON DIOXIDE (BICARBONATE)		\$7.69	7/1/2021	12/31/2382
82374	CARBON DIOXIDE (BICARBONATE)	59	\$7.69	7/1/2021	12/31/2382
82374	CARBON DIOXIDE (BICARBONATE)	90	\$7.69	7/1/2021	12/31/2382
82374	CARBON DIOXIDE (BICARBONATE)	91	\$7.69	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
82374	CARBON DIOXIDE (BICARBONATE)	L1	\$7.69	7/1/2021	12/31/2382
82375	CARBON MONOXIDE, (CARBOXYHEMOGLOBIN); QUANTITATIVE		\$19.39	7/1/2021	12/31/2382
82375	CARBON MONOXIDE, (CARBOXYHEMOGLOBIN); QUANTITATIVE	91	\$19.39	7/1/2021	12/31/2382
82375	CARBON MONOXIDE, (CARBOXYHEMOGLOBIN); QUANTITATIVE	L1	\$19.39	7/1/2021	12/31/2382
82376	CARBON MONOXIDE, (CARBOXYHEMOGLOBIN); QUALITATIVE		\$9.42	7/1/2021	12/31/2382
82376	CARBON MONOXIDE, (CARBOXYHEMOGLOBIN); QUALITATIVE	L1	\$9.42	7/1/2021	12/31/2382
82378	CARCINOEMBRYONIC ANTIGEN (CEA)		\$29.86	7/1/2021	12/31/2382
82378	CARCINOEMBRYONIC ANTIGEN (CEA)	GZ	\$29.86	7/1/2021	12/31/2382
82378	CARCINOEMBRYONIC ANTIGEN (CEA)	L1	\$29.86	7/1/2021	12/31/2382
82379	CARNITINE (TOTAL AND FREE), QUANTITATIVE, EACH SPECIMEN		\$26.55	7/1/2021	12/31/2382
82379	CARNITINE (TOTAL AND FREE), QUANTITATIVE, EACH SPECIMEN	L1	\$26.55	7/1/2021	12/31/2382
82380	CAROTENE		\$14.52	7/1/2021	12/31/2382
82380	CAROTENE	L1	\$14.52	7/1/2021	12/31/2382
82382	CATECHOLAMINES; TOTAL URINE		\$27.05	7/1/2021	12/31/2382
82382	CATECHOLAMINES; TOTAL URINE	L1	\$27.05	7/1/2021	12/31/2382
82383	CATECHOLAMINES; BLOOD		\$36.77	7/1/2021	12/31/2382
82383	CATECHOLAMINES; BLOOD	L1	\$36.77	7/1/2021	12/31/2382
82384	CATECHOLAMINES; FRACTIONATED		\$36.77	7/1/2021	12/31/2382
82384	CATECHOLAMINES; FRACTIONATED	91	\$36.77	7/1/2021	12/31/2382
82384	CATECHOLAMINES; FRACTIONATED	L1	\$36.77	7/1/2021	12/31/2382
82387	CATHEPSIN-D		\$32.74	7/1/2021	12/31/2382
82390	CERULOPLASMIN		\$16.91	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
82390	CERULOPLASMIN	91	\$16.91	7/1/2021	12/31/2382
82390	CERULOPLASMIN	L1	\$16.91	7/1/2021	12/31/2382
82397	CHEMILUMINESCENT ASSAY		\$22.23	7/1/2021	12/31/2382
82397	CHEMILUMINESCENT ASSAY	90	\$22.23	7/1/2021	12/31/2382
82397	CHEMILUMINESCENT ASSAY	91	\$22.23	7/1/2021	12/31/2382
82397	CHEMILUMINESCENT ASSAY	L1	\$22.23	7/1/2021	12/31/2382
82400	CHLORAL HYDRATE; BLOOD		\$29.29	7/1/2021	12/31/2382
82405	CHLORAL HYDRATE; URINE		\$19.93	7/1/2021	12/31/2382
82415	CHLORAMPHENICOL		\$19.93	7/1/2021	12/31/2382
82415	CHLORAMPHENICOL	L1	\$19.93	7/1/2021	12/31/2382
82418	CHLORAZEPATE DIPOTASSIUM		\$28.95	7/1/2021	12/31/2382
82420	CHLORDIAZEPOXIDE; BLOOD		\$30.98	7/1/2021	12/31/2382
82425	CHLORDIAZEPOXIDE; URINE		\$25.49	7/1/2021	12/31/2382
82435	CHLORIDE; BLOOD		\$7.23	7/1/2021	12/31/2382
82435	CHLORIDE; BLOOD	59	\$7.23	7/1/2021	12/31/2382
82435	CHLORIDE; BLOOD	91	\$7.23	7/1/2021	12/31/2382
82435	CHLORIDE; BLOOD	L1	\$7.23	7/1/2021	12/31/2382
82436	CHLORIDE; URINE		\$7.92	7/1/2021	12/31/2382
82436	CHLORIDE; URINE	59	\$7.92	7/1/2021	12/31/2382
82436	CHLORIDE; URINE	91	\$7.92	7/1/2021	12/31/2382
82436	CHLORIDE; URINE	L1	\$7.92	7/1/2021	12/31/2382
82437	CHLORIDES; SWEAT (WITHOUT IONTOPHORESIS)		\$10.49	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
82438	CHLORIDE; SPINAL FLUID		\$7.69	7/1/2021	12/31/2382
82438	CHLORIDE; SPINAL FLUID	L1	\$7.69	7/1/2021	12/31/2382
82441	CHLORINATED HYDROCARBONS, SCREEN		\$9.43	7/1/2021	12/31/2382
82441	CHLORINATED HYDROCARBONS, SCREEN	L1	\$9.43	7/1/2021	12/31/2382
82443	CHLOROTHIAZIDE-HYDROCHLOROTHIAZIDE		\$30.48	7/1/2021	12/31/2382
82465	CHOLESTEROL, SERUM; TOTAL		\$6.85	7/1/2021	12/31/2382
82465	CHOLESTEROL, SERUM; TOTAL	59	\$6.85	7/1/2021	12/31/2382
82465	CHOLESTEROL, SERUM; TOTAL	91	\$6.85	7/1/2021	12/31/2382
82465	CHOLESTEROL, SERUM; TOTAL	GA	\$6.85	7/1/2021	12/31/2382
82465	CHOLESTEROL, SERUM; TOTAL	L1	\$6.85	7/1/2021	12/31/2382
82465	CHOLESTEROL, SERUM; TOTAL	QW	\$6.85	7/1/2021	12/31/2382
82470	CHOLESTEROL, SERUM; TOTAL AND ESTERS		\$12.02	7/1/2021	12/31/2382
82480	CHOLINESTERASE; SERUM		\$12.40	7/1/2021	12/31/2382
82480	CHOLINESTERASE; SERUM	L1	\$12.40	7/1/2021	12/31/2382
82482	CHOLINESTERASE; RBC		\$12.09	7/1/2021	12/31/2382
82482	CHOLINESTERASE; RBC	L1	\$12.09	7/1/2021	12/31/2382
82484	CHOLINESTERASE; SERUM AND RBC		\$25.14	7/1/2021	12/31/2382
82485	CHONDROITIN B SULFATE, QUANTITATIVE		\$32.49	7/1/2021	12/31/2382
82485	CHONDROITIN B SULFATE, QUANTITATIVE	L1	\$32.49	7/1/2021	12/31/2382
82486	CHROMATOGRAPHY, QUALITATIVE; COLUMN (EG, GAS-LIQUID OR HIGH PERFORMANCE LIQUID CHROMATOGRAPHY), ANALYTE NOT EL		\$28.42	7/1/2021	12/31/2382
82486	CHROMATOGRAPHY, QUALITATIVE; COLUMN (EG, GAS-LIQUID OR HIGH PERFORMANCE LIQUID CHROMATOGRAPHY), ANALYTE NOT EL	L1	\$28.42	7/1/2021	12/31/2382
82487	CHROMATOGRAPHY, QUALITATIVE; PAPER, 1-DIMENSIONAL, ANALYTE NOT ELSEWHERE SPECIFIED		\$25.12	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
82487	CHROMATOGRAPHY, QUALITATIVE; PAPER, 1-DIMENSIONAL, ANALYTE NOT ELSEWHERE SPECIFIED	L1	\$25.12	7/1/2021	12/31/2382
82488	CHROMATOGRAPHY, QUALITATIVE; PAPER, 2-DIMENSIONAL, ANALYTE NOT ELSEWHERE SPECIFIED		\$33.62	7/1/2021	12/31/2382
82488	CHROMATOGRAPHY, QUALITATIVE; PAPER, 2-DIMENSIONAL, ANALYTE NOT ELSEWHERE SPECIFIED	L1	\$33.62	7/1/2021	12/31/2382
82489	CHROMATOGRAPHY, QUALITATIVE; THIN LAYER, ANALYTE NOT ELSEWHERE SPECIFIED		\$29.10	7/1/2021	12/31/2382
82489	CHROMATOGRAPHY, QUALITATIVE; THIN LAYER, ANALYTE NOT ELSEWHERE SPECIFIED	L1	\$29.10	7/1/2021	12/31/2382
82491	CHROMOTOGRAPHY, QUANTITATIVE; COLUMN (EG, GAS LIQUID OR HIGH PERFORMANCE LIQUID CHROMATOGRAPHY), ANALYTE NOT E		\$28.42	7/1/2021	12/31/2382
82491	CHROMOTOGRAPHY, QUANTITATIVE; COLUMN (EG, GAS LIQUID OR HIGH PERFORMANCE LIQUID CHROMATOGRAPHY), ANALYTE NOT E	59	\$28.42	7/1/2021	12/31/2382
82491	CHROMOTOGRAPHY, QUANTITATIVE; COLUMN (EG, GAS LIQUID OR HIGH PERFORMANCE LIQUID CHROMATOGRAPHY), ANALYTE NOT E	90	\$28.42	7/1/2021	12/31/2382
82491	CHROMOTOGRAPHY, QUANTITATIVE; COLUMN (EG, GAS LIQUID OR HIGH PERFORMANCE LIQUID CHROMATOGRAPHY), ANALYTE NOT E	91	\$28.42	7/1/2021	12/31/2382
82491	CHROMOTOGRAPHY, QUANTITATIVE; COLUMN (EG, GAS LIQUID OR HIGH PERFORMANCE LIQUID CHROMATOGRAPHY), ANALYTE NOT E	L1	\$28.42	7/1/2021	12/31/2382
82492	CHROMATOGRAPHY, QUANTITATIVE,COLUMN (EG, GAS LIQUID OR HPLC); MULTIPLE ANALYTES, SINGLE STATIONARY AND MOBIL		\$28.42	7/1/2021	12/31/2382
82492	CHROMATOGRAPHY, QUANTITATIVE,COLUMN (EG, GAS LIQUID OR HPLC); MULTIPLE ANALYTES, SINGLE STATIONARY AND MOBIL	91	\$28.42	7/1/2021	12/31/2382
82492	CHROMATOGRAPHY, QUANTITATIVE,COLUMN (EG, GAS LIQUID OR HPLC); MULTIPLE ANALYTES, SINGLE STATIONARY AND MOBIL	L1	\$28.42	7/1/2021	12/31/2382
82495	CHROMIUM		\$31.92	7/1/2021	12/31/2382
82495	CHROMIUM	L1	\$31.92	7/1/2021	12/31/2382
82507	CITRATE		\$43.76	7/1/2021	12/31/2382
82507	CITRATE	L1	\$43.76	7/1/2021	12/31/2382
82512	CLONAZEPAM		\$32.99	7/1/2021	12/31/2382
82520	COCAINE OR METABOLITE		\$23.84	7/1/2021	12/31/2382
82523	COLLAGEN CROSS LINKS, ANY METHOD		\$18.31	7/1/2021	12/31/2382
82523	COLLAGEN CROSS LINKS, ANY METHOD	L1	\$18.31	7/1/2021	12/31/2382
82523	COLLAGEN CROSS LINKS, ANY METHOD	QW	\$18.31	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
82525	COPPER		\$19.53	7/1/2021	12/31/2382
82525	COPPER	L1	\$19.53	7/1/2021	12/31/2382
82526	COPPER; URINE		\$20.83	7/1/2021	12/31/2382
82526	COPPER; URINE	L1	\$20.83	7/1/2021	12/31/2382
82528	CORTICOSTERONE		\$35.42	7/1/2021	12/31/2382
82528	CORTICOSTERONE	L1	\$35.42	7/1/2021	12/31/2382
82529	CORTISOL; FLUOROMETRIC, PLASMA		\$26.76	7/1/2021	12/31/2382
82530	CORTISOL; FREE		\$26.30	7/1/2021	12/31/2382
82530	CORTISOL; FREE	L1	\$26.30	7/1/2021	12/31/2382
82531	CORTISOL; CPB, PLASMA		\$29.48	7/1/2021	12/31/2382
82532	CORTISOL; CPB, URINE		\$33.33	7/1/2021	12/31/2382
82533	CORTISOL; TOTAL		\$25.65	7/1/2021	12/31/2382
82533	CORTISOL; TOTAL	59	\$25.65	7/1/2021	12/31/2382
82533	CORTISOL; TOTAL	91	\$25.65	7/1/2021	12/31/2382
82533	CORTISOL; TOTAL	L1	\$25.65	7/1/2021	12/31/2382
82533	CORTISOL; TOTAL	XU	\$25.65	7/1/2021	12/31/2382
82534	CORTISOL; RIA, URINE		\$32.36	7/1/2021	12/31/2382
82534	CORTISOL; RIA, URINE	L1	\$32.36	7/1/2021	12/31/2382
82536	CORTISOL; AFTER ADRENOCORTICOTROPIC HORMONE (ACTH) ADMINISTRATION		\$29.78	7/1/2021	12/31/2382
82537	CORTISOL; 48 HOURS AFTER CONTINUOUS ACTH INFUSION		\$29.78	7/1/2021	12/31/2382
82538	CORTISOL; AFTER METYRAPONE TARTRATE ADMINISTRATION		\$29.78	7/1/2021	12/31/2382
82539	CORTISOL; DEXAMETHASONE SUPPRESSION TEST, PLASMA AND/OR URINE		\$28.57	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
82540	CREATINE		\$7.30	7/1/2021	12/31/2382
82540	CREATINE	L1	\$7.30	7/1/2021	12/31/2382
82541	COLUMNM CHROMATOGRAPHY/MASS SPECTROMETRY; SINGLE STATIONARY AND MOBILE PHASE		\$28.42	7/1/2021	12/31/2382
82541	COLUMNM CHROMATOGRAPHY/MASS SPECTROMETRY; SINGLE STATIONARY AND MOBILE PHASE	90	\$28.42	7/1/2021	12/31/2382
82541	COLUMNM CHROMATOGRAPHY/MASS SPECTROMETRY; SINGLE STATIONARY AND MOBILE PHASE	L1	\$28.42	7/1/2021	12/31/2382
82542	COLUMN CHROMOTOGRAPHY/MASS SPECTROMETRY; QUANTITATIVE, SINGLE STATIONARY AND MOBILE		\$28.42	7/1/2021	12/31/2382
82543	COLUMN CHROMATOGRAPHY/MASS SPECTROMETRY; STABLE ISOTOPE DILUTION, MULTIPLE ANALYTES, QUANTITATIVE, SINGLE		\$28.42	7/1/2021	12/31/2382
82543	COLUMN CHROMATOGRAPHY/MASS SPECTROMETRY; STABLE ISOTOPE DILUTION, MULTIPLE ANALYTES, QUANTITATIVE, SINGLE	L1	\$28.42	7/1/2021	12/31/2382
82544	COLUMN CHROMATOGRAPHY/MASS SPECTROMETRY; STABLE ISOTOPE DILUTION, MULTIPLE ANALYTES, QUANTITATIVE, SINGLE		\$28.42	7/1/2021	12/31/2382
82544	COLUMN CHROMATOGRAPHY/MASS SPECTROMETRY; STABLE ISOTOPE DILUTION, MULTIPLE ANALYTES, QUANTITATIVE, SINGLE	LM	\$28.42	7/1/2021	12/31/2382
82545	CREATINE; URINE		\$9.05	7/1/2021	12/31/2382
82546	CREATINE AND CREATININE		\$12.95	7/1/2021	12/31/2382
82550	CREATINE KINASE (CK), (CPK); TOTAL		\$10.25	7/1/2021	12/31/2382
82550	CREATINE KINASE (CK), (CPK); TOTAL	59	\$10.25	7/1/2021	12/31/2382
82550	CREATINE KINASE (CK), (CPK); TOTAL	91	\$10.25	7/1/2021	12/31/2382
82550	CREATINE KINASE (CK), (CPK); TOTAL	ET	\$10.25	7/1/2021	12/31/2382
82550	CREATINE KINASE (CK), (CPK); TOTAL	L1	\$10.25	7/1/2021	12/31/2382
82550	CREATINE KINASE (CK), (CPK); TOTAL	PO	\$10.25	7/1/2021	12/31/2382
82550	CREATINE KINASE (CK), (CPK); TOTAL	XU	\$10.25	7/1/2021	12/31/2382
82552	CREATINE KINASE (CK), (CPK); ISOENZYMES		\$21.07	7/1/2021	12/31/2382
82552	CREATINE KINASE (CK), (CPK); ISOENZYMES	L1	\$21.07	7/1/2021	12/31/2382
82553	CREATINE KINASE (CK), (CPK); MB FRACTION ONLY		\$16.83	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
82553	CREATINE KINASE (CK), (CPK); MB FRACTION ONLY	59	\$16.83	7/1/2021	12/31/2382
82553	CREATINE KINASE (CK), (CPK); MB FRACTION ONLY	91	\$16.83	7/1/2021	12/31/2382
82553	CREATINE KINASE (CK), (CPK); MB FRACTION ONLY	L1	\$16.83	7/1/2021	12/31/2382
82554	CREATINE KINASE (CK), (CPK); ISOFORMS		\$18.67	7/1/2021	12/31/2382
82554	CREATINE KINASE (CK), (CPK); ISOFORMS	L1	\$18.67	7/1/2021	12/31/2382
82555	CREATINE PHOSPHOKINASE (CPK), BLOOD; COLORIMETRIC		\$11.21	7/1/2021	12/31/2382
82565	CREATININE		\$8.07	7/1/2021	12/31/2382
82565	CREATININE	59	\$8.07	7/1/2021	12/31/2382
82565	CREATININE	91	\$8.07	7/1/2021	12/31/2382
82565	CREATININE	ET	\$8.07	7/1/2021	12/31/2382
82565	CREATININE	L1	\$8.07	7/1/2021	12/31/2382
82565	CREATININE	PO	\$8.07	7/1/2021	12/31/2382
82565	CREATININE	XU	\$8.07	7/1/2021	12/31/2382
82570	CREATININE URINE		\$8.14	7/1/2021	12/31/2382
82570	CREATININE URINE	59	\$8.14	7/1/2021	12/31/2382
82570	CREATININE URINE	91	\$8.14	7/1/2021	12/31/2382
82570	CREATININE URINE	L1	\$8.14	7/1/2021	12/31/2382
82570	CREATININE URINE	PO	\$8.14	7/1/2021	12/31/2382
82570	CREATININE URINE	QW	\$8.14	7/1/2021	12/31/2382
82570	CREATININE URINE	XU	\$8.14	7/1/2021	12/31/2382
82575	CREATININE CLEARANCE		\$14.87	7/1/2021	12/31/2382
82575	CREATININE CLEARANCE	L1	\$14.87	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
82585	CRYOFIBRINOGEN		\$13.49	7/1/2021	12/31/2382
82585	CRYOFIBRINOGEN	L1	\$13.49	7/1/2021	12/31/2382
82595	CRYOGLOBULIN		\$10.11	7/1/2021	12/31/2382
82595	CRYOGLOBULIN	L1	\$10.11	7/1/2021	12/31/2382
82600	CYANIDE		\$22.85	7/1/2021	12/31/2382
82600	CYANIDE	L1	\$22.85	7/1/2021	12/31/2382
82601	CYANIDE; TISSUE		\$22.11	7/1/2021	12/31/2382
82606	CYANOCOBALAMIN (VITAMIN B-12); BIOASSAY		\$24.76	7/1/2021	12/31/2382
82607	CYANOCOBALAMIN (VITAMIN B-12);		\$23.73	7/1/2021	12/31/2382
82607	CYANOCOBALAMIN (VITAMIN B-12);	91	\$23.73	7/1/2021	12/31/2382
82607	CYANOCOBALAMIN (VITAMIN B-12);	L1	\$23.73	7/1/2021	12/31/2382
82608	CYANOCOBALAMIN (VITAMIN B-12); UNSATURATED BINDING CAPACITY		\$22.54	7/1/2021	12/31/2382
82608	CYANOCOBALAMIN (VITAMIN B-12); UNSATURATED BINDING CAPACITY	L1	\$22.54	7/1/2021	12/31/2382
82610	CYSTATIN C		\$21.40	7/1/2021	12/31/2382
82614	CYSTINE, BLOOD, QUALITATIVE		\$14.87	7/1/2021	12/31/2382
82614	CYSTINE, BLOOD, QUALITATIVE	L1	\$14.87	7/1/2021	12/31/2382
82615	CYSTINE AND HOMOCYSTINE, URINE; QUALITATIVE		\$12.85	7/1/2021	12/31/2382
82615	CYSTINE AND HOMOCYSTINE, URINE; QUALITATIVE	L1	\$12.85	7/1/2021	12/31/2382
82620	CYSTINE AND HOMOCYSTINE, URINE; QUANTITATIVE		\$20.48	7/1/2021	12/31/2382
82624	CYSTINE AMINOPEPTIDASE		\$17.68	7/1/2021	12/31/2382
82626	DEHYDROEPIANDROSTERONE (DHEA)		\$38.07	7/1/2021	12/31/2382
82626	DEHYDROEPIANDROSTERONE (DHEA)	L1	\$38.07	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
82627	DEHYDROEPIANDROSTERONE-SULFATE (DHEA-S)		\$35.00	7/1/2021	12/31/2382
82627	DEHYDROEPIANDROSTERONE-SULFATE (DHEA-S)	L1	\$35.00	7/1/2021	12/31/2382
82628	DESIPRAMINE		\$29.78	7/1/2021	12/31/2382
82633	DESOXYCORTICOSTERONE, 11-		\$48.75	7/1/2021	12/31/2382
82633	DESOXYCORTICOSTERONE, 11-	L1	\$48.75	7/1/2021	12/31/2382
82634	DEOXYCORTISOL, 11-		\$46.06	7/1/2021	12/31/2382
82634	DEOXYCORTISOL, 11-	L1	\$46.06	7/1/2021	12/31/2382
82635	DIACETIC ACID		\$11.21	7/1/2021	12/31/2382
82636	DIAZEPAM		\$28.24	7/1/2021	12/31/2382
82638	DIBUCAINE NUMBER		\$19.27	7/1/2021	12/31/2382
82638	DIBUCAINE NUMBER	L1	\$19.27	7/1/2021	12/31/2382
82639	DICUMAROL		\$28.93	7/1/2021	12/31/2382
82640	DIGITOXIN (DIGITALIS); BLOOD, RIA		\$24.39	7/1/2021	12/31/2382
82641	DIGITOXIN (DIGITALIS); URINE		\$22.26	7/1/2021	12/31/2382
82642	MEASUREMENT OF DIHYDROTESTOSTERONE		\$36.64	7/1/2021	12/31/2382
82643	DIGOXIN, RIA		\$22.99	7/1/2021	12/31/2382
82646	DIHYDROCODEINONE		\$32.49	7/1/2021	12/31/2382
82649	DIHYDROMORPHINONE		\$40.45	7/1/2021	12/31/2382
82651	DIHYDROTESTOSTERONE (DHT)		\$40.63	7/1/2021	12/31/2382
82652	DIHYDROXYVITAMIN D, 1,25-		\$60.57	7/1/2021	12/31/2382
82652	DIHYDROXYVITAMIN D, 1,25-	L1	\$60.57	7/1/2021	12/31/2382
82653	ELASTASE, PANCREATIC (EL-1), FECAL; QUANTITATIVE		\$22.97	1/1/2022	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
82654	DIMETHADIONE		\$21.78	7/1/2021	12/31/2382
82656	ELASTASE, PANCREATIC (EL-1), FECAL, QUALITATIVE OR SEMI-QUANTITATIVE		\$18.16	7/1/2021	12/31/2382
82656	ELASTASE, PANCREATIC (EL-1), FECAL, QUALITATIVE OR SEMI-QUANTITATIVE	L1	\$18.16	7/1/2021	12/31/2382
82657	ENZYME ACTIVITY IN BLOOD CELLS, CULTURED CELLS, OR TISSUE, NOT ELSEWHERE SPECIFIED; NONRADIOACTIVE SUBSTRATE		\$28.42	7/1/2021	12/31/2382
82657	ENZYME ACTIVITY IN BLOOD CELLS, CULTURED CELLS, OR TISSUE, NOT ELSEWHERE SPECIFIED; NONRADIOACTIVE SUBSTRATE	L1	\$28.42	7/1/2021	12/31/2382
82658	ENZYME ACTIVITY IN BLOOD CELLS, CULTURED CELLS, OR TISSUE;RADIOACTIVE SUBSTRATE, EACH SPECIMEN		\$28.42	7/1/2021	12/31/2382
82658	ENZYME ACTIVITY IN BLOOD CELLS, CULTURED CELLS, OR TISSUE;RADIOACTIVE SUBSTRATE, EACH SPECIMEN	L1	\$28.42	7/1/2021	12/31/2382
82660	DRUG SCREEN (AMPHETAMINES, BARBITURATES, ALKALOIDS)		\$21.26	7/1/2021	12/31/2382
82660	DRUG SCREEN (AMPHETAMINES, BARBITURATES, ALKALOIDS)	L1	\$21.26	7/1/2021	12/31/2382
82664	ELECTROPHORETIC TECHNIQUE, NOT ELSEWHERE SPECIFIED		\$39.16	7/1/2021	12/31/2382
82664	ELECTROPHORETIC TECHNIQUE, NOT ELSEWHERE SPECIFIED	L1	\$39.16	7/1/2021	12/31/2382
82666	EPIANDROSTERONE		\$27.07	7/1/2021	12/31/2382
82668	ERYTHROPOIETIN		\$14.64	7/1/2021	12/31/2382
82668	ERYTHROPOIETIN	L1	\$14.64	7/1/2021	12/31/2382
82670	ESTRADIOL		\$43.97	7/1/2021	12/31/2382
82670	ESTRADIOL	L1	\$43.97	7/1/2021	12/31/2382
82671	ESTROGENS; FRACTIONATED		\$50.83	7/1/2021	12/31/2382
82671	ESTROGENS; FRACTIONATED	L1	\$50.83	7/1/2021	12/31/2382
82672	ESTROGENS; TOTAL		\$34.12	7/1/2021	12/31/2382
82672	ESTROGENS; TOTAL	L1	\$34.12	7/1/2021	12/31/2382
82673	ESTRIOL; FLUOROMETRIC		\$26.80	7/1/2021	12/31/2382
82674	ESTRIOL; GLC		\$27.04	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
82676	ESTRIOL; CHEMICAL		\$33.83	7/1/2021	12/31/2382
82677	ESTRIOL		\$35.14	7/1/2021	12/31/2382
82677	ESTRIOL	L1	\$35.14	7/1/2021	12/31/2382
82678	ESTRONE; CHEMICAL		\$23.65	7/1/2021	12/31/2382
82679	ESTRONE		\$24.43	7/1/2021	12/31/2382
82679	ESTRONE	L1	\$24.43	7/1/2021	12/31/2382
82679	ESTRONE	QW	\$24.43	7/1/2021	12/31/2382
82681	DIRECT MEASUREMENT OF FREE ESTRADIOL (HORMONE)		\$28.61	7/1/2021	12/31/2382
82690	ETHCHLORVYNOL		\$27.20	7/1/2021	12/31/2382
82691	ETHCHLORVYNOL; URINE		\$26.30	7/1/2021	12/31/2382
82692	ETHOSUXIMIDE		\$28.26	7/1/2021	12/31/2382
82693	ETHYLENE GLYCOL		\$23.45	7/1/2021	12/31/2382
82693	ETHYLENE GLYCOL	L1	\$23.45	7/1/2021	12/31/2382
82694	ETIOCHOLANOLONE		\$20.98	7/1/2021	12/31/2382
82696	ETIOCHOLANOLONE		\$21.66	7/1/2021	12/31/2382
82696	ETIOCHOLANOLONE	L1	\$21.66	7/1/2021	12/31/2382
82705	FAT OR LIPIDS, FECES; QUALITATIVE		\$8.01	7/1/2021	12/31/2382
82705	FAT OR LIPIDS, FECES; QUALITATIVE	L1	\$8.01	7/1/2021	12/31/2382
82710	FAT OR LIPIDS, FECES; QUANTITATIVE		\$26.43	7/1/2021	12/31/2382
82710	FAT OR LIPIDS, FECES; QUANTITATIVE	L1	\$26.43	7/1/2021	12/31/2382
82715	FAT DIFFERENTIAL, FECES, QUANTITATIVE		\$27.08	7/1/2021	12/31/2382
82715	FAT DIFFERENTIAL, FECES, QUANTITATIVE	L1	\$27.08	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
82720	FATTY ACIDS, BLOOD; ESTERIFIED		\$18.59	7/1/2021	12/31/2382
82725	FATTY ACIDS, NONESTERIFIED		\$20.95	7/1/2021	12/31/2382
82725	FATTY ACIDS, NONESTERIFIED	L1	\$20.95	7/1/2021	12/31/2382
82726	VERY LONG CHAIN FATTY ACIDS		\$28.42	7/1/2021	12/31/2382
82726	VERY LONG CHAIN FATTY ACIDS	L1	\$28.42	7/1/2021	12/31/2382
82727	FERRIC CHLORIDE, URINE		\$16.92	7/1/2021	12/31/2382
82728	FERRITIN		\$21.43	7/1/2021	12/31/2382
82728	FERRITIN	CR	\$21.43	7/1/2021	12/31/2382
82728	FERRITIN	GA	\$21.43	7/1/2021	12/31/2382
82728	FERRITIN	L1	\$21.43	7/1/2021	12/31/2382
82730	FIBRINOGEN, QUANTITATIVE		\$14.89	7/1/2021	12/31/2382
82731	FETAL FIBRONECTIN, CERVICOVAGINAL SECRETIONS, SEMI-QUANTITATIVE		\$101.36	7/1/2021	12/31/2382
82731	FETAL FIBRONECTIN, CERVICOVAGINAL SECRETIONS, SEMI-QUANTITATIVE	L1	\$101.36	7/1/2021	12/31/2382
82735	FLUORIDE		\$29.18	7/1/2021	12/31/2382
82735	FLUORIDE	90	\$29.18	7/1/2021	12/31/2382
82735	FLUORIDE	L1	\$29.18	7/1/2021	12/31/2382
82740	FLUORIDE; URINE		\$33.46	7/1/2021	12/31/2382
82741	FLUCYTOSINE (5-FLUOROCYTOSINE)		\$25.60	7/1/2021	12/31/2382
82742	FLURAZEPAM		\$31.15	7/1/2021	12/31/2382
82745	FOLIC ACID (FOLATE), BLOOD; BIOASSAY		\$25.14	7/1/2021	12/31/2382
82746	FOLIC ACID; SERUM		\$16.81	7/1/2021	12/31/2382
82746	FOLIC ACID; SERUM	L1	\$16.81	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
82747	FOLIC ACID; RBC		\$27.25	7/1/2021	12/31/2382
82747	FOLIC ACID; RBC	L1	\$27.25	7/1/2021	12/31/2382
82750	FORMIMINOGLUTAMIC ACID (FIGLU), URINE		\$44.66	7/1/2021	12/31/2382
82755	FREE RADICAL ASSAY TECHNIQUE FOR DRUGS (FRAT)		\$28.94	7/1/2021	12/31/2382
82756	FREE THYROXINE INDEX (T-7)		\$18.59	7/1/2021	12/31/2382
82757	FRUCTOSE, SEMEN		\$27.31	7/1/2021	12/31/2382
82757	FRUCTOSE, SEMEN	L1	\$27.31	7/1/2021	12/31/2382
82759	GALACTOKINASE, RBC		\$33.80	7/1/2021	12/31/2382
82759	GALACTOKINASE, RBC	L1	\$33.80	7/1/2021	12/31/2382
82760	GALACTOSE		\$14.64	7/1/2021	12/31/2382
82760	GALACTOSE	L1	\$14.64	7/1/2021	12/31/2382
82763	GALACTOSE; TOLERANCE TEST		\$35.44	7/1/2021	12/31/2382
82765	GALACTOSE; URINE		\$14.17	7/1/2021	12/31/2382
82775	GALACTOSE-1-PHOSPHATE URIDYL TRANSFERASE; QUANTITATIVE		\$33.15	7/1/2021	12/31/2382
82775	GALACTOSE-1-PHOSPHATE URIDYL TRANSFERASE; QUANTITATIVE	L1	\$33.15	7/1/2021	12/31/2382
82776	GALACTOSE-1-PHOSPHATE URIDYL TRANSFERASE; SCREEN		\$13.19	7/1/2021	12/31/2382
82776	GALACTOSE-1-PHOSPHATE URIDYL TRANSFERASE; SCREEN	L1	\$13.19	7/1/2021	12/31/2382
82777	GALECTIN-3		\$20.05	7/1/2021	12/31/2382
82777	GALECTIN-3	L1	\$20.05	7/1/2021	12/31/2382
82780	GALLIUM		\$40.96	7/1/2021	12/31/2382
82784	GAMMAGLOBULIN; IGA, IGD, IGG, IGM, EACH		\$14.63	7/1/2021	12/31/2382
82784	GAMMAGLOBULIN; IGA, IGD, IGG, IGM, EACH	59	\$14.63	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
82784	GAMMAGLOBULIN; IGA, IGD, IGG, IGM, EACH	90	\$14.63	7/1/2021	12/31/2382
82784	GAMMAGLOBULIN; IGA, IGD, IGG, IGM, EACH	91	\$14.63	7/1/2021	12/31/2382
82784	GAMMAGLOBULIN; IGA, IGD, IGG, IGM, EACH	L1	\$14.63	7/1/2021	12/31/2382
82784	GAMMAGLOBULIN; IGA, IGD, IGG, IGM, EACH	XU	\$14.63	7/1/2021	12/31/2382
82785	GAMMAGLOBULIN; IGE		\$25.92	7/1/2021	12/31/2382
82785	GAMMAGLOBULIN; IGE	91	\$20.95	7/1/2021	12/31/2382
82785	GAMMAGLOBULIN; IGE	L1	\$25.92	7/1/2021	12/31/2382
82786	GAMMAGLOBULIN, SALT PRECIPITATION METHOD		\$14.69	7/1/2021	12/31/2382
82787	GAMMAGLOBULIN; IMMUNOGLOBULIN SUBCLASSES, (IGG1, 2, 3, AND 4)		\$12.62	7/1/2021	12/31/2382
82787	GAMMAGLOBULIN; IMMUNOGLOBULIN SUBCLASSES, (IGG1, 2, 3, AND 4)	59	\$12.62	7/1/2021	12/31/2382
82787	GAMMAGLOBULIN; IMMUNOGLOBULIN SUBCLASSES, (IGG1, 2, 3, AND 4)	91	\$12.62	7/1/2021	12/31/2382
82787	GAMMAGLOBULIN; IMMUNOGLOBULIN SUBCLASSES, (IGG1, 2, 3, AND 4)	L1	\$12.62	7/1/2021	12/31/2382
82790	GASES, BLOOD, OXYGEN SATURATION; BY CALCULATION FROM PO2		\$14.11	7/1/2021	12/31/2382
82791	GASES, BLOOD, OXYGEN SATURATION; BY MANOMETRY		\$19.06	7/1/2021	12/31/2382
82792	GASES, BLOOD, OXYGEN SATURATION QUANTIFICATION		\$15.36	7/1/2021	12/31/2382
82793	GASES, BLOOD, OXYGEN SATURATION; BY SPECTROPHOTOMETRY		\$17.56	7/1/2021	12/31/2382
82795	GASES, BLOOD, OXYGEN SATURATION; BY CALCULATION FROM PCO2		\$11.21	7/1/2021	12/31/2382
82800	GASES, BLOOD; PH ONLY		\$8.94	7/1/2021	12/31/2382
82800	GASES, BLOOD; PH ONLY	L1	\$8.94	7/1/2021	12/31/2382
82801	GASES, BLOOD; PCO2		\$11.42	7/1/2021	12/31/2382
82802	GASES, BLOOD; PH, PCO2 BY ELECTRODE		\$20.98	7/1/2021	12/31/2382
82803	GASES, BLOOD; PH, PCO2, PO2 SIMULTANEOUS		\$30.45	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
82803	GASES, BLOOD; PH, PCO2, PO2 SIMULTANEOUS	59	\$30.45	7/1/2021	12/31/2382
82803	GASES, BLOOD; PH, PCO2, PO2 SIMULTANEOUS	91	\$30.45	7/1/2021	12/31/2382
82803	GASES, BLOOD; PH, PCO2, PO2 SIMULTANEOUS	CR	\$30.45	7/1/2021	12/31/2382
82803	GASES, BLOOD; PH, PCO2, PO2 SIMULTANEOUS	L1	\$30.45	7/1/2021	12/31/2382
82804	GASES, BLOOD; PO2 BY ELECTRODE		\$15.30	7/1/2021	12/31/2382
82805	GASES, BLOOD, ANY COMBINATION OF PH, PCO2, PO2, CO2, HCO2 (INCLUDING CALCULATED O2 SATURATION); WITH O2 SATURU		\$44.66	7/1/2021	12/31/2382
82805	GASES, BLOOD, ANY COMBINATION OF PH, PCO2, PO2, CO2, HCO2 (INCLUDING CALCULATED O2 SATURATION); WITH O2 SATURU	59	\$44.66	7/1/2021	12/31/2382
82805	GASES, BLOOD, ANY COMBINATION OF PH, PCO2, PO2, CO2, HCO2 (INCLUDING CALCULATED O2 SATURATION); WITH O2 SATURU	91	\$44.66	7/1/2021	12/31/2382
82805	GASES, BLOOD, ANY COMBINATION OF PH, PCO2, PO2, CO2, HCO2 (INCLUDING CALCULATED O2 SATURATION); WITH O2 SATURU	L1	\$44.66	7/1/2021	12/31/2382
82810	GASES, BLOOD, O2 SATURATION ONLY, BY DIRECT MEASUREMENT, EXCEPT PULSE OXIMETRY		\$13.74	7/1/2021	12/31/2382
82812	GASES, BLOOD; PO2 BY MANOMETRY		\$15.38	7/1/2021	12/31/2382
82817	GASES, BLOOD; PH, PCO2 BY TONOMETRY		\$20.48	7/1/2021	12/31/2382
82820	HEMOGLOBIN-OXYGEN AFFINITY (PO2 FOR 50% HEMOGLOBIN SATURATION WITH OXYGEN)		\$15.73	7/1/2021	12/31/2382
82820	HEMOGLOBIN-OXYGEN AFFINITY (PO2 FOR 50% HEMOGLOBIN SATURATION WITH OXYGEN)	L1	\$15.73	7/1/2021	12/31/2382
82926	GASTRIC ACID, FREE AND TOTAL; EACH SPECIMEN		\$8.57	7/1/2021	12/31/2382
82926	GASTRIC ACID, FREE AND TOTAL; EACH SPECIMEN	L1	\$8.57	7/1/2021	12/31/2382
82927	GASTRIC ACID, FREE AND TOTAL; EACH ADDITIONAL SPECIMEN		\$7.67	7/1/2021	12/31/2382
82928	GASTRIC ACID, FREE OR TOTAL; EACH SPECIMEN	L1	\$8.71	7/1/2021	12/31/2382
82929	GASTRIC ACID, FREE OR TOTAL; EACH ADDITIONAL SPECIMEN		\$6.15	7/1/2021	12/31/2382
82930	GASTRIC ACID ANALYSIS, INCLUDES PH IF PERFORMED, EACH SPECIMEN		\$8.63	7/1/2021	12/31/2382
82930	GASTRIC ACID ANALYSIS, INCLUDES PH IF PERFORMED, EACH SPECIMEN	L1	\$8.63	7/1/2021	12/31/2382
82931	GASTRIC ACID, PH TITRATION; SINGLE SPECIMEN		\$10.49	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
82932	GASTRIC ACID, PH TITRATION; EACH ADDITIONAL SPECIMEN		\$10.50	7/1/2021	12/31/2382
82938	GASTRIN AFTER SECRETIN STIMULATION		\$27.84	7/1/2021	12/31/2382
82938	GASTRIN AFTER SECRETIN STIMULATION	L1	\$27.84	7/1/2021	12/31/2382
82941	GASTRIN		\$27.75	7/1/2021	12/31/2382
82941	GASTRIN	91	\$27.75	7/1/2021	12/31/2382
82941	GASTRIN	L1	\$27.75	7/1/2021	12/31/2382
82942	GLOBULIN, SERUM		\$7.44	7/1/2021	12/31/2382
82943	GLUCAGON		\$13.76	7/1/2021	12/31/2382
82943	GLUCAGON	L1	\$13.76	7/1/2021	12/31/2382
82944	GLUCOSAMINE		\$7.44	7/1/2021	12/31/2382
82945	GLOCOSE, BODY FLUID, OTHER THAN BLOOD		\$6.16	7/1/2021	12/31/2382
82945	GLOCOSE, BODY FLUID, OTHER THAN BLOOD	59	\$6.16	7/1/2021	12/31/2382
82945	GLOCOSE, BODY FLUID, OTHER THAN BLOOD	L1	\$6.16	7/1/2021	12/31/2382
82946	GLUCAGON TOLERANCE TEST		\$23.73	7/1/2021	12/31/2382
82946	GLUCAGON TOLERANCE TEST	L1	\$23.73	7/1/2021	12/31/2382
82947	GLUCOSE; QUANTITATIVE		\$6.16	7/1/2021	12/31/2382
82947	GLUCOSE; QUANTITATIVE	59	\$6.16	7/1/2021	12/31/2382
82947	GLUCOSE; QUANTITATIVE	90	\$6.16	7/1/2021	12/31/2382
82947	GLUCOSE; QUANTITATIVE	91	\$6.16	7/1/2021	12/31/2382
82947	GLUCOSE; QUANTITATIVE	GA	\$6.16	7/1/2021	12/31/2382
82947	GLUCOSE; QUANTITATIVE	GZ	\$6.16	7/1/2021	12/31/2382
82947	GLUCOSE; QUANTITATIVE	L1	\$6.16	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
82947	GLUCOSE; QUANTITATIVE	PO	\$6.16	7/1/2021	12/31/2382
82947	GLUCOSE; QUANTITATIVE	QW	\$6.16	7/1/2021	12/31/2382
82947	GLUCOSE; QUANTITATIVE	XU	\$6.16	7/1/2021	12/31/2382
82948	GLUCOSE; BLOOD, REAGENT STRIP		\$4.99	7/1/2021	12/31/2382
82948	GLUCOSE; BLOOD, REAGENT STRIP	59	\$4.99	7/1/2021	12/31/2382
82948	GLUCOSE; BLOOD, REAGENT STRIP	91	\$4.99	7/1/2021	12/31/2382
82948	GLUCOSE; BLOOD, REAGENT STRIP	L1	\$4.99	7/1/2021	12/31/2382
82948	GLUCOSE; BLOOD, REAGENT STRIP	PO	\$4.99	7/1/2021	12/31/2382
82948	GLUCOSE; BLOOD, REAGENT STRIP	XU	\$4.99	7/1/2021	12/31/2382
82949	GLUCOSE; FERMENTATION		\$7.43	7/1/2021	12/31/2382
82950	GLUCOSE; POST GLUCOSE DOSE (INCLUDES GLUCOSE)		\$7.49	7/1/2021	12/31/2382
82950	GLUCOSE; POST GLUCOSE DOSE (INCLUDES GLUCOSE)	L1	\$7.49	7/1/2021	12/31/2382
82950	GLUCOSE; POST GLUCOSE DOSE (INCLUDES GLUCOSE)	QW	\$7.49	7/1/2021	12/31/2382
82951	GLUCOSE; TOLERANCE TEST (GTT), THREE SPECIMENS (INCLUDES GLUCOSE)		\$20.26	7/1/2021	12/31/2382
82951	GLUCOSE; TOLERANCE TEST (GTT), THREE SPECIMENS (INCLUDES GLUCOSE)	59	\$20.26	7/1/2021	12/31/2382
82951	GLUCOSE; TOLERANCE TEST (GTT), THREE SPECIMENS (INCLUDES GLUCOSE)	L1	\$20.26	7/1/2021	12/31/2382
82951	GLUCOSE; TOLERANCE TEST (GTT), THREE SPECIMENS (INCLUDES GLUCOSE)	QW	\$20.26	7/1/2021	12/31/2382
82952	GLUCOSE; TOLERANCE TEST, EACH ADDITIONAL BEYOND THREE SPECIMENS		\$6.16	7/1/2021	12/31/2382
82952	GLUCOSE; TOLERANCE TEST, EACH ADDITIONAL BEYOND THREE SPECIMENS	L1	\$6.16	7/1/2021	12/31/2382
82952	GLUCOSE; TOLERANCE TEST, EACH ADDITIONAL BEYOND THREE SPECIMENS	QW	\$6.16	7/1/2021	12/31/2382
82953	GLUCOSE; TOLBUTAMIDE TOLERANCE TEST		\$23.83	7/1/2021	12/31/2382
82954	GLUCOSE, URINE		\$4.47	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
82955	GLUCOSE-6-PHOSPHATE DEHYDROGENASE (G6PD); QUANTITATIVE		\$10.11	7/1/2021	12/31/2382
82955	GLUCOSE-6-PHOSPHATE DEHYDROGENASE (G6PD); QUANTITATIVE	L1	\$10.11	7/1/2021	12/31/2382
82960	GLUCOSE-6-PHOSPHATE DEHYDROGENASE (G6PD); SCREEN		\$9.54	7/1/2021	12/31/2382
82960	GLUCOSE-6-PHOSPHATE DEHYDROGENASE (G6PD); SCREEN	L1	\$9.54	7/1/2021	12/31/2382
82961	GLUCOSE TOLERANCE TEST, INTRAVENOUS		\$29.52	7/1/2021	12/31/2382
82962	GLUCOSE, BLOOD, BY GLUCOSE MONITORING DEVICE(S) CLEARED BY THE FDA SPECIFICALLY FOR HOME USE		\$3.69	7/1/2021	12/31/2382
82962	GLUCOSE, BLOOD, BY GLUCOSE MONITORING DEVICE(S) CLEARED BY THE FDA SPECIFICALLY FOR HOME USE	59	\$3.69	7/1/2021	12/31/2382
82962	GLUCOSE, BLOOD, BY GLUCOSE MONITORING DEVICE(S) CLEARED BY THE FDA SPECIFICALLY FOR HOME USE	91	\$3.69	7/1/2021	12/31/2382
82962	GLUCOSE, BLOOD, BY GLUCOSE MONITORING DEVICE(S) CLEARED BY THE FDA SPECIFICALLY FOR HOME USE	L1	\$3.69	7/1/2021	12/31/2382
82963	GLUCOSIDASE, BETA		\$33.80	7/1/2021	12/31/2382
82963	GLUCOSIDASE, BETA	L1	\$33.80	7/1/2021	12/31/2382
82965	GLUTAMATE DEHYDROGENASE		\$12.17	7/1/2021	12/31/2382
82965	GLUTAMATE DEHYDROGENASE	L1	\$12.17	7/1/2021	12/31/2382
82975	GLUTAMINE (GLUTAMIC ACID AMIDE)		\$24.92	7/1/2021	12/31/2382
82977	GLUTAMYLTRANSFERASE, GAMMA (GGT)		\$11.33	7/1/2021	12/31/2382
82977	GLUTAMYLTRANSFERASE, GAMMA (GGT)	90	\$11.33	7/1/2021	12/31/2382
82977	GLUTAMYLTRANSFERASE, GAMMA (GGT)	91	\$11.33	7/1/2021	12/31/2382
82977	GLUTAMYLTRANSFERASE, GAMMA (GGT)	GA	\$11.33	7/1/2021	12/31/2382
82977	GLUTAMYLTRANSFERASE, GAMMA (GGT)	GZ	\$11.33	7/1/2021	12/31/2382
82977	GLUTAMYLTRANSFERASE, GAMMA (GGT)	L1	\$11.33	7/1/2021	12/31/2382
82978	GLUTATHIONE		\$22.42	7/1/2021	12/31/2382
82978	GLUTATHIONE	L1	\$22.42	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
82979	GLUTATHIONE REDUCTASE, RBC		\$10.83	7/1/2021	12/31/2382
82979	GLUTATHIONE REDUCTASE, RBC	L1	\$10.83	7/1/2021	12/31/2382
82980	GLUTETHIMIDE		\$28.83	7/1/2021	12/31/2382
82985	GLYCATED PROTEIN		\$23.73	7/1/2021	12/31/2382
82985	GLYCATED PROTEIN	L1	\$23.73	7/1/2021	12/31/2382
82985	GLYCATED PROTEIN	QW	\$23.73	7/1/2021	12/31/2382
82995	GOLD, BLOOD		\$28.18	7/1/2021	12/31/2382
82995	GOLD, BLOOD	L1	\$28.18	7/1/2021	12/31/2382
83000	GONADOTROPIN, PITUITARY, FOLLICLE STIMULATING HORMONE (FSH); BIOASSAY		\$29.78	7/1/2021	12/31/2382
83001	GONADOTROPIN; FOLLICLE STIMULATING HORMONE (FSH)		\$29.25	7/1/2021	12/31/2382
83001	GONADOTROPIN; FOLLICLE STIMULATING HORMONE (FSH)	L1	\$29.25	7/1/2021	12/31/2382
83001	GONADOTROPIN; FOLLICLE STIMULATING HORMONE (FSH)	QW	\$29.25	7/1/2021	12/31/2382
83002	GONADOTROPIN; LUTEINIZING HORMONE (LH)		\$29.14	7/1/2021	12/31/2382
83002	GONADOTROPIN; LUTEINIZING HORMONE (LH)	L1	\$29.14	7/1/2021	12/31/2382
83002	GONADOTROPIN; LUTEINIZING HORMONE (LH)	QW	\$29.14	7/1/2021	12/31/2382
83003	GROWTH HORMONE, HUMAN (HGH) (SOMATOTROPIN)		\$26.23	7/1/2021	12/31/2382
83003	GROWTH HORMONE, HUMAN (HGH) (SOMATOTROPIN)	L1	\$26.23	7/1/2021	12/31/2382
83004	GROWTH HORMONE, HUMAN (HGH) (SOMATOTROPIN) AFTER GLUCOSE TOLERANCE TEST		\$27.49	7/1/2021	12/31/2382
83008	GUANOSINE MONOPHOSPHATE (GMP), CYCLIC		\$26.41	7/1/2021	12/31/2382
83009	HELICOBACTER PYLORI, BLOOD TEST ANALYSIS FOR UREASE ACTIVITY, NON-RADIOACTIVE		\$105.99	7/1/2021	12/31/2382
83009	HELICOBACTER PYLORI, BLOOD TEST ANALYSIS FOR UREASE ACTIVITY, NON-RADIOACTIVE	L1	\$105.99	7/1/2021	12/31/2382
83010	HAPTOGLOBIN; QUANTITATIVE		\$19.80	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
83010	HAPTOGLOBIN; QUANTITATIVE	90	\$19.80	7/1/2021	12/31/2382
83010	HAPTOGLOBIN; QUANTITATIVE	L1	\$19.80	7/1/2021	12/31/2382
83011	HAPTOGLOBIN; QUANTITATIVE, ELECTROPHORESIS		\$20.48	7/1/2021	12/31/2382
83012	HAPTOGLOBIN; PHENOTYPES		\$24.43	7/1/2021	12/31/2382
83012	HAPTOGLOBIN; PHENOTYPES	L1	\$24.43	7/1/2021	12/31/2382
83013	HELICOBACTER PYLORI,BREATH TEST ANALYSIS		\$105.99	7/1/2021	12/31/2382
83013	HELICOBACTER PYLORI,BREATH TEST ANALYSIS	L1	\$105.99	7/1/2021	12/31/2382
83014	HELICOBACTER PYLORI, BREATH TEST ANALYSIS; DRUG ADMINISTRATION AND SAMPLE COLLECTION		\$12.37	7/1/2021	12/31/2382
83014	HELICOBACTER PYLORI, BREATH TEST ANALYSIS; DRUG ADMINISTRATION AND SAMPLE COLLECTION	L1	\$12.37	7/1/2021	12/31/2382
83015	HEAVY METAL (ARSENIC, BARIUM, BERYLLIUM, BISMUTH, ANTIMONY, MERCURY); SCREEN		\$29.62	7/1/2021	12/31/2382
83015	HEAVY METAL (ARSENIC, BARIUM, BERYLLIUM, BISMUTH, ANTIMONY, MERCURY); SCREEN	L1	\$29.62	7/1/2021	12/31/2382
83018	HEAVY METAL (ARSENIC, BARIUM, BERYLLIUM, BISMUTH, ANTIMONY, MERCURY); QUANTITATIVE, EACH		\$34.56	7/1/2021	12/31/2382
83018	HEAVY METAL (ARSENIC, BARIUM, BERYLLIUM, BISMUTH, ANTIMONY, MERCURY); QUANTITATIVE, EACH	90	\$34.56	7/1/2021	12/31/2382
83018	HEAVY METAL (ARSENIC, BARIUM, BERYLLIUM, BISMUTH, ANTIMONY, MERCURY); QUANTITATIVE, EACH	L1	\$34.56	7/1/2021	12/31/2382
83020	HEMOGLOBIN; ELECTROPHORESIS (EG, A2, S, C)		\$20.26	7/1/2021	12/31/2382
83020	HEMOGLOBIN; ELECTROPHORESIS (EG, A2, S, C)	26	\$20.43	7/1/2021	12/31/2382
83020	HEMOGLOBIN; ELECTROPHORESIS (EG, A2, S, C)	91	\$20.26	7/1/2021	12/31/2382
83020	HEMOGLOBIN; ELECTROPHORESIS (EG, A2, S, C)	L1	\$20.43	7/1/2021	12/31/2382
83020	HEMOGLOBIN; ELECTROPHORESIS (EG, A2, S, C)	XU	\$20.26	7/1/2021	12/31/2382
83021	HEMOGLOBIN FRACTIONATION AND QUANTITATION; CHROMOTOGRAPHY (EG, A2, S, C, AND/OR F)		\$28.42	7/1/2021	12/31/2382
83021	HEMOGLOBIN FRACTIONATION AND QUANTITATION; CHROMOTOGRAPHY (EG, A2, S, C, AND/OR F)	91	\$28.42	7/1/2021	12/31/2382
83021	HEMOGLOBIN FRACTIONATION AND QUANTITATION; CHROMOTOGRAPHY (EG, A2, S, C, AND/OR F)	L1	\$28.42	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
83021	HEMOGLOBIN FRACTIONATION AND QUANTITATION; CHROMOTOGRAPHY (EG, A2, S, C, AND/OR F)	XU	\$28.42	7/1/2021	12/31/2382
83026	HEMOGLOBIN; BY COPPER SULFATE METHOD, NON-AUTOMATED		\$3.72	7/1/2021	12/31/2382
83026	HEMOGLOBIN; BY COPPER SULFATE METHOD, NON-AUTOMATED	L1	\$3.72	7/1/2021	12/31/2382
83030	HEMOGLOBIN; F(FETAL), CHEMICAL		\$13.02	7/1/2021	12/31/2382
83030	HEMOGLOBIN; F(FETAL), CHEMICAL	L1	\$13.02	7/1/2021	12/31/2382
83033	HEMOGLOBIN; F(FETAL), QUALITATIVE (APT) TEST, FECAL		\$9.38	7/1/2021	12/31/2382
83033	HEMOGLOBIN; F(FETAL), QUALITATIVE (APT) TEST, FECAL	L1	\$9.38	7/1/2021	12/31/2382
83036	HEMOGLOBIN; GLYCATED		\$13.76	7/1/2021	12/31/2382
83036	HEMOGLOBIN; GLYCATED	59	\$13.76	7/1/2021	12/31/2382
83036	HEMOGLOBIN; GLYCATED	91	\$13.76	7/1/2021	12/31/2382
83036	HEMOGLOBIN; GLYCATED	ET	\$13.76	7/1/2021	12/31/2382
83036	HEMOGLOBIN; GLYCATED	GA	\$13.76	7/1/2021	12/31/2382
83036	HEMOGLOBIN; GLYCATED	GZ	\$13.76	7/1/2021	12/31/2382
83036	HEMOGLOBIN; GLYCATED	L1	\$13.76	7/1/2021	12/31/2382
83036	HEMOGLOBIN; GLYCATED	PN	\$13.76	7/1/2021	12/31/2382
83036	HEMOGLOBIN; GLYCATED	PO	\$13.76	7/1/2021	12/31/2382
83036	HEMOGLOBIN; GLYCATED	QW	\$13.76	7/1/2021	12/31/2382
83040	HEMOGLOBIN; METHEMOGLOBIN, ELECTROPHORETIC SEPARATION		\$7.10	7/1/2021	12/31/2382
83045	HEMOGLOBIN; METHEMOGLOBIN, QUALITATIVE		\$7.80	7/1/2021	12/31/2382
83045	HEMOGLOBIN; METHEMOGLOBIN, QUALITATIVE	L1	\$7.80	7/1/2021	12/31/2382
83050	HEMOGLOBIN; METHEMOGLOBIN, QUANTITATIVE		\$11.53	7/1/2021	12/31/2382
83050	HEMOGLOBIN; METHEMOGLOBIN, QUANTITATIVE	L1	\$11.53	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
83051	HEMOGLOBIN; PLASMA		\$7.32	7/1/2021	12/31/2382
83051	HEMOGLOBIN; PLASMA	L1	\$7.32	7/1/2021	12/31/2382
83052	HEMOGLOBIN; SICKLE, TURBIDIMETRIC		\$7.10	7/1/2021	12/31/2382
83053	HEMOGLOBIN; SOLUBILITY, S-D, ETC		\$7.10	7/1/2021	12/31/2382
83055	HEMOGLOBIN; SULFHEMOGLOBIN, QUALITATIVE		\$7.73	7/1/2021	12/31/2382
83060	HEMOGLOBIN; SULFHEMOGLOBIN, QUANTITATIVE		\$10.82	7/1/2021	12/31/2382
83060	HEMOGLOBIN; SULFHEMOGLOBIN, QUANTITATIVE	L1	\$10.82	7/1/2021	12/31/2382
83065	HEMOGLOBIN; THERMOLABILE		\$7.32	7/1/2021	12/31/2382
83065	HEMOGLOBIN; THERMOLABILE	L1	\$7.32	7/1/2021	12/31/2382
83068	HEMOGLOBIN; UNSTABLE, SCREEN		\$7.32	7/1/2021	12/31/2382
83068	HEMOGLOBIN; UNSTABLE, SCREEN	L1	\$7.32	7/1/2021	12/31/2382
83069	HEMOGLOBIN; URINE		\$6.21	7/1/2021	12/31/2382
83069	HEMOGLOBIN; URINE	L1	\$6.21	7/1/2021	12/31/2382
83070	HEMOSIDERIN; QUALITATIVE		\$4.53	7/1/2021	12/31/2382
83070	HEMOSIDERIN; QUALITATIVE	L1	\$4.53	7/1/2021	12/31/2382
83071	HEMOSIDERIN; QUANTITATIVE		\$4.53	7/1/2021	12/31/2382
83080	ASSAY OF HEXOSAMINIDASE		\$26.55	7/1/2021	12/31/2382
83080	ASSAY OF HEXOSAMINIDASE	91	\$26.55	7/1/2021	12/31/2382
83080	ASSAY OF HEXOSAMINIDASE	L1	\$26.55	7/1/2021	12/31/2382
83080	ASSAY OF HEXOSAMINIDASE	XU	\$26.55	7/1/2021	12/31/2382
83086	HISTIDINE; BLOOD, QUALITATIVE		\$26.13	7/1/2021	12/31/2382
83087	HISTIDINE; URINE, QUALITATIVE		\$26.97	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
83088	HISTAMINE		\$22.85	7/1/2021	12/31/2382
83088	HISTAMINE	L1	\$22.85	7/1/2021	12/31/2382
83090	HOMOCYSTINE		\$26.55	7/1/2021	12/31/2382
83090	HOMOCYSTINE	91	\$26.55	7/1/2021	12/31/2382
83090	HOMOCYSTINE	L1	\$26.55	7/1/2021	12/31/2382
83090	HOMOCYSTINE	QW	\$26.55	7/1/2021	12/31/2382
83093	HOMOGENITISIC ACID; BLOOD, QUALITATIVE		\$15.90	7/1/2021	12/31/2382
83094	HOMOGENITISIC ACID; URINE, QUALITATIVE		\$11.39	7/1/2021	12/31/2382
83095	HOMOGENITISIC ACID; URINE, QUANTITATIVE		\$17.72	7/1/2021	12/31/2382
83150	HOMOVANILLIC ACID (HVA)		\$30.45	7/1/2021	12/31/2382
83150	HOMOVANILLIC ACID (HVA)	L1	\$30.45	7/1/2021	12/31/2382
83485	HYDROXYBUTYRIC DEHYDROGENASE, ALPHA (HBD), BLOOD; KINETIC ULTRAVIOLET METHOD		\$14.17	7/1/2021	12/31/2382
83486	HYDROXYBUTYRIC DEHYDROGENASE, ALPHA (HBD), BLOOD; COLORIMETRIC METHOD		\$12.56	7/1/2021	12/31/2382
83491	HYDROXYCORTICOSTEROIDS, 17- (17-OHCS)		\$27.56	7/1/2021	12/31/2382
83492	HYDROXYCORTICOSTEROIDS, 17- (17-OHCS); GAS LIQUID CHROMATOGRAPHY (GLC)		\$31.02	7/1/2021	12/31/2382
83493	HYDROXYCORTICOSTEROIDS, 17- (17-OHCS); BLOOD, PORTER-SILBER TYPE		\$26.07	7/1/2021	12/31/2382
83494	HYDROXYCORTICOSTEROIDS, 17- (17-OHCS); BLOOD, FLUOROMETRIC		\$24.52	7/1/2021	12/31/2382
83495	HYDROXYCORTICOSTEROIDS, 17- (17-OHCS); URINE, PORTER-SILBER TYPE		\$27.21	7/1/2021	12/31/2382
83496	HYDROXYCORTICOSTEROIDS, 17- (17-OHCS); URINE, FLUOROMETRIC		\$27.21	7/1/2021	12/31/2382
83497	HYDROXYINDOLACETIC ACID, 5-(HIAA)		\$20.29	7/1/2021	12/31/2382
83497	HYDROXYINDOLACETIC ACID, 5-(HIAA)	L1	\$20.29	7/1/2021	12/31/2382
83498	HYDROXYPROGESTERONE, 17-D		\$42.74	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
83498	HYDROXYPROGESTERONE, 17-D	L1	\$42.74	7/1/2021	12/31/2382
83499	HYDROXYPROGESTERONE, 20-		\$39.67	7/1/2021	12/31/2382
83499	HYDROXYPROGESTERONE, 20-	L1	\$39.67	7/1/2021	12/31/2382
83500	HYDROXYPROLINE; FREE		\$35.65	7/1/2021	12/31/2382
83500	HYDROXYPROLINE; FREE	L1	\$35.65	7/1/2021	12/31/2382
83505	HYDROXYPROLINE; TOTAL		\$38.26	7/1/2021	12/31/2382
83505	HYDROXYPROLINE; TOTAL	L1	\$38.26	7/1/2021	12/31/2382
83510	HYDROXYPROLINE, URINE; FREE AND TOTAL		\$53.28	7/1/2021	12/31/2382
83516	IMMUNOASSAY FOR ANALYTE OTHER THAN ANTIBODY OR INFECTIOUS AGENT ANTIGEN, QUALITATIVE OR SEMIQUANTITATIVE;		\$18.16	7/1/2021	12/31/2382
83516	IMMUNOASSAY FOR ANALYTE OTHER THAN ANTIBODY OR INFECTIOUS AGENT ANTIGEN, QUALITATIVE OR SEMIQUANTITATIVE;	59	\$18.16	7/1/2021	12/31/2382
83516	IMMUNOASSAY FOR ANALYTE OTHER THAN ANTIBODY OR INFECTIOUS AGENT ANTIGEN, QUALITATIVE OR SEMIQUANTITATIVE;	90	\$18.16	7/1/2021	12/31/2382
83516	IMMUNOASSAY FOR ANALYTE OTHER THAN ANTIBODY OR INFECTIOUS AGENT ANTIGEN, QUALITATIVE OR SEMIQUANTITATIVE;	91	\$18.16	7/1/2021	12/31/2382
83516	IMMUNOASSAY FOR ANALYTE OTHER THAN ANTIBODY OR INFECTIOUS AGENT ANTIGEN, QUALITATIVE OR SEMIQUANTITATIVE;	L1	\$18.16	7/1/2021	12/31/2382
83516	IMMUNOASSAY FOR ANALYTE OTHER THAN ANTIBODY OR INFECTIOUS AGENT ANTIGEN, QUALITATIVE OR SEMIQUANTITATIVE;	XU	\$18.16	7/1/2021	12/31/2382
83518	IMMUNOASSAY, FOR ANALYTE OTHER THAN ANTIBODY, QUALITATIVE OR SEMIQUANTITATIVE		\$13.34	7/1/2021	12/31/2382
83518	IMMUNOASSAY, FOR ANALYTE OTHER THAN ANTIBODY, QUALITATIVE OR SEMIQUANTITATIVE	L1	\$13.34	7/1/2021	12/31/2382
83518	IMMUNOASSAY, FOR ANALYTE OTHER THAN ANTIBODY, QUALITATIVE OR SEMIQUANTITATIVE	QW	\$13.34	7/1/2021	12/31/2382
83519	IMMUNOASSAY, ANALYTE; BY RADIONUCLIDE TECHNIQUE (EG, RIA)		\$21.27	7/1/2021	12/31/2382
83519	IMMUNOASSAY, ANALYTE; BY RADIONUCLIDE TECHNIQUE (EG, RIA)	59	\$21.27	7/1/2021	12/31/2382
83519	IMMUNOASSAY, ANALYTE; BY RADIONUCLIDE TECHNIQUE (EG, RIA)	90	\$21.27	7/1/2021	12/31/2382
83519	IMMUNOASSAY, ANALYTE; BY RADIONUCLIDE TECHNIQUE (EG, RIA)	91	\$21.27	7/1/2021	12/31/2382
83519	IMMUNOASSAY, ANALYTE; BY RADIONUCLIDE TECHNIQUE (EG, RIA)	L1	\$21.27	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
83519	IMMUNOASSAY, ANALYTE; BY RADIONUCLIDE TECHNIQUE (EG, RIA)	XU	\$21.27	7/1/2021	12/31/2382
83520	IMMUNOASSAY, ANALYTE; NOT OTHERWISE SPECIFIED		\$20.37	7/1/2021	12/31/2382
83520	IMMUNOASSAY, ANALYTE; NOT OTHERWISE SPECIFIED	90	\$20.37	7/1/2021	12/31/2382
83520	IMMUNOASSAY, ANALYTE; NOT OTHERWISE SPECIFIED	91	\$20.37	7/1/2021	12/31/2382
83520	IMMUNOASSAY, ANALYTE; NOT OTHERWISE SPECIFIED	L1	\$20.37	7/1/2021	12/31/2382
83520	IMMUNOASSAY, ANALYTE; NOT OTHERWISE SPECIFIED	XU	\$20.37	7/1/2021	12/31/2382
83521	IMMUNOGLOBULIN LIGHT CHAINS (IE, KAPPA, LAMBDA), FREE, EACH		\$17.27	1/1/2022	12/31/2382
83523	IMIPRAMINE		\$29.78	7/1/2021	12/31/2382
83524	INDICAN, URINE		\$8.20	7/1/2021	12/31/2382
83525	INSULIN		\$18.00	7/1/2021	12/31/2382
83525	INSULIN	L1	\$18.00	7/1/2021	12/31/2382
83526	INSULIN TOLERANCE TEST		\$7.10	7/1/2021	12/31/2382
83527	INSULIN; FREE		\$20.37	7/1/2021	12/31/2382
83527	INSULIN; FREE	L1	\$20.37	7/1/2021	12/31/2382
83528	INTRINSIC FACTOR		\$25.03	7/1/2021	12/31/2382
83528	INTRINSIC FACTOR	L1	\$25.03	7/1/2021	12/31/2382
83529	INTERLEUKIN-6 (IL-6)		\$17.27	1/1/2022	12/31/2382
83530	INULIN CLEARANCE		\$19.05	7/1/2021	12/31/2382
83540	IRON		\$10.19	7/1/2021	12/31/2382
83540	IRON	91	\$10.19	7/1/2021	12/31/2382
83540	IRON	GA	\$10.19	7/1/2021	12/31/2382
83540	IRON	L1	\$10.19	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
83545	IRON, SERUM; AUTOMATED		\$11.21	7/1/2021	12/31/2382
83546	IRON, SERUM; RADIOACTIVE UPTAKE METHOD		\$12.27	7/1/2021	12/31/2382
83550	IRON BINDING CAPACITY		\$13.75	7/1/2021	12/31/2382
83550	IRON BINDING CAPACITY	91	\$13.75	7/1/2021	12/31/2382
83550	IRON BINDING CAPACITY	GA	\$13.75	7/1/2021	12/31/2382
83550	IRON BINDING CAPACITY	L1	\$13.75	7/1/2021	12/31/2382
83555	IRON BINDING CAPACITY, SERUM; AUTOMATED		\$13.33	7/1/2021	12/31/2382
83565	IRON BINDING CAPACITY, SERUM; RADIOACTIVE UPTAKE METHOD		\$13.33	7/1/2021	12/31/2382
83570	ISOCITRIC DEHYDROGENASE (IDH)		\$13.92	7/1/2021	12/31/2382
83570	ISOCITRIC DEHYDROGENASE (IDH)	L1	\$13.92	7/1/2021	12/31/2382
83571	ISOCITRIC DEHYDROGENASE (IDH), BLOOD; COLORIMETRIC		\$13.51	7/1/2021	12/31/2382
83576	ISONICOTINIC ACID HYDRAZIDE (INH)		\$52.87	7/1/2021	12/31/2382
83578	KANAMYCIN		\$26.07	7/1/2021	12/31/2382
83582	KETOGENIC STEROIDS; FRACTIONATION		\$22.30	7/1/2021	12/31/2382
83582	KETOGENIC STEROIDS; FRACTIONATION	L1	\$22.30	7/1/2021	12/31/2382
83583	KETOGENIC STEROIDS, URINE; 11-DESOXY: 11-OXY RATIO		\$39.66	7/1/2021	12/31/2382
83584	KETOGLUTARATE, ALPHA		\$16.79	7/1/2021	12/31/2382
83586	KETOSTEROIDS, 17- (17-KS); TOTAL		\$20.15	7/1/2021	12/31/2382
83586	KETOSTEROIDS, 17- (17-KS); TOTAL	L1	\$20.15	7/1/2021	12/31/2382
83587	KETOSTEROIDS, 17- (17-KS), BLOOD; FRACTIONATION, ALPHA/BETA		\$20.98	7/1/2021	12/31/2382
83588	KETOSTEROIDS, 17- (17-KS), BLOOD; RIA		\$20.98	7/1/2021	12/31/2382
83589	KETOSTEROIDS, 17- (17-KS), URINE; TOTAL		\$21.43	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
83590	KETOSTEROIDS, 17- (17-KS), URINE; FRACTIONATION, ALPHA/BETA		\$20.98	7/1/2021	12/31/2382
83593	KETOSTEROIDS, 17- (17-KS); FRACTIONATION		\$21.66	7/1/2021	12/31/2382
83593	KETOSTEROIDS, 17- (17-KS); FRACTIONATION	L1	\$21.66	7/1/2021	12/31/2382
83597	KETOSTEROIDS, 17- (17-KS), URINE; 11-DESOXY: 11-OXY RATIO		\$20.98	7/1/2021	12/31/2382
83599	KETOSTEROIDS, 17-OH, RIA		\$25.05	7/1/2021	12/31/2382
83600	KYNURENIC ACID		\$26.07	7/1/2021	12/31/2382
83605	LACTATE (LACTIC ACID)		\$16.80	7/1/2021	12/31/2382
83605	LACTATE (LACTIC ACID)	91	\$16.80	7/1/2021	12/31/2382
83605	LACTATE (LACTIC ACID)	CR	\$16.80	7/1/2021	12/31/2382
83605	LACTATE (LACTIC ACID)	L1	\$16.80	7/1/2021	12/31/2382
83605	LACTATE (LACTIC ACID)	QJ	\$16.80	7/1/2021	12/31/2382
83605	LACTATE (LACTIC ACID)	QW	\$16.80	7/1/2021	12/31/2382
83605	LACTATE (LACTIC ACID)	XU	\$16.80	7/1/2021	12/31/2382
83610	LACTIC DEHYDROGENASE (LDH), RIA		\$10.36	7/1/2021	12/31/2382
83615	LACTATE DEHYDROGENASE (LD), (LDH)		\$9.51	7/1/2021	12/31/2382
83615	LACTATE DEHYDROGENASE (LD), (LDH)	59	\$9.51	7/1/2021	12/31/2382
83615	LACTATE DEHYDROGENASE (LD), (LDH)	91	\$9.51	7/1/2021	12/31/2382
83615	LACTATE DEHYDROGENASE (LD), (LDH)	CR	\$9.51	7/1/2021	12/31/2382
83615	LACTATE DEHYDROGENASE (LD), (LDH)	L1	\$9.51	7/1/2021	12/31/2382
83615	LACTATE DEHYDROGENASE (LD), (LDH)	QV	\$9.51	7/1/2021	12/31/2382
83620	LACTIC DEHYDROGENASE (LDH), BLOOD; COLORIMETRIC OR FLUOROMETRIC		\$9.16	7/1/2021	12/31/2382
83624	LACTIC DEHYDROGENASE (LDH), BLOOD; HEAT OR UREA INHIBITION (TOTAL NOT INCLUDED)		\$9.47	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
83625	LACTATE DEHYDROGENASE (LD), (LDH) ISOENZYMES, SEPARATION AND QUANTITATION		\$20.14	7/1/2021	12/31/2382
83625	LACTATE DEHYDROGENASE (LD), (LDH) ISOENZYMES, SEPARATION AND QUANTITATION	L1	\$20.14	7/1/2021	12/31/2382
83626	LACTIC DEHYDROGENASE (LDH), BLOOD; ISOENZYMES, CHEMICAL SEPARATION		\$18.96	7/1/2021	12/31/2382
83628	LACTIC DEHYDROGENASE, LIVER (LLDH)		\$11.67	7/1/2021	12/31/2382
83629	LACTIC DEHYDROGENASE (LDH), URINE		\$10.36	7/1/2021	12/31/2382
83630	LACTOFERRIN, FECAL, QUALITATIVE		\$18.16	7/1/2021	12/31/2382
83630	LACTOFERRIN, FECAL, QUALITATIVE	L1	\$18.16	7/1/2021	12/31/2382
83631	LACTOFERRIN, FECAL; QUANTITATIVE		\$30.87	7/1/2021	12/31/2382
83631	LACTOFERRIN, FECAL; QUANTITATIVE	L1	\$30.87	7/1/2021	12/31/2382
83632	LACTOGEN, HUMAN PLACENTAL (HPL) HUMAN CHORIONIC SOMATOMAMMOTROPIN		\$28.41	7/1/2021	12/31/2382
83632	LACTOGEN, HUMAN PLACENTAL (HPL) HUMAN CHORIONIC SOMATOMAMMOTROPIN	L1	\$28.41	7/1/2021	12/31/2382
83633	LACTOSE, URINE; QUALITATIVE		\$8.65	7/1/2021	12/31/2382
83633	LACTOSE, URINE; QUALITATIVE	L1	\$8.65	7/1/2021	12/31/2382
83634	LACTOSE, URINE; QUANTITATIVE		\$18.14	7/1/2021	12/31/2382
83645	LEAD, SCREENING; BLOOD		\$19.00	7/1/2021	12/31/2382
83650	LEAD, SCREENING; URINE		\$16.30	7/1/2021	12/31/2382
83655	LEAD		\$7.86	7/1/2021	12/31/2382
83655	LEAD	L1	\$7.86	7/1/2021	12/31/2382
83660	LEAD, QUANTITATIVE; URINE		\$7.10	7/1/2021	12/31/2382
83661	LECITHIN-SPHINGOMYELIN RATIO (L/S RATIO); QUANTITATIVE		\$34.59	7/1/2021	12/31/2382
83661	LECITHIN-SPHINGOMYELIN RATIO (L/S RATIO); QUANTITATIVE	L1	\$34.59	7/1/2021	12/31/2382
83662	LECITHIN-SPHINGOMYELIN RATIO (L/S RATIO); FOAM STABILITY TEST		\$29.77	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
83662	LECITHIN-SPHINGOMYELIN RATIO (L/S RATIO); FOAM STABILITY TEST	L1	\$29.77	7/1/2021	12/31/2382
83663	FETAL LUNG MATURITY ASSESSMENT; FLUORESCENCE POLARIZATION		\$29.77	7/1/2021	12/31/2382
83663	FETAL LUNG MATURITY ASSESSMENT; FLUORESCENCE POLARIZATION	L1	\$29.77	7/1/2021	12/31/2382
83664	FETAL LUNG MATURITY ASSESSMENT; LAMELLAR BODY DENSITY		\$29.77	7/1/2021	12/31/2382
83664	FETAL LUNG MATURITY ASSESSMENT; LAMELLAR BODY DENSITY	L1	\$29.77	7/1/2021	12/31/2382
83670	LEUCINE AMINOPEPTIDASE (LAP)		\$14.42	7/1/2021	12/31/2382
83670	LEUCINE AMINOPEPTIDASE (LAP)	L1	\$14.42	7/1/2021	12/31/2382
83675	LEUCINE AMINOPEPTIDASE (LAP), BLOOD; COLORIMETRIC		\$14.11	7/1/2021	12/31/2382
83680	LEUCINE AMINOPEPTIDASE (LAP), URINE		\$15.13	7/1/2021	12/31/2382
83681	LEUCINE TOLERANCE TEST		\$21.54	7/1/2021	12/31/2382
83685	LIDOCAINE		\$13.62	7/1/2021	12/31/2382
83690	LIPASE		\$10.83	7/1/2021	12/31/2382
83690	LIPASE	25	\$10.83	7/1/2021	12/31/2382
83690	LIPASE	91	\$10.83	7/1/2021	12/31/2382
83690	LIPASE	L1	\$10.83	7/1/2021	12/31/2382
83690	LIPASE	Q6	\$10.83	7/1/2021	12/31/2382
83695	LIPOPROTEIN (A)		\$20.37	7/1/2021	12/31/2382
83695	LIPOPROTEIN (A)	L1	\$20.37	7/1/2021	12/31/2382
83698	LIPOPROTEIN-ASSOCIATED PHOSPHOLIPASE A2, (LP-PLA2)		\$53.41	7/1/2021	12/31/2382
83698	LIPOPROTEIN-ASSOCIATED PHOSPHOLIPASE A2, (LP-PLA2)	L1	\$53.41	7/1/2021	12/31/2382
83700	LIPOPROTEIN, BLOOD; ELECTROPHORETIC SEPERATION AND QUANTITATION		\$17.72	7/1/2021	12/31/2382
83700	LIPOPROTEIN, BLOOD; ELECTROPHORETIC SEPERATION AND QUANTITATION	L1	\$17.72	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
83701	LIPOPROTEIN, BLOOD; HIGH RESOLUTION FRACTIONATION AND QUANTITATION OF LIPOPROTEINS INCLUDING LIPOPROTEINS		\$30.75	7/1/2021	12/31/2382
83701	LIPOPROTEIN, BLOOD; HIGH RESOLUTION FRACTIONATION AND QUANTITATION OF LIPOPROTEINS INCLUDING LIPOPROTEINS	L1	\$30.75	7/1/2021	12/31/2382
83704	LIPOPROTEIN, BLOOD; QUANTITATION OF LIPOPROTEIN PARTICLE NUMBERS AND LIPOPROTEIN PARTICLE SUBCLASSES		\$44.51	7/1/2021	12/31/2382
83704	LIPOPROTEIN, BLOOD; QUANTITATION OF LIPOPROTEIN PARTICLE NUMBERS AND LIPOPROTEIN PARTICLE SUBCLASSES	L1	\$44.51	7/1/2021	12/31/2382
83705	LIPIDS, BLOOD; FRACTIONATED (CHOLESTEROL, TRIGLYCERIDES, PHOSPHOLIPIDS)		\$9.79	7/1/2021	12/31/2382
83715	LIPOPROTEIN, BLOOD; ELECTROPHORETIC SEPARATION AND QUANTITATION		\$17.72	7/1/2021	12/31/2382
83716	LIPOPROTEIN, BLOOD;HIGH RESOLUTION FRACTIONATION AND QUANTITATION OF LIPOPROTEIN CHOLESTEROLS		\$30.75	7/1/2021	12/31/2382
83717	LIPOPROTEIN, BLOOD; ULTRACENTRIFUGATION AND QUANTITATION		\$30.60	7/1/2021	12/31/2382
83718	LIPOPROTEIN, DIRECT MEASUREMENT; HIGH DENSITY CHOLESTEROL (HDL CHOLESTEROL)		\$12.88	7/1/2021	12/31/2382
83718	LIPOPROTEIN, DIRECT MEASUREMENT; HIGH DENSITY CHOLESTEROL (HDL CHOLESTEROL)	59	\$12.88	7/1/2021	12/31/2382
83718	LIPOPROTEIN, DIRECT MEASUREMENT; HIGH DENSITY CHOLESTEROL (HDL CHOLESTEROL)	GA	\$12.88	7/1/2021	12/31/2382
83718	LIPOPROTEIN, DIRECT MEASUREMENT; HIGH DENSITY CHOLESTEROL (HDL CHOLESTEROL)	GZ	\$12.88	7/1/2021	12/31/2382
83718	LIPOPROTEIN, DIRECT MEASUREMENT; HIGH DENSITY CHOLESTEROL (HDL CHOLESTEROL)	L1	\$12.88	7/1/2021	12/31/2382
83718	LIPOPROTEIN, DIRECT MEASUREMENT; HIGH DENSITY CHOLESTEROL (HDL CHOLESTEROL)	QW	\$12.88	7/1/2021	12/31/2382
83719	LIPOPROTEIN, DIRECT MEASUREMENT; DIRECT MEASUREMENT VLDL CHOLESTEROL		\$18.31	7/1/2021	12/31/2382
83719	LIPOPROTEIN, DIRECT MEASUREMENT; DIRECT MEASUREMENT VLDL CHOLESTEROL	L1	\$18.31	7/1/2021	12/31/2382
83720	LIPOPROTEIN CHOLESTEROL FRACTIONATION CALCULATION BY FORMULA		\$22.26	7/1/2021	12/31/2382
83721	LIPOPROTEIN, DIRECT MEASUREMENT; DIRECT MEASUREMENT LDL CHOLESTEROL		\$10.81	7/1/2021	12/31/2382
83721	LIPOPROTEIN, DIRECT MEASUREMENT; DIRECT MEASUREMENT LDL CHOLESTEROL	59	\$10.81	7/1/2021	12/31/2382
83721	LIPOPROTEIN, DIRECT MEASUREMENT; DIRECT MEASUREMENT LDL CHOLESTEROL	91	\$10.81	7/1/2021	12/31/2382
83721	LIPOPROTEIN, DIRECT MEASUREMENT; DIRECT MEASUREMENT LDL CHOLESTEROL	L1	\$10.81	7/1/2021	12/31/2382
83721	LIPOPROTEIN, DIRECT MEASUREMENT; DIRECT MEASUREMENT LDL CHOLESTEROL	XU	\$10.81	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
83722	MEASUREMENT OF SMALL DENSE LOW DENSITY LIPOPROTEIN CHOLESTEROL		\$39.49	7/1/2021	12/31/2382
83725	LITHIUM, BLOOD, QUANTITATIVE		\$11.21	7/1/2021	12/31/2382
83727	LUTEINIZING RELEASING FACTOR (LRH)		\$27.05	7/1/2021	12/31/2382
83727	LUTEINIZING RELEASING FACTOR (LRH)	L1	\$27.05	7/1/2021	12/31/2382
83728	LYSERGIC ACID DIETHYLAMIDE (LSD), RIA		\$41.96	7/1/2021	12/31/2382
83730	MACROGLOBULINS (SIA TEST)		\$10.96	7/1/2021	12/31/2382
83735	MAGNESIUM		\$10.54	7/1/2021	12/31/2382
83735	MAGNESIUM	91	\$10.54	7/1/2021	12/31/2382
83735	MAGNESIUM	GA	\$10.54	7/1/2021	12/31/2382
83735	MAGNESIUM	GZ	\$10.54	7/1/2021	12/31/2382
83735	MAGNESIUM	L1	\$10.54	7/1/2021	12/31/2382
83735	MAGNESIUM	Q1	\$10.54	7/1/2021	12/31/2382
83735	MAGNESIUM	QV	\$10.54	7/1/2021	12/31/2382
83735	MAGNESIUM	XU	\$10.54	7/1/2021	12/31/2382
83740	MAGNESIUM, BLOOD; FLUOROMETRIC		\$10.36	7/1/2021	12/31/2382
83750	MAGNESIUM, BLOOD; ATOMIC ABSORPTION		\$11.77	7/1/2021	12/31/2382
83755	MAGNESIUM, URINE; CHEMICAL		\$11.91	7/1/2021	12/31/2382
83760	MAGNESIUM, URINE; FLUOROMETRIC		\$11.43	7/1/2021	12/31/2382
83765	MAGNESIUM, URINE; ATOMIC ABSORPTION		\$12.34	7/1/2021	12/31/2382
83775	MALATE DEHYDROGENASE		\$11.60	7/1/2021	12/31/2382
83775	MALATE DEHYDROGENASE	L1	\$11.60	7/1/2021	12/31/2382
83785	MANGANESE		\$22.24	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
83785	MANGANESE	L1	\$22.24	7/1/2021	12/31/2382
83788	MASS SPECTROMETRY AND TANDEM MASS SPECTROMETRY(MS,MS/MS),ANALYTE NOT ELSEWHERE SPECIFIED,QUALITATIVE,EACH SPEC		\$28.42	7/1/2021	12/31/2382
83788	MASS SPECTROMETRY AND TANDEM MASS SPECTROMETRY(MS,MS/MS),ANALYTE NOT ELSEWHERE SPECIFIED,QUALITATIVE,EACH SPEC	L1	\$28.42	7/1/2021	12/31/2382
83789	MASS SPECTROMETRY AND TANDEM MASS SPECTROMETRY,ANALYTE;QUANTITATIVE, EACH SPECIMEN		\$28.42	7/1/2021	12/31/2382
83789	MASS SPECTROMETRY AND TANDEM MASS SPECTROMETRY,ANALYTE;QUANTITATIVE, EACH SPECIMEN	59	\$28.42	7/1/2021	12/31/2382
83789	MASS SPECTROMETRY AND TANDEM MASS SPECTROMETRY,ANALYTE;QUANTITATIVE, EACH SPECIMEN	90	\$28.42	7/1/2021	12/31/2382
83789	MASS SPECTROMETRY AND TANDEM MASS SPECTROMETRY,ANALYTE;QUANTITATIVE, EACH SPECIMEN	L1	\$28.42	7/1/2021	12/31/2382
83790	MANNITOL CLEARANCE		\$13.80	7/1/2021	12/31/2382
83795	MELANIN, URINE, QUALITATIVE		\$17.39	7/1/2021	12/31/2382
83799	MEPERIDINE, QUANTITATIVE		\$25.65	7/1/2021	12/31/2382
83805	MEPROBAMATE		\$26.50	7/1/2021	12/31/2382
83825	MERCURY, QUANTITATIVE		\$25.59	7/1/2021	12/31/2382
83825	MERCURY, QUANTITATIVE	L1	\$25.59	7/1/2021	12/31/2382
83830	MERCURY, QUANTITATIVE; URINE		\$29.52	7/1/2021	12/31/2382
83835	METANEPHRINES		\$26.65	7/1/2021	12/31/2382
83835	METANEPHRINES	L1	\$26.65	7/1/2021	12/31/2382
83840	METHADONE		\$25.69	7/1/2021	12/31/2382
83842	METHAPYRILENE		\$25.65	7/1/2021	12/31/2382
83845	METHAQUALONE		\$25.65	7/1/2021	12/31/2382
83857	METHEMALBUMIN		\$16.91	7/1/2021	12/31/2382
83857	METHEMALBUMIN	L1	\$16.91	7/1/2021	12/31/2382
83858	METHSUXIMIDE		\$13.19	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
83859	METHYPRYLON		\$30.39	7/1/2021	12/31/2382
83860	MORPHINE; SCREENING		\$17.72	7/1/2021	12/31/2382
83861	MICROFLUIDIC ANALYSIS UTILIZING AN INTEGRATED COLLECTION AND ANALYSIS DEVICE, TEAR OSMOLARITY		\$26.56	7/1/2021	12/31/2382
83861	MICROFLUIDIC ANALYSIS UTILIZING AN INTEGRATED COLLECTION AND ANALYSIS DEVICE, TEAR OSMOLARITY	L1	\$26.56	7/1/2021	12/31/2382
83862	MORPHINE; RIA		\$17.72	7/1/2021	12/31/2382
83864	MUCOPOLYSACCHARIDES, ACID; QUANTITATIVE		\$31.33	7/1/2021	12/31/2382
83864	MUCOPOLYSACCHARIDES, ACID; QUANTITATIVE	L1	\$31.33	7/1/2021	12/31/2382
83865	MUCOPOLYSACCHARIDES, ACID, URINE; QUANTITATIVE		\$35.69	7/1/2021	12/31/2382
83866	MUCOPOLYSACCHARIDES, ACID; SCREEN		\$15.49	7/1/2021	12/31/2382
83872	MUCIN, SYNOVIAL FLUID (ROPES TEST)		\$9.23	7/1/2021	12/31/2382
83872	MUCIN, SYNOVIAL FLUID (ROPES TEST)	L1	\$9.23	7/1/2021	12/31/2382
83873	MYELIN BASIC PROTEIN, CSF		\$11.00	7/1/2021	12/31/2382
83873	MYELIN BASIC PROTEIN, CSF	L1	\$11.00	7/1/2021	12/31/2382
83874	MYOGLOBIN		\$20.32	7/1/2021	12/31/2382
83874	MYOGLOBIN	L1	\$20.32	7/1/2021	12/31/2382
83875	MYOGLOBIN, URINE		\$21.02	7/1/2021	12/31/2382
83875	MYOGLOBIN, URINE	L1	\$21.02	7/1/2021	12/31/2382
83876	MYELOPEROXIDASE (MPO)		\$21.30	7/1/2021	12/31/2382
83876	MYELOPEROXIDASE (MPO)	L1	\$21.30	7/1/2021	12/31/2382
83880	NATRIURECTIC PEPTIDE		\$53.41	7/1/2021	12/31/2382
83880	NATRIURECTIC PEPTIDE	59	\$53.41	7/1/2021	12/31/2382
83880	NATRIURECTIC PEPTIDE	91	\$53.41	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
83880	NATRIURECTIC PEPTIDE	CR	\$53.41	7/1/2021	12/31/2382
83880	NATRIURECTIC PEPTIDE	GZ	\$53.41	7/1/2021	12/31/2382
83880	NATRIURECTIC PEPTIDE	L1	\$53.41	7/1/2021	12/31/2382
83883	NEPHELOMETRY, EACH ANALYTE NOT ELSEWHERE SPECIFIED		\$21.40	7/1/2021	12/31/2382
83883	NEPHELOMETRY, EACH ANALYTE NOT ELSEWHERE SPECIFIED	59	\$21.40	7/1/2021	12/31/2382
83883	NEPHELOMETRY, EACH ANALYTE NOT ELSEWHERE SPECIFIED	90	\$21.40	7/1/2021	12/31/2382
83883	NEPHELOMETRY, EACH ANALYTE NOT ELSEWHERE SPECIFIED	91	\$21.40	7/1/2021	12/31/2382
83883	NEPHELOMETRY, EACH ANALYTE NOT ELSEWHERE SPECIFIED	L1	\$21.40	7/1/2021	12/31/2382
83885	NICKEL		\$38.54	7/1/2021	12/31/2382
83885	NICKEL	90	\$38.54	7/1/2021	12/31/2382
83885	NICKEL	L1	\$38.54	7/1/2021	12/31/2382
83887	NICOTINE		\$37.26	7/1/2021	12/31/2382
83890	MOLECULAR DIAGNOSTICS; MOLECULAR ISOLATION OR EXTRACTION		\$6.31	7/1/2021	12/31/2382
83890	MOLECULAR DIAGNOSTICS; MOLECULAR ISOLATION OR EXTRACTION	59	\$6.31	7/1/2021	12/31/2382
83890	MOLECULAR DIAGNOSTICS; MOLECULAR ISOLATION OR EXTRACTION	91	\$6.31	7/1/2021	12/31/2382
83891	MOLECULAR DIAGNOSTICS; ISOLATION OR EXTRACTION OF HIGHLY PURIFIED NUCLEIC ACID		\$6.31	7/1/2021	12/31/2382
83891	MOLECULAR DIAGNOSTICS; ISOLATION OR EXTRACTION OF HIGHLY PURIFIED NUCLEIC ACID	59	\$6.31	7/1/2021	12/31/2382
83891	MOLECULAR DIAGNOSTICS; ISOLATION OR EXTRACTION OF HIGHLY PURIFIED NUCLEIC ACID	91	\$6.31	7/1/2021	12/31/2382
83891	MOLECULAR DIAGNOSTICS; ISOLATION OR EXTRACTION OF HIGHLY PURIFIED NUCLEIC ACID	QV	\$6.31	7/1/2021	12/31/2382
83892	NUCLEAR MOLECULAR DIAGNOSTICS; ENZYMATIC DIGESTION		\$6.31	7/1/2021	12/31/2382
83892	NUCLEAR MOLECULAR DIAGNOSTICS; ENZYMATIC DIGESTION	59	\$6.31	7/1/2021	12/31/2382
83892	NUCLEAR MOLECULAR DIAGNOSTICS; ENZYMATIC DIGESTION	91	\$6.31	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
83893	MOLECULAR DIAGNOSTICS;DOT/SLOT BLOT PRODUCTION		\$6.31	7/1/2021	12/31/2382
83894	MOLECULAR DIAGNOSTICS SEPARATION BY GEL ELECTROPHORESIS(EG,AGAROSE,POLYACRYLAMIDE)		\$6.31	7/1/2021	12/31/2382
83894	MOLECULAR DIAGNOSTICS SEPARATION BY GEL ELECTROPHORESIS(EG,AGAROSE,POLYACRYLAMIDE)	59	\$6.31	7/1/2021	12/31/2382
83894	MOLECULAR DIAGNOSTICS SEPARATION BY GEL ELECTROPHORESIS(EG,AGAROSE,POLYACRYLAMIDE)	91	\$6.31	7/1/2021	12/31/2382
83894	MOLECULAR DIAGNOSTICS SEPARATION BY GEL ELECTROPHORESIS(EG,AGAROSE,POLYACRYLAMIDE)	QV	\$6.31	7/1/2021	12/31/2382
83895	NITROGEN, TOTAL; URINE, 24-HOUR SPECIMEN		\$26.21	7/1/2021	12/31/2382
83896	NUCLEAR MOLECULAR DIAGNOSTICS; NUCLEIC ACID PROBE, EACH		\$6.31	7/1/2021	12/31/2382
83896	NUCLEAR MOLECULAR DIAGNOSTICS; NUCLEIC ACID PROBE, EACH	59	\$6.31	7/1/2021	12/31/2382
83896	NUCLEAR MOLECULAR DIAGNOSTICS; NUCLEIC ACID PROBE, EACH	91	\$6.31	7/1/2021	12/31/2382
83897	MOLECULAR DIAGNOSTICS;NUCLEIC ACID TRANSFER(EG,SOUTHERN,NORTHERN)		\$6.31	7/1/2021	12/31/2382
83898	MOLECULAR DIAGNOSTICS;AMPLIFICATION OF PATIENT NUCLEIC ACID(EG,PCR,LCR,RT-PCR)SINGLE PRIMER PAIR,EACH PAIR		\$26.38	7/1/2021	12/31/2382
83898	MOLECULAR DIAGNOSTICS;AMPLIFICATION OF PATIENT NUCLEIC ACID(EG,PCR,LCR,RT-PCR)SINGLE PRIMER PAIR,EACH PAIR	59	\$26.38	7/1/2021	12/31/2382
83898	MOLECULAR DIAGNOSTICS;AMPLIFICATION OF PATIENT NUCLEIC ACID(EG,PCR,LCR,RT-PCR)SINGLE PRIMER PAIR,EACH PAIR	91	\$26.38	7/1/2021	12/31/2382
83900	MOLECULAR DIAGNOSTICS; AMPLIFICATION OF PATIENT NUCLEIC ACID, MULTIPLEX, FIRST TWO NUCLEIC ACID SEQUENCES		\$52.76	7/1/2021	12/31/2382
83900	MOLECULAR DIAGNOSTICS; AMPLIFICATION OF PATIENT NUCLEIC ACID, MULTIPLEX, FIRST TWO NUCLEIC ACID SEQUENCES	59	\$52.76	7/1/2021	12/31/2382
83900	MOLECULAR DIAGNOSTICS; AMPLIFICATION OF PATIENT NUCLEIC ACID, MULTIPLEX, FIRST TWO NUCLEIC ACID SEQUENCES	91	\$52.76	7/1/2021	12/31/2382
83900	MOLECULAR DIAGNOSTICS; AMPLIFICATION OF PATIENT NUCLEIC ACID, MULTIPLEX, FIRST TWO NUCLEIC ACID SEQUENCES	QV	\$52.76	7/1/2021	12/31/2382
83901	MOLECULAR DIAGNOSTICS;AMPLIFICATION OF PATIENT NUCLEIC ACID,MULTIPLEX,EACH MUTIPLEX REACTION		\$26.38	7/1/2021	12/31/2382
83901	MOLECULAR DIAGNOSTICS;AMPLIFICATION OF PATIENT NUCLEIC ACID,MULTIPLEX,EACH MUTIPLEX REACTION	59	\$26.38	7/1/2021	12/31/2382
83901	MOLECULAR DIAGNOSTICS;AMPLIFICATION OF PATIENT NUCLEIC ACID,MULTIPLEX,EACH MUTIPLEX REACTION	91	\$26.38	7/1/2021	12/31/2382
83902	MOLECULAR DIAGNOSTICS; REVERSE TRANSCRIPTION		\$8.53	7/1/2021	12/31/2382
83902	MOLECULAR DIAGNOSTICS; REVERSE TRANSCRIPTION	91	\$8.53	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
83902	MOLECULAR DIAGNOSTICS; REVERSE TRANSCRIPTION	QV	\$8.53	7/1/2021	12/31/2382
83903	MOLECULAR DIAGNOSTICS;MUTATION SCANNING,BY PHYSICAL PROPERTIES,SINGLE SEGMENT,EACH		\$26.38	7/1/2021	12/31/2382
83903	MOLECULAR DIAGNOSTICS;MUTATION SCANNING,BY PHYSICAL PROPERTIES,SINGLE SEGMENT,EACH	59	\$26.38	7/1/2021	12/31/2382
83904	MOLECULAR DIAGNOSTICS; MUTATION IDENTIFICATION BY SEQUENCING, SINGLE SEGMENT, EACH SEGMENT		\$26.38	7/1/2021	12/31/2382
83905	MOLECULAR DIAGNOSTICS;MUTATIONIDENTIFICATION BY ALLELE SPECIFIC TRANSCRIPTION,SINGLE SEGMENT,EACH SEGMENT		\$26.38	7/1/2021	12/31/2382
83906	MOLECULAR DIAGNOSTICS;MUTATION IDENTIFICATION BY ALLELE SPECIFIC TRANSLATION,SINGLE SEGMENT,EACH SEGMENT		\$26.38	7/1/2021	12/31/2382
83907	MOLECULAR DIAGNOSTICS; LYSIS OF CELLS PRIOR TO NUCLEIC ACID EXTRACTION		\$21.01	7/1/2021	12/31/2382
83908	MOLECULAR DIAGNOSTICS; SIGNAL AMPLIFICATION OF PATIENT NUCLEIC ACID, EACH NUCLEIC ACID SEQUENCE		\$26.38	7/1/2021	12/31/2382
83908	MOLECULAR DIAGNOSTICS; SIGNAL AMPLIFICATION OF PATIENT NUCLEIC ACID, EACH NUCLEIC ACID SEQUENCE	91	\$26.38	7/1/2021	12/31/2382
83909	MOLECULAR DIAGNOSTICS; SEPERATION AND IDENTIFICATION BY HIGH RESOLUTION TECHNIQUE		\$26.38	7/1/2021	12/31/2382
83910	NONPROTEIN NITROGEN (NPN), BLOOD		\$9.75	7/1/2021	12/31/2382
83912	NUCLEAR MOLECULAR DIAGNOSTICS; INTERPRETATION AND REPORT		\$6.31	7/1/2021	12/31/2382
83912	NUCLEAR MOLECULAR DIAGNOSTICS; INTERPRETATION AND REPORT	26	\$20.43	7/1/2021	12/31/2382
83912	NUCLEAR MOLECULAR DIAGNOSTICS; INTERPRETATION AND REPORT	59	\$6.31	7/1/2021	12/31/2382
83912	NUCLEAR MOLECULAR DIAGNOSTICS; INTERPRETATION AND REPORT	91	\$6.31	7/1/2021	12/31/2382
83913	MOLECULAR DIAGNOSTICS; RNA STABILIZATION		\$21.01	7/1/2021	12/31/2382
83914	MUTATION IDENTIFICATION BY ENZYMATIC LIGATION OR PRIMER EXTENSION, SINGLE SEGMENT, EACH SEGMENT, SINGLE BASE		\$26.38	7/1/2021	12/31/2382
83914	MUTATION IDENTIFICATION BY ENZYMATIC LIGATION OR PRIMER EXTENSION, SINGLE SEGMENT, EACH SEGMENT, SINGLE BASE	91	\$26.38	7/1/2021	12/31/2382
83915	NUCLEOTIDASE 5'-		\$17.54	7/1/2021	12/31/2382
83915	NUCLEOTIDASE 5'-	L1	\$17.54	7/1/2021	12/31/2382
83916	OLIGOCLONAL IMMUNOGLOBULIN (OLIGOCLONAL BANDS)		\$31.63	7/1/2021	12/31/2382
83916	OLIGOCLONAL IMMUNOGLOBULIN (OLIGOCLONAL BANDS)	59	\$31.63	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
83916	OLIGOCLONAL IMMUNOGLOBULIN (OLIGOCLONAL BANDS)	L1	\$31.63	7/1/2021	12/31/2382
83917	ORGANIC ACIDS; SCREEN, QUALITATIVE		\$28.46	7/1/2021	12/31/2382
83918	OLIGOCLONAL IMMUNOGLOBULIN (OLIGOCLONAL BANDS) QUANTITATIVE		\$25.91	7/1/2021	12/31/2382
83918	OLIGOCLONAL IMMUNOGLOBULIN (OLIGOCLONAL BANDS) QUANTITATIVE	L1	\$25.91	7/1/2021	12/31/2382
83919	ORGANIC ACIDS;QUALITATIVE,EACH SPECIMEN		\$25.91	7/1/2021	12/31/2382
83919	ORGANIC ACIDS;QUALITATIVE,EACH SPECIMEN	91	\$25.91	7/1/2021	12/31/2382
83919	ORGANIC ACIDS;QUALITATIVE,EACH SPECIMEN	L1	\$25.91	7/1/2021	12/31/2382
83920	ORNITHINE CARBAMYL TRANSFERASE (OCT)		\$10.15	7/1/2021	12/31/2382
83920	ORNITHINE CARBAMYL TRANSFERASE (OCT)	L1	\$10.15	7/1/2021	12/31/2382
83921	ORGANIC ACID, SINGLE, QUANTITATIVE		\$25.91	7/1/2021	12/31/2382
83921	ORGANIC ACID, SINGLE, QUANTITATIVE	91	\$25.91	7/1/2021	12/31/2382
83921	ORGANIC ACID, SINGLE, QUANTITATIVE	L1	\$25.91	7/1/2021	12/31/2382
83925	OPIATES, (EG, MORPHINE, MEPERIDINE)		\$30.63	7/1/2021	12/31/2382
83925	OPIATES, (EG, MORPHINE, MEPERIDINE)	91	\$30.63	7/1/2021	12/31/2382
83930	OSMOLALITY; BLOOD		\$10.41	7/1/2021	12/31/2382
83930	OSMOLALITY; BLOOD	91	\$10.41	7/1/2021	12/31/2382
83930	OSMOLALITY; BLOOD	L1	\$10.41	7/1/2021	12/31/2382
83935	OSMOLALITY; URINE		\$10.73	7/1/2021	12/31/2382
83935	OSMOLALITY; URINE	91	\$10.73	7/1/2021	12/31/2382
83935	OSMOLALITY; URINE	L1	\$10.73	7/1/2021	12/31/2382
83937	OSTEOCALCIN (BONE G1A PROTIEIN)		\$43.22	7/1/2021	12/31/2382
83937	OSTEOCALCIN (BONE G1A PROTIEIN)	L1	\$43.22	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
83938	OUABAIN		\$21.56	7/1/2021	12/31/2382
83945	OXALATE		\$20.26	7/1/2021	12/31/2382
83945	OXALATE	L1	\$20.26	7/1/2021	12/31/2382
83946	OXAZEPAM		\$24.94	7/1/2021	12/31/2382
83947	OXYBUTYRIC ACID, BETA		\$8.70	7/1/2021	12/31/2382
83948	OXYCODINONE		\$29.62	7/1/2021	12/31/2382
83949	OXYTOCINASE, RIA		\$24.29	7/1/2021	12/31/2382
83950	ONCOPROTEIN, HER-2/NEU		\$101.36	7/1/2021	12/31/2382
83950	ONCOPROTEIN, HER-2/NEU	L1	\$101.36	7/1/2021	12/31/2382
83951	ONCOPROTEIN; DES-GAMMA-CARBOXY-PROTHROMBIN (DCP)		\$105.91	7/1/2021	12/31/2382
83951	ONCOPROTEIN; DES-GAMMA-CARBOXY-PROTHROMBIN (DCP)	L1	\$105.91	7/1/2021	12/31/2382
83965	PARALDEHYDE, BLOOD, QUANTITATIVE		\$25.36	7/1/2021	12/31/2382
83970	PARATHORMONE (PARATHYROID HORMONE)		\$64.95	7/1/2021	12/31/2382
83970	PARATHORMONE (PARATHYROID HORMONE)	59	\$64.95	7/1/2021	12/31/2382
83970	PARATHORMONE (PARATHYROID HORMONE)	91	\$64.95	7/1/2021	12/31/2382
83970	PARATHORMONE (PARATHYROID HORMONE)	L1	\$64.95	7/1/2021	12/31/2382
83971	PENICILLIN, URINE		\$23.11	7/1/2021	12/31/2382
83972	PENTAZOCINE		\$34.20	7/1/2021	12/31/2382
83973	PENTOSE, URINE, QUALITATIVE		\$8.81	7/1/2021	12/31/2382
83975	PEPSINOGEN, BLOOD		\$23.45	7/1/2021	12/31/2382
83985	PESTICIDE OTHER THAN CHLORINATED HYDROCARBONS, BLOOD, URINE, OR OTHER MATERIAL		\$15.35	7/1/2021	12/31/2382
83986	PH, BODY FLUID, EXCEPT BLOOD		\$5.63	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
83986	PH, BODY FLUID, EXCEPT BLOOD	L1	\$5.63	7/1/2021	12/31/2382
83986	PH, BODY FLUID, EXCEPT BLOOD	QW	\$5.63	7/1/2021	12/31/2382
83986	PH, BODY FLUID, EXCEPT BLOOD	XU	\$5.63	7/1/2021	12/31/2382
83987	PH; EXHALED BREATH CONDENSATE		\$25.61	7/1/2021	12/31/2382
83987	PH; EXHALED BREATH CONDENSATE	L1	\$25.61	7/1/2021	12/31/2382
83992	PHENCYCLIDINE (PCP)		\$23.13	7/1/2021	12/31/2382
83993	CALPROTECTIN, FECAL		\$30.87	7/1/2021	12/31/2382
83993	CALPROTECTIN, FECAL	91	\$30.87	7/1/2021	12/31/2382
83993	CALPROTECTIN, FECAL	L1	\$30.87	7/1/2021	12/31/2382
83995	PHENOL, BLOOD OR URINE		\$25.32	7/1/2021	12/31/2382
84005	PHENOLSULFONPHTHALEIN (PSP) TEST, URINE		\$10.49	7/1/2021	12/31/2382
84021	PHENOTHIAZINE, URINE; QUALITATIVE, CHEMICAL		\$14.28	7/1/2021	12/31/2382
84022	PHENOTHIAZINE		\$24.51	7/1/2021	12/31/2382
84030	PHENYLALANINE (PKU), BLOOD		\$8.65	7/1/2021	12/31/2382
84030	PHENYLALANINE (PKU), BLOOD	L1	\$8.65	7/1/2021	12/31/2382
84031	PHENYLALANINE (PKU), BLOOD; FLUOROMETRIC		\$10.78	7/1/2021	12/31/2382
84033	PHENYLBUTAZONE		\$28.53	7/1/2021	12/31/2382
84035	PHENYLKETONES, QUALITATIVE		\$5.75	7/1/2021	12/31/2382
84035	PHENYLKETONES, QUALITATIVE	L1	\$5.75	7/1/2021	12/31/2382
84037	PHENYLKETONES; URINE, QUALITATIVE		\$5.29	7/1/2021	12/31/2382
84038	PHENYLPROPANOLAMINE		\$20.13	7/1/2021	12/31/2382
84039	PHENYLPYRUVIC ACID; BLOOD		\$7.29	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
84040	PHENYLPYRUVIC ACID; URINE		\$6.24	7/1/2021	12/31/2382
84045	PHENYTOIN		\$22.54	7/1/2021	12/31/2382
84060	PHOSPHATASE, ACID; TOTAL		\$11.62	7/1/2021	12/31/2382
84060	PHOSPHATASE, ACID; TOTAL	L1	\$11.62	7/1/2021	12/31/2382
84061	PHOSPHATASE, ACID; FORENSIC EXAMINATION		\$12.46	7/1/2021	12/31/2382
84061	PHOSPHATASE, ACID; FORENSIC EXAMINATION	L1	\$12.46	7/1/2021	12/31/2382
84065	PHOSPHATASE, ACID; PROSTATIC FRACTION		\$16.32	7/1/2021	12/31/2382
84066	PHOSPHATASE, ACID; PROSTATIC		\$15.21	7/1/2021	12/31/2382
84066	PHOSPHATASE, ACID; PROSTATIC	L1	\$15.21	7/1/2021	12/31/2382
84075	PHOSPHATASE, ALKALINE;		\$8.14	7/1/2021	12/31/2382
84075	PHOSPHATASE, ALKALINE;	26	\$8.14	7/1/2021	12/31/2382
84075	PHOSPHATASE, ALKALINE;	59	\$8.14	7/1/2021	12/31/2382
84075	PHOSPHATASE, ALKALINE;	91	\$8.14	7/1/2021	12/31/2382
84075	PHOSPHATASE, ALKALINE;	L1	\$8.14	7/1/2021	12/31/2382
84075	PHOSPHATASE, ALKALINE;	XU	\$8.14	7/1/2021	12/31/2382
84078	PHOSPHATASE, ALKALINE; HEAT STABLE (TOTAL NOT INCLUDED)		\$11.48	7/1/2021	12/31/2382
84078	PHOSPHATASE, ALKALINE; HEAT STABLE (TOTAL NOT INCLUDED)	L1	\$11.48	7/1/2021	12/31/2382
84080	PHOSPHATASE, ALKALINE; ISOENZYMES		\$23.28	7/1/2021	12/31/2382
84080	PHOSPHATASE, ALKALINE; ISOENZYMES	L1	\$23.28	7/1/2021	12/31/2382
84081	PHOSPHATIDYLGlycerol		\$26.00	7/1/2021	12/31/2382
84081	PHOSPHATIDYLGlycerol	L1	\$26.00	7/1/2021	12/31/2382
84082	PHOSPHATES, TUBULAR REABSORPTION OF (TRP)		\$9.79	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
84083	PHOSPHOGLUCOMUTASE, ISOENZYMES		\$33.46	7/1/2021	12/31/2382
84085	PHOSPHOGLUCONATE, 6-, DEHYDROGENASE, RBC		\$10.61	7/1/2021	12/31/2382
84085	PHOSPHOGLUCONATE, 6-, DEHYDROGENASE, RBC	L1	\$10.61	7/1/2021	12/31/2382
84087	PHOSPHOHEXOSE ISOMERASE		\$16.24	7/1/2021	12/31/2382
84087	PHOSPHOHEXOSE ISOMERASE	L1	\$16.24	7/1/2021	12/31/2382
84090	PHOSPHOLIPIDS, BLOOD		\$8.79	7/1/2021	12/31/2382
84100	PHOSPHORUS INORGANIC (PHOSPHATE)		\$7.46	7/1/2021	12/31/2382
84100	PHOSPHORUS INORGANIC (PHOSPHATE)	59	\$7.46	7/1/2021	12/31/2382
84100	PHOSPHORUS INORGANIC (PHOSPHATE)	91	\$7.46	7/1/2021	12/31/2382
84100	PHOSPHORUS INORGANIC (PHOSPHATE)	L1	\$7.46	7/1/2021	12/31/2382
84100	PHOSPHORUS INORGANIC (PHOSPHATE)	Q1	\$7.46	7/1/2021	12/31/2382
84100	PHOSPHORUS INORGANIC (PHOSPHATE)	QV	\$7.46	7/1/2021	12/31/2382
84100	PHOSPHORUS INORGANIC (PHOSPHATE)	XU	\$7.46	7/1/2021	12/31/2382
84105	PHOSPHORUS INORGANIC (PHOSPHATE) URINE		\$8.14	7/1/2021	12/31/2382
84105	PHOSPHORUS INORGANIC (PHOSPHATE) URINE	L1	\$8.14	7/1/2021	12/31/2382
84106	PORPHOBILINOGEN, URINE; QUALITATIVE		\$6.75	7/1/2021	12/31/2382
84106	PORPHOBILINOGEN, URINE; QUALITATIVE	L1	\$6.75	7/1/2021	12/31/2382
84110	PORPHOBILINOGEN, URINE; QUANTITATIVE		\$13.29	7/1/2021	12/31/2382
84110	PORPHOBILINOGEN, URINE; QUANTITATIVE	L1	\$13.29	7/1/2021	12/31/2382
84112	PLACENTAL ALPHA MICROGLOBULIN-1 (PAMG-1), CERVICOVAGINAL SECRETION, QUALITATIVE		\$102.09	7/1/2021	12/31/2382
84112	PLACENTAL ALPHA MICROGLOBULIN-1 (PAMG-1), CERVICOVAGINAL SECRETION, QUALITATIVE	L1	\$102.09	7/1/2021	12/31/2382
84118	PORPHYRINS, COPRO-, URINE; QUANTITATIVE		\$21.74	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
84119	PORPHYRINS, URINE; QUALITATIVE		\$13.56	7/1/2021	12/31/2382
84119	PORPHYRINS, URINE; QUALITATIVE	L1	\$13.56	7/1/2021	12/31/2382
84120	PORPHYRINS, URINE; QUANTITATION AND FRACTIONATION		\$23.14	7/1/2021	12/31/2382
84120	PORPHYRINS, URINE; QUANTITATION AND FRACTIONATION	L1	\$23.14	7/1/2021	12/31/2382
84121	PORPHYRINS; URO-, COPRO- AND PORPHOBILINOGEN, URINE		\$29.05	7/1/2021	12/31/2382
84126	PORPHYRINS, FECES; QUANTITATIVE		\$40.08	7/1/2021	12/31/2382
84126	PORPHYRINS, FECES; QUANTITATIVE	L1	\$7.23	7/1/2021	12/31/2382
84127	PORPHYRINS, FECES; QUALITATIVE		\$18.33	7/1/2021	12/31/2382
84128	PORPHYRINS, PLASMA		\$36.73	7/1/2021	12/31/2382
84132	POTASSIUM; SERUM		\$7.23	7/1/2021	12/31/2382
84132	POTASSIUM; SERUM	59	\$7.23	7/1/2021	12/31/2382
84132	POTASSIUM; SERUM	90	\$7.23	7/1/2021	12/31/2382
84132	POTASSIUM; SERUM	91	\$7.23	7/1/2021	12/31/2382
84132	POTASSIUM; SERUM	L1	\$7.23	7/1/2021	12/31/2382
84132	POTASSIUM; SERUM	XU	\$7.23	7/1/2021	12/31/2382
84133	POTASSIUM; URINE		\$6.77	7/1/2021	12/31/2382
84133	POTASSIUM; URINE	59	\$6.77	7/1/2021	12/31/2382
84133	POTASSIUM; URINE	91	\$6.77	7/1/2021	12/31/2382
84133	POTASSIUM; URINE	L1	\$6.77	7/1/2021	12/31/2382
84134	PREALBUMIN		\$22.96	7/1/2021	12/31/2382
84134	PREALBUMIN	L1	\$22.96	7/1/2021	12/31/2382
84135	PREGNANEDIOL		\$30.10	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
84135	PREGNANEDIOL	L1	\$30.10	7/1/2021	12/31/2382
84136	PREGNANEDIOL; OTHER METHOD (SPECIFY)		\$24.52	7/1/2021	12/31/2382
84138	PREGNANETRIOL		\$29.81	7/1/2021	12/31/2320
84138	PREGNANETRIOL	L1	\$29.81	7/1/2021	12/31/2382
84139	PREGNANETRIOL; OTHER METHOD (SPECIFY)		\$29.57	7/1/2021	12/31/2382
84140	PREGNENOLONE		\$20.86	7/1/2021	12/31/2382
84140	PREGNENOLONE	L1	\$20.86	7/1/2021	12/31/2382
84141	PRIMIDONE		\$29.19	7/1/2021	12/31/2382
84142	PROCAINAMIDE		\$28.33	7/1/2021	12/31/2382
84143	17-HYDROXY PREGNENOLONE		\$20.86	7/1/2021	12/31/2382
84143	17-HYDROXY PREGNENOLONE	L1	\$20.86	7/1/2021	12/31/2382
84144	PROGESTERONE		\$32.83	7/1/2021	12/31/2382
84144	PROGESTERONE	L1	\$32.83	7/1/2021	12/31/2382
84145	PROCALCITONIN (PCT)		\$31.26	7/1/2021	12/31/2382
84145	PROCALCITONIN (PCT)	CR	\$31.26	7/1/2021	12/31/2382
84145	PROCALCITONIN (PCT)	L1	\$31.26	7/1/2021	12/31/2382
84146	PROLACTIN		\$30.49	7/1/2021	12/31/2382
84146	PROLACTIN	L1	\$30.49	7/1/2021	12/31/2382
84147	PROPOXYPHENE		\$33.46	7/1/2021	12/31/2382
84149	PROPRANOLOL		\$24.50	7/1/2021	12/31/2382
84150	PROSTAGLANDIN, EACH		\$39.28	7/1/2021	12/31/2382
84150	PROSTAGLANDIN, EACH	L1	\$39.28	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
84152	PROSTATE SPECIFIC ANTIGEN (PSA); COMPLEXED (DIRECT MEASUREMENT)		\$28.85	7/1/2021	12/31/2382
84152	PROSTATE SPECIFIC ANTIGEN (PSA); COMPLEXED (DIRECT MEASUREMENT)	L1	\$28.85	7/1/2021	12/31/2382
84153	PROSTATE SPECIFIC ANTIGEN (PSA)		\$28.85	7/1/2021	12/31/2382
84153	PROSTATE SPECIFIC ANTIGEN (PSA)	91	\$28.85	7/1/2021	12/31/2382
84153	PROSTATE SPECIFIC ANTIGEN (PSA)	GA	\$28.85	7/1/2021	12/31/2382
84153	PROSTATE SPECIFIC ANTIGEN (PSA)	GZ	\$28.85	7/1/2021	12/31/2382
84153	PROSTATE SPECIFIC ANTIGEN (PSA)	L1	\$28.85	7/1/2021	12/31/2382
84153	PROSTATE SPECIFIC ANTIGEN (PSA)	PO	\$28.85	7/1/2021	12/31/2382
84153	PROSTATE SPECIFIC ANTIGEN (PSA)	Q1	\$28.85	7/1/2021	12/31/2382
84154	PROSTATE SPECIFIC ANTIGEN (PSA); FREE		\$28.85	7/1/2021	12/31/2382
84154	PROSTATE SPECIFIC ANTIGEN (PSA); FREE	91	\$28.85	7/1/2021	12/31/2382
84154	PROSTATE SPECIFIC ANTIGEN (PSA); FREE	L1	\$28.85	7/1/2021	12/31/2382
84154	PROSTATE SPECIFIC ANTIGEN (PSA); FREE	PO	\$28.85	7/1/2021	12/31/2382
84155	PROTEIN; TOTAL, EXCEPT REFRACTOMETRY		\$5.77	7/1/2021	12/31/2382
84155	PROTEIN; TOTAL, EXCEPT REFRACTOMETRY	59	\$5.77	7/1/2021	12/31/2382
84155	PROTEIN; TOTAL, EXCEPT REFRACTOMETRY	91	\$5.77	7/1/2021	12/31/2382
84155	PROTEIN; TOTAL, EXCEPT REFRACTOMETRY	L1	\$5.77	7/1/2021	12/31/2382
84155	PROTEIN; TOTAL, EXCEPT REFRACTOMETRY	XU	\$5.77	7/1/2021	12/31/2382
84156	PROTEIN; TOTAL, EXCEPT REFRACTOMETRY; URINE		\$5.77	7/1/2021	12/31/2382
84156	PROTEIN; TOTAL, EXCEPT REFRACTOMETRY; URINE	59	\$5.77	7/1/2021	12/31/2382
84156	PROTEIN; TOTAL, EXCEPT REFRACTOMETRY; URINE	L1	\$5.77	7/1/2021	12/31/2382
84156	PROTEIN; TOTAL, EXCEPT REFRACTOMETRY; URINE	XU	\$5.77	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
84157	PROTEIN; TOTAL, EXCEPT REFRACTOMETRY; OTHER SOURCE		\$5.77	7/1/2021	12/31/2382
84157	PROTEIN; TOTAL, EXCEPT REFRACTOMETRY; OTHER SOURCE	59	\$5.77	7/1/2021	12/31/2382
84157	PROTEIN; TOTAL, EXCEPT REFRACTOMETRY; OTHER SOURCE	L1	\$5.77	7/1/2021	12/31/2382
84157	PROTEIN; TOTAL, EXCEPT REFRACTOMETRY; OTHER SOURCE	QW	\$5.77	7/1/2021	12/31/2382
84160	PROTEIN; REFRACTOMETRIC		\$8.14	7/1/2021	12/31/2382
84160	PROTEIN; REFRACTOMETRIC	L1	\$8.14	7/1/2021	12/31/2382
84163	PREGNANCY-ASSOCIATED PLASMA PROTEIN-A (PAPP-A)		\$23.69	7/1/2021	12/31/2382
84163	PREGNANCY-ASSOCIATED PLASMA PROTEIN-A (PAPP-A)	L1	\$23.69	7/1/2021	12/31/2382
84165	PROTEIN; ELECTROPHORETIC FRACTIONATION AND QUANTITATION		\$16.91	7/1/2021	12/31/2382
84165	PROTEIN; ELECTROPHORETIC FRACTIONATION AND QUANTITATION	26	\$20.43	7/1/2021	12/31/2382
84165	PROTEIN; ELECTROPHORETIC FRACTIONATION AND QUANTITATION	91	\$16.91	7/1/2021	12/31/2382
84165	PROTEIN; ELECTROPHORETIC FRACTIONATION AND QUANTITATION	L1	\$20.43	7/1/2021	12/31/2382
84166	PROTEIN; ELECTROPHORETIC FRACTIONATION AND QUANTITATION, OTHER FLUIDS WITH CONCENTRATION		\$28.06	7/1/2021	12/31/2382
84166	PROTEIN; ELECTROPHORETIC FRACTIONATION AND QUANTITATION, OTHER FLUIDS WITH CONCENTRATION	26	\$28.06	7/1/2021	12/31/2382
84166	PROTEIN; ELECTROPHORETIC FRACTIONATION AND QUANTITATION, OTHER FLUIDS WITH CONCENTRATION	91	\$28.06	7/1/2021	12/31/2382
84166	PROTEIN; ELECTROPHORETIC FRACTIONATION AND QUANTITATION, OTHER FLUIDS WITH CONCENTRATION	L1	\$28.06	7/1/2021	12/31/2382
84170	PROTEIN, TOTAL, AND ALBUMIN/GLOBULIN RATIO		\$10.63	7/1/2021	12/31/2382
84175	PROTEIN; ELECTROPHORESIS, OTHER SOURCES REQUIRING CONCENTRATION (EG, CSF URINE)		\$10.50	7/1/2021	12/31/2382
84176	PROTEIN, SPECIAL STUDIES (EG, MONOCLONAL PROTEIN ANALYSIS)		\$18.46	7/1/2021	12/31/2382
84180	PROTEIN, URINE; QUANTITATIVE, 24-HOUR SPECIMEN		\$10.36	7/1/2021	12/31/2382
84181	PROTEIN; WESTERN BLOT, WITH INTERPRETATION AND REPORT, BLOOD OR OTHER BODY FLUID		\$26.80	7/1/2021	12/31/2382
84181	PROTEIN; WESTERN BLOT, WITH INTERPRETATION AND REPORT, BLOOD OR OTHER BODY FLUID	59	\$26.80	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
84181	PROTEIN; WESTERN BLOT, WITH INTERPRETATION AND REPORT, BLOOD OR OTHER BODY FLUID	91	\$26.80	7/1/2021	12/31/2382
84181	PROTEIN; WESTERN BLOT, WITH INTERPRETATION AND REPORT, BLOOD OR OTHER BODY FLUID	L1	\$26.80	7/1/2021	12/31/2382
84182	PROTEIN; WESTERN BLOT, WITH INTERPRETATION AND REPORT, BLOOD OR OTHER BODY FLUID, IMMUNOLOGICAL PROBE FOR BAND		\$28.32	7/1/2021	12/31/2382
84182	PROTEIN; WESTERN BLOT, WITH INTERPRETATION AND REPORT, BLOOD OR OTHER BODY FLUID, IMMUNOLOGICAL PROBE FOR BAND	91	\$28.32	7/1/2021	12/31/2382
84182	PROTEIN; WESTERN BLOT, WITH INTERPRETATION AND REPORT, BLOOD OR OTHER BODY FLUID, IMMUNOLOGICAL PROBE FOR BAND	L1	\$28.32	7/1/2021	12/31/2382
84185	PROTEIN, URINE; BENICE-JONES		\$10.14	7/1/2021	12/31/2382
84190	PROTEIN, URINE; ELECTROPHORETIC FRACTIONATION AND QUANTITATION		\$19.40	7/1/2021	12/31/2382
84195	PROTEIN, SPINAL FLUID; SEMI-QUANTITATIVE (PANDY)		\$8.70	7/1/2021	12/31/2382
84200	PROTEIN, SPINAL FLUID; ELECTROPHORETIC FRACTIONATION AND QUANTITATION		\$19.40	7/1/2021	12/31/2382
84201	PROTIRELIN, THYROTROPIN RELEASING HORMONE (TRH) TEST		\$34.89	7/1/2021	12/31/2382
84202	PROTOPORPHYRIN, RBC; QUANTITATIVE		\$22.58	7/1/2021	12/31/2382
84202	PROTOPORPHYRIN, RBC; QUANTITATIVE	L1	\$22.58	7/1/2021	12/31/2382
84203	PROTOPORPHYRIN, RBC; SCREEN		\$13.56	7/1/2021	12/31/2382
84203	PROTOPORPHYRIN, RBC; SCREEN	L1	\$13.56	7/1/2021	12/31/2382
84205	PROTRIPTYLENE		\$30.48	7/1/2021	12/31/2382
84205	PROTRIPTYLENE	L1	\$30.48	7/1/2021	12/31/2382
84206	PROINSULIN		\$28.03	7/1/2021	12/31/2382
84206	PROINSULIN	L1	\$28.03	7/1/2021	12/31/2382
84207	PYRIDOXAL PHOSPHATE (VITAMIN B-6)		\$39.16	7/1/2021	12/31/2382
84207	PYRIDOXAL PHOSPHATE (VITAMIN B-6)	L1	\$39.16	7/1/2021	12/31/2382
84208	PYROPHOSPHATE VS URATE, CRYSTALS (POLARIZATION)		\$9.08	7/1/2021	12/31/2382
84210	PYRUVATE		\$17.08	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
84210	PYRUVATE	L1	\$17.08	7/1/2021	12/31/2382
84220	PYRUVATE KINASE		\$14.85	7/1/2021	12/31/2382
84220	PYRUVATE KINASE	L1	\$14.85	7/1/2021	12/31/2382
84228	QUININE		\$18.31	7/1/2021	12/31/2382
84228	QUININE	L1	\$18.31	7/1/2021	12/31/2382
84230	QUINIDINE, BLOOD		\$25.01	7/1/2021	12/31/2382
84231	RADIOIMMUNOASSAY (RIA) NOT ELSEWHERE SPECIFIED		\$22.88	7/1/2021	12/31/2382
84232	RELEASING FACTOR		\$17.96	7/1/2021	12/31/2382
84233	RECEPTOR ASSAY; ESTROGEN		\$101.36	7/1/2021	12/31/2382
84233	RECEPTOR ASSAY; ESTROGEN	L1	\$101.36	7/1/2021	12/31/2382
84234	RECEPTOR ASSAY; PROGESTERONE		\$98.72	7/1/2021	12/31/2382
84234	RECEPTOR ASSAY; PROGESTERONE	L1	\$98.72	7/1/2021	12/31/2382
84235	RECEPTOR ASSAY; ENDOCRINE, OTHER THAN ESTROGEN OR PROGESTERONE (SPECIFY HORMONE)		\$82.35	7/1/2021	12/31/2382
84235	RECEPTOR ASSAY; ENDOCRINE, OTHER THAN ESTROGEN OR PROGESTERONE (SPECIFY HORMONE)	L1	\$82.35	7/1/2021	12/31/2382
84236	RECEPTOR ASSAY; PROGESTERONE AND ESTROGEN		\$122.77	7/1/2021	12/31/2382
84238	RECEPTOR ASSAY; NON-ENDOCRINE (EG, ACETYLCHOLINE) (SPECIFY RECEPTOR)		\$57.54	7/1/2021	12/31/2382
84238	RECEPTOR ASSAY; NON-ENDOCRINE (EG, ACETYLCHOLINE) (SPECIFY RECEPTOR)	L1	\$57.54	7/1/2021	12/31/2382
84244	RENIN		\$34.61	7/1/2021	12/31/2382
84244	RENIN	L1	\$34.61	7/1/2021	12/31/2382
84246	RENIN FUROSEMIDE TEST		\$37.99	7/1/2021	12/31/2382
84252	RIBOFLAVIN (VITAMIN B-2)		\$31.86	7/1/2021	12/31/2382
84252	RIBOFLAVIN (VITAMIN B-2)	L1	\$31.86	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
84255	SELENIUM		\$40.17	7/1/2021	12/31/2382
84255	SELENIUM	L1	\$40.17	7/1/2021	12/31/2382
84260	SEROTONIN		\$48.75	7/1/2021	12/31/2382
84260	SEROTONIN	L1	\$48.75	7/1/2021	12/31/2382
84270	SEX HORMONE BINDING GLOBULIN (SHBG)		\$34.20	7/1/2021	12/31/2382
84270	SEX HORMONE BINDING GLOBULIN (SHBG)	L1	\$34.20	7/1/2021	12/31/2382
84275	SIALIC ACID		\$21.14	7/1/2021	12/31/2382
84275	SIALIC ACID	L1	\$21.14	7/1/2021	12/31/2382
84285	SILICA		\$37.06	7/1/2021	12/31/2382
84285	SILICA	L1	\$37.06	7/1/2021	12/31/2382
84295	SODIUM; SERUM		\$7.57	7/1/2021	12/31/2382
84295	SODIUM; SERUM	59	\$7.57	7/1/2021	12/31/2382
84295	SODIUM; SERUM	91	\$7.57	7/1/2021	12/31/2382
84295	SODIUM; SERUM	L1	\$7.57	7/1/2021	12/31/2382
84295	SODIUM; SERUM	XU	\$7.57	7/1/2021	12/31/2382
84300	SODIUM; URINE		\$7.65	7/1/2021	12/31/2382
84300	SODIUM; URINE	59	\$7.65	7/1/2021	12/31/2382
84300	SODIUM; URINE	91	\$7.65	7/1/2021	12/31/2382
84300	SODIUM; URINE	L1	\$7.65	7/1/2021	12/31/2382
84302	SODIUM; OTHER SOURCE		\$7.65	7/1/2021	12/31/2382
84302	SODIUM; OTHER SOURCE	L1	\$7.65	7/1/2021	12/31/2382
84305	SOMATOMEDIN		\$28.75	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
84305	SOMATOMEDIN	L1	\$28.75	7/1/2021	12/31/2382
84305	SOMATOMEDIN	XU	\$28.75	7/1/2021	12/31/2382
84307	SOMATOSTATIN		\$28.76	7/1/2021	12/31/2382
84307	SOMATOSTATIN	L1	\$28.76	7/1/2021	12/31/2382
84310	SORBITOL DEHYDROGENASE, SERUM		\$11.91	7/1/2021	12/31/2382
84311	SPECTROPHOTOMETRY, ANALYTE NOT ELSEWHERE SPECIFIED		\$10.82	7/1/2021	12/31/2382
84311	SPECTROPHOTOMETRY, ANALYTE NOT ELSEWHERE SPECIFIED	90	\$10.82	7/1/2021	12/31/2382
84311	SPECTROPHOTOMETRY, ANALYTE NOT ELSEWHERE SPECIFIED	91	\$10.82	7/1/2021	12/31/2382
84311	SPECTROPHOTOMETRY, ANALYTE NOT ELSEWHERE SPECIFIED	L1	\$10.82	7/1/2021	12/31/2382
84315	SPECIFIC GRAVITY (EXCEPT URINE)		\$3.94	7/1/2021	12/31/2382
84315	SPECIFIC GRAVITY (EXCEPT URINE)	L1	\$3.94	7/1/2021	12/31/2382
84318	STERCOBILIN, QUALITATIVE, FECES		\$16.86	7/1/2021	12/31/2382
84324	STRYCHNINE		\$44.06	7/1/2021	12/31/2382
84375	SUGARS, CHROMATOGRAPHIC, TLC OR PAPER CHROMATOGRAPHY		\$10.11	7/1/2021	12/31/2382
84375	SUGARS, CHROMATOGRAPHIC, TLC OR PAPER CHROMATOGRAPHY	L1	\$10.11	7/1/2021	12/31/2382
84376	SUGARS, AND OLIGOSACCHARIDES' SINGLE QUALITATIVE, EACH SPECIMEN		\$8.65	7/1/2021	12/31/2382
84376	SUGARS, AND OLIGOSACCHARIDES' SINGLE QUALITATIVE, EACH SPECIMEN	L1	\$8.65	7/1/2021	12/31/2382
84377	SUGARS; MULTIPLE QUALITATIVE, EACH SPECIMEN		\$8.65	7/1/2021	12/31/2382
84377	SUGARS; MULTIPLE QUALITATIVE, EACH SPECIMEN	L1	\$8.65	7/1/2021	12/31/2382
84378	SUGARS; SINGLE QUANTITATIVE, EACH SPECIMEN		\$18.14	7/1/2021	12/31/2382
84378	SUGARS; SINGLE QUANTITATIVE, EACH SPECIMEN	L1	\$18.14	7/1/2021	12/31/2382
84379	SUGARS; MULTIPLE QUANTITATIVE, EACH SPECIMEN		\$18.14	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
84379	SUGARS; MULTIPLE QUANTITATIVE, EACH SPECIMEN	L1	\$18.14	7/1/2021	12/31/2382
84392	SULFATE, URINE		\$7.49	7/1/2021	12/31/2382
84392	SULFATE, URINE	L1	\$7.49	7/1/2021	12/31/2382
84395	SULFONAMIDE, BLOOD, CHEMICAL		\$10.39	7/1/2021	12/31/2382
84395	SULFONAMIDE, BLOOD, CHEMICAL	L1	\$10.39	7/1/2021	12/31/2382
84402	TESTOSTERONE; FREE		\$40.06	7/1/2021	12/31/2382
84402	TESTOSTERONE; FREE	59	\$40.06	7/1/2021	12/31/2382
84402	TESTOSTERONE; FREE	90	\$40.06	7/1/2021	12/31/2382
84402	TESTOSTERONE; FREE	L1	\$40.06	7/1/2021	12/31/2382
84403	TESTOSTERONE; TOTAL		\$40.64	7/1/2021	12/31/2382
84403	TESTOSTERONE; TOTAL	59	\$40.64	7/1/2021	12/31/2382
84403	TESTOSTERONE; TOTAL	90	\$40.64	7/1/2021	12/31/2382
84403	TESTOSTERONE; TOTAL	91	\$40.64	7/1/2021	12/31/2382
84403	TESTOSTERONE; TOTAL	L1	\$40.64	7/1/2021	12/31/2382
84405	TESTOSTERONE, URINE, RIA		\$45.72	7/1/2021	12/31/2382
84406	TESTOSTERONE, BINDING PROTEIN		\$36.84	7/1/2021	12/31/2382
84407	TETRACAINE		\$27.38	7/1/2021	12/31/2382
84408	TETRAHYDROCANNABINOL THC (MARIJUANA)		\$24.39	7/1/2021	12/31/2382
84409	TETRAHYDROCORTISONE OR TETRAHYDROCORTISOL		\$54.91	7/1/2021	12/31/2382
84410	TESTOSTERONE; BIOAVAILABLE, DIRECT MEASUREMENT (EG, DIFFERENTIAL PRECIPITATION)		\$81.70	7/1/2021	12/31/2382
84420	THEOPHYLLINE, BLOOD OR SALIVA		\$24.29	7/1/2021	12/31/2382
84420	THEOPHYLLINE, BLOOD OR SALIVA	L1	\$24.29	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
84425	THIAMINE (VITAMIN B-1)		\$11.00	7/1/2021	12/31/2382
84425	THIAMINE (VITAMIN B-1)	L1	\$11.00	7/1/2021	12/31/2382
84430	THIOCYANATE		\$10.82	7/1/2021	12/31/2382
84430	THIOCYANATE	L1	\$10.82	7/1/2021	12/31/2382
84431	THROMBOXANE METABOLITE(S), INCLUDING THROMBOXANE IF PERFORMED, URINE		\$20.88	7/1/2021	12/31/2382
84431	THROMBOXANE METABOLITE(S), INCLUDING THROMBOXANE IF PERFORMED, URINE	L1	\$20.88	7/1/2021	12/31/2382
84432	THYROGLOBULIN		\$24.78	7/1/2021	12/31/2382
84432	THYROGLOBULIN	L1	\$24.78	7/1/2021	12/31/2382
84434	THIORIDAZINE		\$26.07	7/1/2021	12/31/2382
84435	THYROXINE, (T-4), CPB OR RESIN UPTAKE		\$11.91	7/1/2021	12/31/2382
84436	THYROXINE; TOTAL		\$10.82	7/1/2021	12/31/2382
84436	THYROXINE; TOTAL	GA	\$10.82	7/1/2021	12/31/2382
84436	THYROXINE; TOTAL	L1	\$10.82	7/1/2021	12/31/2382
84436	THYROXINE; TOTAL	PO	\$10.82	7/1/2021	12/31/2382
84437	THYROXINE; REQUIRING ELUTION (EG, NEONATAL)		\$10.18	7/1/2021	12/31/2382
84437	THYROXINE; REQUIRING ELUTION (EG, NEONATAL)	L1	\$10.18	7/1/2021	12/31/2382
84439	THYROXINE; FREE		\$14.19	7/1/2021	12/31/2382
84439	THYROXINE; FREE	59	\$14.19	7/1/2021	12/31/2382
84439	THYROXINE; FREE	91	\$14.19	7/1/2021	12/31/2382
84439	THYROXINE; FREE	GA	\$14.19	7/1/2021	12/31/2382
84439	THYROXINE; FREE	GZ	\$14.19	7/1/2021	12/31/2382
84439	THYROXINE; FREE	L1	\$14.19	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
84442	THYROXINE BINDING GLOBULIN (TBG)		\$23.28	7/1/2021	12/31/2382
84442	THYROXINE BINDING GLOBULIN (TBG)	L1	\$23.28	7/1/2021	12/31/2382
84443	THYROID STIMULATING HORMONE (TSH)		\$26.43	7/1/2021	12/31/2382
84443	THYROID STIMULATING HORMONE (TSH)	59	\$26.43	7/1/2021	12/31/2382
84443	THYROID STIMULATING HORMONE (TSH)	91	\$26.43	7/1/2021	12/31/2382
84443	THYROID STIMULATING HORMONE (TSH)	ET	\$26.43	7/1/2021	12/31/2382
84443	THYROID STIMULATING HORMONE (TSH)	GA	\$26.43	7/1/2021	12/31/2382
84443	THYROID STIMULATING HORMONE (TSH)	GY	\$26.43	7/1/2021	12/31/2382
84443	THYROID STIMULATING HORMONE (TSH)	GZ	\$26.43	7/1/2021	12/31/2382
84443	THYROID STIMULATING HORMONE (TSH)	L1	\$26.43	7/1/2021	12/31/2382
84443	THYROID STIMULATING HORMONE (TSH)	PN	\$26.43	7/1/2021	12/31/2382
84443	THYROID STIMULATING HORMONE (TSH)	PO	\$26.43	7/1/2021	12/31/2382
84443	THYROID STIMULATING HORMONE (TSH)	QW	\$26.43	7/1/2021	12/31/2382
84444	THYROTROPIN RELEASING FACTOR (TRF)		\$39.35	7/1/2021	12/31/2382
84445	THYROID STIMULATING IMMUNOGLOBULINS (TSI)		\$80.03	7/1/2021	12/31/2382
84445	THYROID STIMULATING IMMUNOGLOBULINS (TSI)	L1	\$80.03	7/1/2021	12/31/2382
84446	TOCOPHEROL ALPHA (VITAMIN E)		\$9.07	7/1/2021	12/31/2382
84446	TOCOPHEROL ALPHA (VITAMIN E)	L1	\$9.07	7/1/2021	12/31/2382
84447	TOXICOLOGY, SCREEN; GENERAL		\$22.67	7/1/2021	12/31/2382
84448	TOXICOLOGY, SCREEN; SEDATIVE (ACID AND NEUTRAL DRUGS, VOLATILES)		\$26.78	7/1/2021	12/31/2382
84449	TRANSCORTIN (CORTISOL BINDING GLOBULIN)		\$20.86	7/1/2021	12/31/2382
84449	TRANSCORTIN (CORTISOL BINDING GLOBULIN)	L1	\$20.86	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
84450	TRANSFERASE; ASPARTATE AMINO (AST) (SGOT)		\$8.13	7/1/2021	12/31/2382
84450	TRANSFERASE; ASPARTATE AMINO (AST) (SGOT)	59	\$8.13	7/1/2021	12/31/2382
84450	TRANSFERASE; ASPARTATE AMINO (AST) (SGOT)	91	\$8.13	7/1/2021	12/31/2382
84450	TRANSFERASE; ASPARTATE AMINO (AST) (SGOT)	L1	\$8.13	7/1/2021	12/31/2382
84450	TRANSFERASE; ASPARTATE AMINO (AST) (SGOT)	PO	\$8.13	7/1/2021	12/31/2382
84450	TRANSFERASE; ASPARTATE AMINO (AST) (SGOT)	QW	\$8.13	7/1/2021	12/31/2382
84450	TRANSFERASE; ASPARTATE AMINO (AST) (SGOT)	XU	\$8.13	7/1/2021	12/31/2382
84455	TRANSAMINASE, GLUTAMIC OXALOACETIC (SGOT), BLOOD; COLORIMETRIC OR FLUOROMETRIC		\$8.94	7/1/2021	12/31/2382
84460	TRANSFERASE; ALANINE AMINO (ALT) (SGPT)		\$8.34	7/1/2021	12/31/2382
84460	TRANSFERASE; ALANINE AMINO (ALT) (SGPT)	59	\$8.34	7/1/2021	12/31/2382
84460	TRANSFERASE; ALANINE AMINO (ALT) (SGPT)	90	\$8.34	7/1/2021	12/31/2382
84460	TRANSFERASE; ALANINE AMINO (ALT) (SGPT)	91	\$8.34	7/1/2021	12/31/2382
84460	TRANSFERASE; ALANINE AMINO (ALT) (SGPT)	L1	\$8.34	7/1/2021	12/31/2382
84460	TRANSFERASE; ALANINE AMINO (ALT) (SGPT)	QW	\$8.34	7/1/2021	12/31/2382
84460	TRANSFERASE; ALANINE AMINO (ALT) (SGPT)	XU	\$8.34	7/1/2021	12/31/2382
84465	TRANSAMINASE, GLUTAMIC PYRUVIC (SGPT), BLOOD; COLORIMETRIC OR FLUOROMETRIC		\$8.94	7/1/2021	12/31/2382
84466	TRANSFERRIN		\$20.09	7/1/2021	12/31/2382
84466	TRANSFERRIN	L1	\$20.09	7/1/2021	12/31/2382
84472	TRICHLOROETHANOL		\$25.65	7/1/2021	12/31/2382
84474	TRICHLOROACETIC ACID		\$25.84	7/1/2021	12/31/2382
84476	TRIFLUOPERAZINE		\$11.76	7/1/2021	12/31/2382
84478	TRIGLYCERIDES		\$9.05	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
84478	TRIGLYCERIDES	59	\$9.05	7/1/2021	12/31/2382
84478	TRIGLYCERIDES	GA	\$9.05	7/1/2021	12/31/2382
84478	TRIGLYCERIDES	GZ	\$9.05	7/1/2021	12/31/2382
84478	TRIGLYCERIDES	L1	\$9.05	7/1/2021	12/31/2382
84478	TRIGLYCERIDES	QW	\$9.05	7/1/2021	12/31/2382
84479	THYROID HORMONE (T3 OR T4) UPTAKE OR THYROID HORMONE BINDING RATIO (THBR)		\$10.18	7/1/2021	12/31/2382
84479	THYROID HORMONE (T3 OR T4) UPTAKE OR THYROID HORMONE BINDING RATIO (THBR)	59	\$10.18	7/1/2021	12/31/2382
84479	THYROID HORMONE (T3 OR T4) UPTAKE OR THYROID HORMONE BINDING RATIO (THBR)	91	\$10.18	7/1/2021	12/31/2382
84479	THYROID HORMONE (T3 OR T4) UPTAKE OR THYROID HORMONE BINDING RATIO (THBR)	GA	\$10.18	7/1/2021	12/31/2382
84479	THYROID HORMONE (T3 OR T4) UPTAKE OR THYROID HORMONE BINDING RATIO (THBR)	L1	\$10.18	7/1/2021	12/31/2382
84479	THYROID HORMONE (T3 OR T4) UPTAKE OR THYROID HORMONE BINDING RATIO (THBR)	XU	\$10.18	7/1/2021	12/31/2382
84480	TRIDOTHYRONINE (T-3); TOTAL (TT-3)		\$22.31	7/1/2021	12/31/2382
84480	TRIDOTHYRONINE (T-3); TOTAL (TT-3)	59	\$22.31	7/1/2021	12/31/2382
84480	TRIDOTHYRONINE (T-3); TOTAL (TT-3)	91	\$22.31	7/1/2021	12/31/2382
84480	TRIDOTHYRONINE (T-3); TOTAL (TT-3)	L1	\$22.31	7/1/2021	12/31/2382
84481	TRIDOTHYRONINE (T-3); FREE		\$8.77	7/1/2021	12/31/2382
84481	TRIDOTHYRONINE (T-3); FREE	91	\$8.77	7/1/2021	12/31/2382
84481	TRIDOTHYRONINE (T-3); FREE	L1	\$8.77	7/1/2021	12/31/2382
84482	TRIDOTHYRONINE (T-3); REVERSE		\$24.80	7/1/2021	12/31/2382
84482	TRIDOTHYRONINE (T-3); REVERSE	L1	\$24.80	7/1/2021	12/31/2382
84483	TRIMETHADIONE		\$26.75	7/1/2021	12/31/2382
84483	TRIMETHADIONE	L1	\$26.75	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
84484	TROPONIN, QUANTITATIVE		\$10.11	7/1/2021	12/31/2382
84484	TROPONIN, QUANTITATIVE	59	\$10.11	7/1/2021	12/31/2382
84484	TROPONIN, QUANTITATIVE	91	\$10.11	7/1/2021	12/31/2382
84484	TROPONIN, QUANTITATIVE	CR	\$10.11	7/1/2021	12/31/2382
84484	TROPONIN, QUANTITATIVE	ET	\$10.11	7/1/2021	12/31/2382
84484	TROPONIN, QUANTITATIVE	L1	\$10.11	7/1/2021	12/31/2382
84484	TROPONIN, QUANTITATIVE	XU	\$10.11	7/1/2021	12/31/2382
84485	TRYPSIN; DUODENAL FLUID		\$11.00	7/1/2021	12/31/2382
84485	TRYPSIN; DUODENAL FLUID	L1	\$11.00	7/1/2021	12/31/2382
84488	TRYPSIN; FECES, QUALITATIVE		\$10.82	7/1/2021	12/31/2382
84488	TRYPSIN; FECES, QUALITATIVE	L1	\$10.82	7/1/2021	12/31/2382
84490	TRYPSIN; FECES, QUANTITATIVE, 24-HOUR COLLECTION		\$10.82	7/1/2021	12/31/2382
84490	TRYPSIN; FECES, QUANTITATIVE, 24-HOUR COLLECTION	L1	\$10.82	7/1/2021	12/31/2382
84510	TYROSINE		\$16.37	7/1/2021	12/31/2382
84510	TYROSINE	L1	\$16.37	7/1/2021	12/31/2382
84512	TROPONIN, QUALITATIVE		\$7.57	7/1/2021	12/31/2382
84512	TROPONIN, QUALITATIVE	L1	\$7.57	7/1/2021	12/31/2382
84520	UREA NITROGEN; QUANTITATIVE		\$6.21	7/1/2021	12/31/2382
84520	UREA NITROGEN; QUANTITATIVE	59	\$6.21	7/1/2021	12/31/2382
84520	UREA NITROGEN; QUANTITATIVE	91	\$6.21	7/1/2021	12/31/2382
84520	UREA NITROGEN; QUANTITATIVE	ET	\$6.21	7/1/2021	12/31/2382
84520	UREA NITROGEN; QUANTITATIVE	L1	\$6.21	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
84520	UREA NITROGEN; QUANTITATIVE	PO	\$6.21	7/1/2021	12/31/2382
84520	UREA NITROGEN; QUANTITATIVE	XU	\$6.21	7/1/2021	12/31/2382
84525	UREA NITROGEN; SEMIQUANTITATIVE (EG, REAGENT STRIP TEST)		\$5.92	7/1/2021	12/31/2382
84525	UREA NITROGEN; SEMIQUANTITATIVE (EG, REAGENT STRIP TEST)	91	\$5.92	7/1/2021	12/31/2382
84525	UREA NITROGEN; SEMIQUANTITATIVE (EG, REAGENT STRIP TEST)	L1	\$5.92	7/1/2021	12/31/2382
84540	UREA NITROGEN, URINE		\$7.49	7/1/2021	12/31/2382
84540	UREA NITROGEN, URINE	L1	\$7.49	7/1/2021	12/31/2382
84545	UREA NITROGEN, CLEARANCE		\$10.39	7/1/2021	12/31/2382
84545	UREA NITROGEN, CLEARANCE	L1	\$10.39	7/1/2021	12/31/2382
84550	URIC ACID; BLOOD, CHEMICAL		\$7.11	7/1/2021	12/31/2382
84550	URIC ACID; BLOOD, CHEMICAL	59	\$7.11	7/1/2021	12/31/2382
84550	URIC ACID; BLOOD, CHEMICAL	91	\$7.11	7/1/2021	12/31/2382
84550	URIC ACID; BLOOD, CHEMICAL	L1	\$7.11	7/1/2021	12/31/2382
84550	URIC ACID; BLOOD, CHEMICAL	QV	\$7.11	7/1/2021	12/31/2382
84555	URIC ACID; URICASE, ULTRAVIOLET METHOD		\$8.94	7/1/2021	12/31/2382
84560	URIC ACID, URINE		\$7.49	7/1/2021	12/31/2382
84560	URIC ACID, URINE	L1	\$7.49	7/1/2021	12/31/2382
84565	UROBILIN, URINE; QUALITATIVE		\$5.43	7/1/2021	12/31/2382
84570	UROBILIN, URINE; QUANTITATIVE, TIMED SPECIMEN		\$7.94	7/1/2021	12/31/2382
84575	UROBILIN, FECES, QUANTITATIVE		\$7.94	7/1/2021	12/31/2382
84577	UROBILINOGEN, FECES, QUANTITATIVE		\$18.31	7/1/2021	12/31/2382
84577	UROBILINOGEN, FECES, QUANTITATIVE	L1	\$18.31	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
84578	UROBILINOGEN, URINE; QUALITATIVE		\$5.12	7/1/2021	12/31/2382
84578	UROBILINOGEN, URINE; QUALITATIVE	L1	\$5.12	7/1/2021	12/31/2382
84580	UROBILINOGEN, URINE; QUANTITATIVE, TIMED SPECIMEN		\$8.19	7/1/2021	12/31/2382
84580	UROBILINOGEN, URINE; QUANTITATIVE, TIMED SPECIMEN	L1	\$8.19	7/1/2021	12/31/2382
84583	UROBILINOGEN, URINE; SEMIQUANTITATIVE		\$7.92	7/1/2021	12/31/2382
84583	UROBILINOGEN, URINE; SEMIQUANTITATIVE	L1	\$7.92	7/1/2021	12/31/2382
84584	UROPEPSIN, URINE		\$21.54	7/1/2021	12/31/2382
84584	UROPEPSIN, URINE	L1	\$21.54	7/1/2021	12/31/2382
84585	VANILLYLMANDELIC ACID (VMA), URINE		\$24.39	7/1/2021	12/31/2382
84585	VANILLYLMANDELIC ACID (VMA), URINE	L1	\$24.39	7/1/2021	12/31/2382
84586	BASOACTIVE INTESTINAL PEPTIDE (VIP)		\$20.86	7/1/2021	12/31/2382
84586	BASOACTIVE INTESTINAL PEPTIDE (VIP)	L1	\$20.86	7/1/2021	12/31/2382
84588	VASOPRESSIN (ANTIDIURETIC HORMONE, ADH)		\$53.41	7/1/2021	12/31/2382
84588	VASOPRESSIN (ANTIDIURETIC HORMONE, ADH)	L1	\$53.41	7/1/2021	12/31/2382
84589	VISCOSITY		\$20.29	7/1/2021	12/31/2382
84590	VITAMIN A		\$17.56	7/1/2021	12/31/2382
84590	VITAMIN A	L1	\$17.56	7/1/2021	12/31/2382
84591	VITAMIN, NOT OTHERWISE SPECIFIED		\$17.56	7/1/2021	12/31/2382
84591	VITAMIN, NOT OTHERWISE SPECIFIED	59	\$17.56	7/1/2021	12/31/2382
84591	VITAMIN, NOT OTHERWISE SPECIFIED	L1	\$17.56	7/1/2021	12/31/2382
84591	VITAMIN, NOT OTHERWISE SPECIFIED	XU	\$17.56	7/1/2021	12/31/2382
84595	VITAMIN A, BLOOD; INCLUDING CAROTENE		\$19.40	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
84597	VITAMIN K		\$21.57	7/1/2021	12/31/2382
84597	VITAMIN K	L1	\$21.57	7/1/2021	12/31/2382
84600	VOLATILES (EG, ACETIC ANHYDRIDE, CARBON TETRACHLORIDE, DICHLOROETHANE, DICHLOROMETHANE, DIETHYLEETHER, ISOPROPY		\$25.29	7/1/2021	12/31/2382
84600	VOLATILES (EG, ACETIC ANHYDRIDE, CARBON TETRACHLORIDE, DICHLOROETHANE, DICHLOROMETHANE, DIETHYLEETHER, ISOPROPY	59	\$25.29	7/1/2021	12/31/2382
84600	VOLATILES (EG, ACETIC ANHYDRIDE, CARBON TETRACHLORIDE, DICHLOROETHANE, DICHLOROMETHANE, DIETHYLEETHER, ISOPROPY	91	\$25.29	7/1/2021	12/31/2382
84600	VOLATILES (EG, ACETIC ANHYDRIDE, CARBON TETRACHLORIDE, DICHLOROETHANE, DICHLOROMETHANE, DIETHYLEETHER, ISOPROPY	L1	\$25.29	7/1/2021	12/31/2382
84600	VOLATILES (EG, ACETIC ANHYDRIDE, CARBON TETRACHLORIDE, DICHLOROETHANE, DICHLOROMETHANE, DIETHYLEETHER, ISOPROPY	XU	\$25.29	7/1/2021	12/31/2382
84605	VOLUME, BLOOD, DYE METHOD (EVANS BLUE);		\$12.86	7/1/2021	12/31/2382
84610	VOLUME, BLOOD, DYE METHOD (EVANS BLUE); INCLUDING TOTAL PLASMA AND TOTAL BLOOD CELL VOLUME		\$13.33	7/1/2021	12/31/2382
84613	WARFARIN		\$25.60	7/1/2021	12/31/2382
84615	XANTHURENIC ACID		\$37.92	7/1/2021	12/31/2382
84620	XYLOSE ABSORPTION TEST, BLOOD AND/OR URINE		\$18.64	7/1/2021	12/31/2382
84620	XYLOSE ABSORPTION TEST, BLOOD AND/OR URINE	L1	\$18.64	7/1/2021	12/31/2382
84630	ZINC		\$17.92	7/1/2021	12/31/2382
84630	ZINC	GA	\$17.92	7/1/2021	12/31/2382
84630	ZINC	L1	\$17.92	7/1/2021	12/31/2382
84635	ZINC, QUANTITATIVE; URINE		\$19.08	7/1/2021	12/31/2382
84681	C-PEPTIDE		\$32.74	7/1/2021	12/31/2382
84681	C-PEPTIDE	L1	\$32.74	7/1/2021	12/31/2382
84695	GENTAMICIN		\$28.33	7/1/2021	12/31/2382
84702	GONADOTROPIN, CHORIONIC (HCG);		\$23.69	7/1/2021	12/31/2382
84702	GONADOTROPIN, CHORIONIC (HCG);	91	\$23.69	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
84702	GONADOTROPIN, CHORIONIC (HCG);	GA	\$23.69	7/1/2021	12/31/2382
84702	GONADOTROPIN, CHORIONIC (HCG);	GZ	\$23.69	7/1/2021	12/31/2382
84702	GONADOTROPIN, CHORIONIC (HCG);	L1	\$23.69	7/1/2021	12/31/2382
84703	GONADOTROPIN, CHORIONIC (HCG); QUALITATIVE		\$11.82	7/1/2021	12/31/2382
84703	GONADOTROPIN, CHORIONIC (HCG); QUALITATIVE	59	\$11.82	7/1/2021	12/31/2382
84703	GONADOTROPIN, CHORIONIC (HCG); QUALITATIVE	91	\$11.82	7/1/2021	12/31/2382
84703	GONADOTROPIN, CHORIONIC (HCG); QUALITATIVE	L1	\$11.82	7/1/2021	12/31/2382
84703	GONADOTROPIN, CHORIONIC (HCG); QUALITATIVE	Q6	\$11.82	7/1/2021	12/31/2382
84703	GONADOTROPIN, CHORIONIC (HCG); QUALITATIVE	QW	\$11.82	7/1/2021	12/31/2382
84704	GONADOTROPIN, CHORIONIC (HCG); FREE BETA CHAIN		\$23.69	7/1/2021	12/31/2382
84800	THYROID STIMULATING HORMONE (TSH), NEONATAL		\$26.85	7/1/2021	12/31/2382
84810	TOBRAMYCIN		\$13.62	7/1/2021	12/31/2382
84830	OVULATION TESTS, BY VISUAL COLOR COMPARISON METHODS FOR HUMAN LUTEINIZING HORMONE		\$15.79	7/1/2021	12/31/2382
84830	OVULATION TESTS, BY VISUAL COLOR COMPARISON METHODS FOR HUMAN LUTEINIZING HORMONE	L1	\$15.79	7/1/2021	12/31/2382
84999	UNLISTED CHEMISTRY PROCEDURE		\$0.00	7/1/2021	12/31/2382
85000	BLEEDING TIME; DUKE		\$7.37	7/1/2021	12/31/2382
85002	BLEEDING TIME		\$7.09	7/1/2021	12/31/2382
85002	BLEEDING TIME	L1	\$7.09	7/1/2021	12/31/2382
85004	BLOOD COUNT; AUTOMATED DIFFERENTIAL WBC COUNT		\$10.18	7/1/2021	12/31/2382
85004	BLOOD COUNT; AUTOMATED DIFFERENTIAL WBC COUNT	L1	\$10.18	7/1/2021	12/31/2382
85005	BLOOD COUNT; BASOPHIL COUNT, DIRECT		\$7.83	7/1/2021	12/31/2382
85007	BLOOD COUNT; MANUAL DIFFERENTIAL WBC COUNT (INCLUDES RBC MORPHOLOGY AND PLATELET ESTIMATION)		\$5.42	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
85007	BLOOD COUNT; MANUAL DIFFERENTIAL WBC COUNT (INCLUDES RBC MORPHOLOGY AND PLATELET ESTIMATION)	59	\$5.42	7/1/2021	12/31/2382
85007	BLOOD COUNT; MANUAL DIFFERENTIAL WBC COUNT (INCLUDES RBC MORPHOLOGY AND PLATELET ESTIMATION)	91	\$5.42	7/1/2021	12/31/2382
85007	BLOOD COUNT; MANUAL DIFFERENTIAL WBC COUNT (INCLUDES RBC MORPHOLOGY AND PLATELET ESTIMATION)	L1	\$5.42	7/1/2021	12/31/2382
85007	BLOOD COUNT; MANUAL DIFFERENTIAL WBC COUNT (INCLUDES RBC MORPHOLOGY AND PLATELET ESTIMATION)	QV	\$5.42	7/1/2021	12/31/2382
85008	BLOOD COUNT; MANUAL BLOOD SMEAR EXAMINATION WITHOUT DIFFERENTIAL PARAMETERS		\$4.53	7/1/2021	12/31/2382
85008	BLOOD COUNT; MANUAL BLOOD SMEAR EXAMINATION WITHOUT DIFFERENTIAL PARAMETERS	L1	\$4.53	7/1/2021	12/31/2382
85009	BLOOD COUNT; DIFFERENTIAL WBC COUNT, BUFFY COAT		\$5.84	7/1/2021	12/31/2382
85009	BLOOD COUNT; DIFFERENTIAL WBC COUNT, BUFFY COAT	L1	\$5.84	7/1/2021	12/31/2382
85012	BLOOD COUNT; EOSINOPHIL COUNT, DIRECT		\$7.44	7/1/2021	12/31/2382
85013	BLOOD COUNT; SPUN MICROHEMATOCRIT		\$3.73	7/1/2021	12/31/2382
85013	BLOOD COUNT; SPUN MICROHEMATOCRIT	L1	\$3.73	7/1/2021	12/31/2382
85014	BLOOD COUNT; OTHER THAN SPUN HEMATOCRIT		\$3.73	7/1/2021	12/31/2382
85014	BLOOD COUNT; OTHER THAN SPUN HEMATOCRIT	59	\$3.73	7/1/2021	12/31/2382
85014	BLOOD COUNT; OTHER THAN SPUN HEMATOCRIT	91	\$3.73	7/1/2021	12/31/2382
85014	BLOOD COUNT; OTHER THAN SPUN HEMATOCRIT	ET	\$3.73	7/1/2021	12/31/2382
85014	BLOOD COUNT; OTHER THAN SPUN HEMATOCRIT	L1	\$3.73	7/1/2021	12/31/2382
85014	BLOOD COUNT; OTHER THAN SPUN HEMATOCRIT	QW	\$3.73	7/1/2021	12/31/2382
85014	BLOOD COUNT; OTHER THAN SPUN HEMATOCRIT	XU	\$3.73	7/1/2021	12/31/2382
85018	BLOOD COUNT; HEMOGLOBIN		\$3.73	7/1/2021	12/31/2382
85018	BLOOD COUNT; HEMOGLOBIN	59	\$3.73	7/1/2021	12/31/2382
85018	BLOOD COUNT; HEMOGLOBIN	91	\$3.73	7/1/2021	12/31/2382
85018	BLOOD COUNT; HEMOGLOBIN	ET	\$3.73	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
85018	BLOOD COUNT; HEMOGLOBIN	L1	\$3.73	7/1/2021	12/31/2382
85018	BLOOD COUNT; HEMOGLOBIN	QW	\$3.73	7/1/2021	12/31/2382
85018	BLOOD COUNT; HEMOGLOBIN	XU	\$3.73	7/1/2021	12/31/2382
85025	BLOOD COUNT; HEMOGRAM AND PLATELET COUNT, AUTOMATED, AND AUTOMATED COMPLETE DIFFERENTIAL WBC COUNT (CBC)		\$12.23	7/1/2021	12/31/2382
85025	BLOOD COUNT; HEMOGRAM AND PLATELET COUNT, AUTOMATED, AND AUTOMATED COMPLETE DIFFERENTIAL WBC COUNT (CBC)	59	\$12.23	7/1/2021	12/31/2382
85025	BLOOD COUNT; HEMOGRAM AND PLATELET COUNT, AUTOMATED, AND AUTOMATED COMPLETE DIFFERENTIAL WBC COUNT (CBC)	91	\$12.23	7/1/2021	12/31/2382
85025	BLOOD COUNT; HEMOGRAM AND PLATELET COUNT, AUTOMATED, AND AUTOMATED COMPLETE DIFFERENTIAL WBC COUNT (CBC)	CR	\$12.23	7/1/2021	12/31/2382
85025	BLOOD COUNT; HEMOGRAM AND PLATELET COUNT, AUTOMATED, AND AUTOMATED COMPLETE DIFFERENTIAL WBC COUNT (CBC)	ET	\$12.23	7/1/2021	12/31/2382
85025	BLOOD COUNT; HEMOGRAM AND PLATELET COUNT, AUTOMATED, AND AUTOMATED COMPLETE DIFFERENTIAL WBC COUNT (CBC)	GA	\$12.23	7/1/2021	12/31/2382
85025	BLOOD COUNT; HEMOGRAM AND PLATELET COUNT, AUTOMATED, AND AUTOMATED COMPLETE DIFFERENTIAL WBC COUNT (CBC)	GZ	\$12.23	7/1/2021	12/31/2382
85025	BLOOD COUNT; HEMOGRAM AND PLATELET COUNT, AUTOMATED, AND AUTOMATED COMPLETE DIFFERENTIAL WBC COUNT (CBC)	L1	\$12.23	7/1/2021	12/31/2382
85025	BLOOD COUNT; HEMOGRAM AND PLATELET COUNT, AUTOMATED, AND AUTOMATED COMPLETE DIFFERENTIAL WBC COUNT (CBC)	PN	\$12.23	7/1/2021	12/31/2382
85025	BLOOD COUNT; HEMOGRAM AND PLATELET COUNT, AUTOMATED, AND AUTOMATED COMPLETE DIFFERENTIAL WBC COUNT (CBC)	PO	\$12.23	7/1/2021	12/31/2382
85025	BLOOD COUNT; HEMOGRAM AND PLATELET COUNT, AUTOMATED, AND AUTOMATED COMPLETE DIFFERENTIAL WBC COUNT (CBC)	Q1	\$12.23	7/1/2021	12/31/2382
85025	BLOOD COUNT; HEMOGRAM AND PLATELET COUNT, AUTOMATED, AND AUTOMATED COMPLETE DIFFERENTIAL WBC COUNT (CBC)	Q6	\$12.23	7/1/2021	12/31/2382
85025	BLOOD COUNT; HEMOGRAM AND PLATELET COUNT, AUTOMATED, AND AUTOMATED COMPLETE DIFFERENTIAL WBC COUNT (CBC)	QJ	\$12.23	7/1/2021	12/31/2382
85025	BLOOD COUNT; HEMOGRAM AND PLATELET COUNT, AUTOMATED, AND AUTOMATED COMPLETE DIFFERENTIAL WBC COUNT (CBC)	XU	\$12.23	7/1/2021	12/31/2382
85027	BLOOD COUNT; HEMOGRAM AND PLATELET COUNT, AUTOMATED		\$10.18	7/1/2021	12/31/2382
85027	BLOOD COUNT; HEMOGRAM AND PLATELET COUNT, AUTOMATED	59	\$10.18	7/1/2021	12/31/2382
85027	BLOOD COUNT; HEMOGRAM AND PLATELET COUNT, AUTOMATED	91	\$10.18	7/1/2021	12/31/2382
85027	BLOOD COUNT; HEMOGRAM AND PLATELET COUNT, AUTOMATED	GA	\$10.18	7/1/2021	12/31/2382
85027	BLOOD COUNT; HEMOGRAM AND PLATELET COUNT, AUTOMATED	L1	\$10.18	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
85027	BLOOD COUNT; HEMOGRAM AND PLATELET COUNT, AUTOMATED	XU	\$10.18	7/1/2021	12/31/2382
85032	BLOOD COUNT; MANUAL CELL COUNT (ERYTHROCYTE, LEUKOCYTE, OR PLATELET) EACH		\$6.77	7/1/2021	12/31/2382
85032	BLOOD COUNT; MANUAL CELL COUNT (ERYTHROCYTE, LEUKOCYTE, OR PLATELET) EACH	L1	\$6.77	7/1/2021	12/31/2382
85041	BLOOD COUNT; RED BLOOD CELL (RBC) ONLY		\$4.53	7/1/2021	12/31/2382
85041	BLOOD COUNT; RED BLOOD CELL (RBC) ONLY	L1	\$4.53	7/1/2021	12/31/2382
85044	BLOOD COUNT; RETICULOCYTE COUNT, MANUAL		\$6.77	7/1/2021	12/31/2382
85044	BLOOD COUNT; RETICULOCYTE COUNT, MANUAL	91	\$6.77	7/1/2021	12/31/2382
85044	BLOOD COUNT; RETICULOCYTE COUNT, MANUAL	L1	\$6.77	7/1/2021	12/31/2382
85045	BLOOD COUNT; RETICULOCYTE COUNT, FLOW CYTOMETRY		\$6.30	7/1/2021	12/31/2382
85045	BLOOD COUNT; RETICULOCYTE COUNT, FLOW CYTOMETRY	L1	\$6.30	7/1/2021	12/31/2382
85046	BLOOD COUNT; RETICULOCYTES, HEMOGLOBIN CONCENTRATION		\$8.79	7/1/2021	12/31/2382
85046	BLOOD COUNT; RETICULOCYTES, HEMOGLOBIN CONCENTRATION	L1	\$8.79	7/1/2021	12/31/2382
85048	BLOOD COUNT; WHITE BLOOD CELL (WBC)		\$4.00	7/1/2021	12/31/2382
85048	BLOOD COUNT; WHITE BLOOD CELL (WBC)	59	\$4.00	7/1/2021	12/31/2382
85048	BLOOD COUNT; WHITE BLOOD CELL (WBC)	L1	\$4.00	7/1/2021	12/31/2382
85048	BLOOD COUNT; WHITE BLOOD CELL (WBC)	XU	\$4.00	7/1/2021	12/31/2382
85049	BLOOD COUNT; PLATELET, AUTOMATED		\$7.03	7/1/2021	12/31/2382
85049	BLOOD COUNT; PLATELET, AUTOMATED	59	\$7.03	7/1/2021	12/31/2382
85049	BLOOD COUNT; PLATELET, AUTOMATED	91	\$7.03	7/1/2021	12/31/2382
85049	BLOOD COUNT; PLATELET, AUTOMATED	L1	\$7.03	7/1/2021	12/31/2382
85049	BLOOD COUNT; PLATELET, AUTOMATED	XU	\$7.03	7/1/2021	12/23/2382
85055	RETICULATED PLATELET ASSAY		\$30.04	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
85055	RETICULATED PLATELET ASSAY	L1	\$30.04	7/1/2021	12/31/2382
85060	BLOOD SMEAR, PERIPHERAL, INTERPRETATION BY PHYSICIAN WITH WRITTEN REPORT		\$24.93	7/1/2021	12/31/2382
85060	BLOOD SMEAR, PERIPHERAL, INTERPRETATION BY PHYSICIAN WITH WRITTEN REPORT	L1	\$24.93	7/1/2021	12/31/2382
85095	BONE MARROW; ASPIRATION ONLY		\$69.07	7/1/2021	12/31/2382
85097	BONE MARROW; SMEAR INTERPRETATION ONLY, WITH OR WITHOUT DIFFERENTIAL CELL COUNT		\$53.40	7/1/2021	12/31/2382
85097	BONE MARROW; SMEAR INTERPRETATION ONLY, WITH OR WITHOUT DIFFERENTIAL CELL COUNT	91	\$53.40	7/1/2021	12/31/2382
85097	BONE MARROW; SMEAR INTERPRETATION ONLY, WITH OR WITHOUT DIFFERENTIAL CELL COUNT	L1	\$53.40	7/1/2021	12/31/2382
85102	BONE MARROW BIOPSY, NEEDLE OR TROCAR;		\$107.61	7/1/2021	12/31/2382
85102	BONE MARROW BIOPSY, NEEDLE OR TROCAR;	26	\$59.34	7/1/2021	12/31/2382
85102	BONE MARROW BIOPSY, NEEDLE OR TROCAR;	TC	\$20.70	7/1/2021	12/31/2382
85130	CHROMOGENIC SUBSTRATE ASSAY		\$18.72	7/1/2021	12/31/2382
85130	CHROMOGENIC SUBSTRATE ASSAY	L1	\$18.72	7/1/2021	12/31/2382
85170	CLOT RETRACTION		\$5.68	7/1/2021	12/31/2382
85170	CLOT RETRACTION	L1	\$5.68	7/1/2021	12/31/2382
85171	CLOT RETRACTION; QUANTITATIVE		\$7.10	7/1/2021	12/31/2382
85172	CLOT RETRACTION; INHIBITION BY DRUGS		\$7.10	7/1/2021	12/31/2382
85175	CLOT LYSIS TIME, WHOLE BLOOD DILUTION		\$7.16	7/1/2021	12/31/2382
85175	CLOT LYSIS TIME, WHOLE BLOOD DILUTION	L1	\$7.16	7/1/2021	12/31/2382
85210	CLOTTING; FACTOR II, PROTHROMBIN, SPECIFIC		\$7.32	7/1/2021	12/31/2382
85210	CLOTTING; FACTOR II, PROTHROMBIN, SPECIFIC	L1	\$7.32	7/1/2021	12/31/2382
85220	CLOTTING; FACTOR V (ACG OR PROACCELERIN), LABILE FACTOR		\$27.78	7/1/2021	12/31/2382
85220	CLOTTING; FACTOR V (ACG OR PROACCELERIN), LABILE FACTOR	L1	\$27.78	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
85230	CLOTting; FACTOR VII (PROCONVERTIN, STABLE FACTOR)		\$28.18	7/1/2021	12/31/2382
85230	CLOTting; FACTOR VII (PROCONVERTIN, STABLE FACTOR)	L1	\$28.18	7/1/2021	12/31/2382
85240	CLOTting; FACTOR VIII (AHG), ONE STAGE		\$28.18	7/1/2021	12/31/2382
85240	CLOTting; FACTOR VIII (AHG), ONE STAGE	91	\$28.18	7/1/2021	12/31/2382
85240	CLOTting; FACTOR VIII (AHG), ONE STAGE	L1	\$28.18	7/1/2021	12/31/2382
85242	CLOTting; FACTOR VIII (AHG), TWO STAGE		\$41.56	7/1/2021	12/31/2382
85242	CLOTting; FACTOR VIII (AHG), TWO STAGE	L1	\$28.42	7/1/2021	12/31/2382
85244	CLOTting; FACTOR VIII RELATED ANTIGEN		\$32.13	7/1/2021	12/31/2382
85244	CLOTting; FACTOR VIII RELATED ANTIGEN	L1	\$32.13	7/1/2021	12/31/2382
85245	CLOTting; FACTOR VIII, VW FACTOR, RISTOCETIN COFACTOR		\$36.11	7/1/2021	12/31/2382
85245	CLOTting; FACTOR VIII, VW FACTOR, RISTOCETIN COFACTOR	91	\$36.11	7/1/2021	12/31/2382
85245	CLOTting; FACTOR VIII, VW FACTOR, RISTOCETIN COFACTOR	L1	\$36.11	7/1/2021	12/31/2382
85246	CLOTting; FACTOR VIII, VW FACTOR ANTIGEN		\$36.11	7/1/2021	12/31/2382
85246	CLOTting; FACTOR VIII, VW FACTOR ANTIGEN	91	\$36.11	7/1/2021	12/31/2382
85246	CLOTting; FACTOR VIII, VW FACTOR ANTIGEN	L1	\$36.11	7/1/2021	12/31/2382
85247	CLOTting; FACTOR VIII, VON WILLEBRAND'S FACTOR, MULTIMETRIC ANALYSIS	L1	\$36.11	7/1/2021	12/31/2382
85250	CLOTting; FACTOR IX (PTC OR CHRISTMAS)		\$29.96	7/1/2021	12/31/2382
85250	CLOTting; FACTOR IX (PTC OR CHRISTMAS)	L1	\$29.96	7/1/2021	12/31/2382
85260	CLOTting; FACTOR X (STUART-PROWER)		\$28.18	7/1/2021	12/31/2382
85260	CLOTting; FACTOR X (STUART-PROWER)	L1	\$28.18	7/1/2021	12/31/2382
85270	CLOTting; FACTOR XI (PTA)		\$28.18	7/1/2021	12/31/2382
85270	CLOTting; FACTOR XI (PTA)	L1	\$28.18	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
85280	CLOTTING; FACTOR XII (HAGEMAN)		\$30.45	7/1/2021	12/31/2382
85280	CLOTTING; FACTOR XII (HAGEMAN)	L1	\$30.45	7/1/2021	12/31/2382
85290	CLOTTING; FACTOR XIII (FIBRIN STABILIZING)		\$25.71	7/1/2021	12/31/2382
85290	CLOTTING; FACTOR XIII (FIBRIN STABILIZING)	L1	\$25.71	7/1/2021	12/31/2382
85291	CLOTTING; FACTOR XIII (FIBRIN STABILIZING), SCREEN SOLUBILITY		\$13.99	7/1/2021	12/31/2382
85291	CLOTTING; FACTOR XIII (FIBRIN STABILIZING), SCREEN SOLUBILITY	L1	\$13.99	7/1/2021	12/31/2382
85292	CLOTTING; PREKALLIKREIN ASSAY (FLETCHER FACTOR ASSAY)		\$29.81	7/1/2021	12/31/2382
85292	CLOTTING; PREKALLIKREIN ASSAY (FLETCHER FACTOR ASSAY)	L1	\$29.81	7/1/2021	12/31/2382
85293	CLOTTING; HIGH MOLECULAR WEIGHT KININOGEN ASSAY (FITZGERALD FACTOR ASSAY)		\$29.81	7/1/2021	12/31/2382
85293	CLOTTING; HIGH MOLECULAR WEIGHT KININOGEN ASSAY (FITZGERALD FACTOR ASSAY)	L1	\$29.81	7/1/2021	12/31/2382
85300	CLOTTING INHIBITORS OR ANTICOAGULANTS; ANTITHROMBIN III, ACTIVITY		\$18.64	7/1/2021	12/31/2382
85300	CLOTTING INHIBITORS OR ANTICOAGULANTS; ANTITHROMBIN III, ACTIVITY	L1	\$18.64	7/1/2021	12/31/2382
85301	CLOTTING INHIBITORS OR ANTICOAGULANTS; ANTITHROMBIN III, ANTIGEN ASSAY		\$17.02	7/1/2021	12/31/2382
85301	CLOTTING INHIBITORS OR ANTICOAGULANTS; ANTITHROMBIN III, ANTIGEN ASSAY	L1	\$17.02	7/1/2021	12/31/2382
85302	CLOTTING INHIBITORS OR ANTICOAGULANTS; PROTEIN C, ANTIGEN		\$18.92	7/1/2021	12/31/2382
85302	CLOTTING INHIBITORS OR ANTICOAGULANTS; PROTEIN C, ANTIGEN	L1	\$18.92	7/1/2021	12/31/2382
85303	CLOTTING INHIBITORS OR ANTICOAGULANTS; PROTEIN C, ACTIVITY		\$21.76	7/1/2021	12/31/2382
85303	CLOTTING INHIBITORS OR ANTICOAGULANTS; PROTEIN C, ACTIVITY	91	\$21.76	7/1/2021	12/31/2382
85303	CLOTTING INHIBITORS OR ANTICOAGULANTS; PROTEIN C, ACTIVITY	L1	\$21.76	7/1/2021	12/31/2382
85305	CLOTTING INHIBITORS OR ANTICOAGULANTS; PROTEIN S, TOTAL		\$18.25	7/1/2021	12/31/2382
85305	CLOTTING INHIBITORS OR ANTICOAGULANTS; PROTEIN S, TOTAL	91	\$18.25	7/1/2021	12/31/2382
85305	CLOTTING INHIBITORS OR ANTICOAGULANTS; PROTEIN S, TOTAL	L1	\$18.25	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
85306	CLOTTING INHIBITORS OR ANTICOAGULANTS; PROTEIN S, FREE		\$22.49	7/1/2021	12/31/2382
85306	CLOTTING INHIBITORS OR ANTICOAGULANTS; PROTEIN S, FREE	59	\$22.49	7/1/2021	12/31/2382
85306	CLOTTING INHIBITORS OR ANTICOAGULANTS; PROTEIN S, FREE	91	\$22.49	7/1/2021	12/31/2382
85306	CLOTTING INHIBITORS OR ANTICOAGULANTS; PROTEIN S, FREE	L1	\$22.49	7/1/2021	12/31/2382
85307	ACTIVATED PROTEIN C (APC) RESISTANCE ASSAY		\$22.49	7/1/2021	12/31/2382
85307	ACTIVATED PROTEIN C (APC) RESISTANCE ASSAY	L1	\$22.49	7/1/2021	12/31/2382
85310	CLOTTING INHIBITORS OR ANTICOAGULANTS; ANTITHROMBOPLASTIN		\$17.15	7/1/2021	12/31/2382
85311	CLOTTING INHIBITORS OR ANTICOAGULANTS; ANTIPROTHROMBINASE		\$17.87	7/1/2021	12/31/2382
85320	CLOTTING INHIBITORS OR ANTICOAGULANTS; ANTIPROTHROMBOPLASTIN		\$17.15	7/1/2021	12/31/2382
85330	CLOTTING INHIBITORS OR ANTICOAGULANTS; ANTIFACTOR VIII		\$20.48	7/1/2021	12/31/2382
85335	FACTOR INHIBITOR TEST		\$20.26	7/1/2021	12/31/2382
85335	FACTOR INHIBITOR TEST	L1	\$20.26	7/1/2021	12/31/2382
85337	THROMBOMODULIN		\$16.40	7/1/2021	12/31/2382
85337	THROMBOMODULIN	L1	\$16.40	7/1/2021	12/31/2382
85340	CLOTTING INHIBITORS OR ANTICOAGULANTS; CROSS RECALCIFICATION TIME (MIXTURES)		\$15.69	7/1/2021	12/31/2382
85341	CLOTTING INHIBITORS OR ANTICOAGULANTS; PTT INHIBITION TEST		\$12.38	7/1/2021	12/31/2382
85345	COAGULATION TIME; LEE AND WHITE		\$6.77	7/1/2021	12/31/2382
85345	COAGULATION TIME; LEE AND WHITE	L1	\$6.77	7/1/2021	12/31/2382
85347	COAGULATION TIME; ACTIVATED		\$6.71	7/1/2021	12/31/2382
85347	COAGULATION TIME; ACTIVATED	91	\$6.71	7/1/2021	12/31/2382
85347	COAGULATION TIME; ACTIVATED	L1	\$6.71	7/1/2021	12/31/2382
85348	COAGULATION TIME; OTHER METHODS		\$5.85	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
85348	COAGULATION TIME; OTHER METHODS	L1	\$5.85	7/1/2021	12/31/2382
85360	EUGLOBULIN LYSIS		\$6.57	7/1/2021	12/31/2382
85360	EUGLOBULIN LYSIS	L1	\$6.57	7/1/2021	12/31/2382
85362	FIBRIN(OGEN) DEGRADATION (SPLIT) PRODUCTS (FDP)(FSP); AGGLUTINATION SLIDE, SEMIQUANTITATIVE		\$10.83	7/1/2021	12/31/2382
85362	FIBRIN(OGEN) DEGRADATION (SPLIT) PRODUCTS (FDP)(FSP); AGGLUTINATION SLIDE, SEMIQUANTITATIVE	L1	\$10.83	7/1/2021	12/31/2382
85363	FIBRIN DEGRADATION (SPLIT) PRODUCTS (FDP) (FSP); ETHANOL GEL		\$8.63	7/1/2021	12/31/2382
85364	FIBRIN DEGRADATION (SPLIT) PRODUCTS (FDP) (FSP); HEMAGGLUTINATION INHIBITION (MERSKEY), MICROTITER		\$22.32	7/1/2021	12/31/2382
85365	FIBRIN DEGRADATION (SPLIT) PRODUCTS (FDP) (FSP); IMMUNOELECTROPHORESIS		\$31.02	7/1/2021	12/31/2382
85366	FIBRIN(OGEN) DEGRADATION (SPLIT) PRODUCTS (FDP)(FSP); PARACOAGULATION		\$13.56	7/1/2021	12/31/2382
85366	FIBRIN(OGEN) DEGRADATION (SPLIT) PRODUCTS (FDP)(FSP); PARACOAGULATION	L1	\$13.56	7/1/2021	12/31/2382
85367	FIBRIN DEGRADATION (SPLIT) PRODUCTS (FDP) (FSP); PRECIPITATION		\$11.21	7/1/2021	12/31/2382
85368	FIBRIN DEGRADATION (SPLIT) PRODUCTS (FDP) (FSP); PROTAMINE PARACOAGULATION (PPP)		\$14.89	7/1/2021	12/31/2382
85369	FIBRIN DEGRADATION (SPLIT) PRODUCTS (FDP) (FSP); STAPHYLOCOCCAL CLUMPING		\$9.73	7/1/2021	12/31/2382
85370	FIBRIN(OGEN) DEGRADATION (SPLIT) PRODUCTS (FDP)(FSP); QUANTITATIVE		\$17.87	7/1/2021	12/31/2382
85370	FIBRIN(OGEN) DEGRADATION (SPLIT) PRODUCTS (FDP)(FSP); QUANTITATIVE	L1	\$17.87	7/1/2021	12/31/2382
85371	FIBRINOGEN, SEMIQUANTITATIVE; LATEX		\$11.21	7/1/2021	12/31/2382
85372	FIBRINOGEN, SEMIQUANTITATIVE; TURBIDIMETRIC		\$12.74	7/1/2021	12/31/2382
85376	FIBRINOGEN; THROMBIN WITH PLASMA DILUTION		\$13.89	7/1/2021	12/31/2382
85377	FIBRINOGEN; THROMBIN TIME DILUTION		\$17.87	7/1/2021	12/31/2382
85378	FIBRIN DEGRADATION PRODUCTS, D-DIMER; SEMIQUANTITATIVE		\$11.23	7/1/2021	12/31/2382
85378	FIBRIN DEGRADATION PRODUCTS, D-DIMER; SEMIQUANTITATIVE	L1	\$11.23	7/1/2021	12/31/2382
85379	FIBRIN DEGRADATION PRODUCTS, D-DIMER; QUANTITATIVE		\$16.02	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
85379	FIBRIN DEGRADATION PRODUCTS, D-DIMER; QUANTITATIVE	91	\$16.02	7/1/2021	12/31/2382
85379	FIBRIN DEGRADATION PRODUCTS, D-DIMER; QUANTITATIVE	CR	\$16.02	7/1/2021	12/31/2382
85379	FIBRIN DEGRADATION PRODUCTS, D-DIMER; QUANTITATIVE	L1	\$16.02	7/1/2021	12/31/2382
85380	FIBRIN DEGRADATION PRODUCTS, D-DIMER; ULTRASENSITIVE, QUALITATIVE OR SEMIQUANTITATIVE		\$16.02	7/1/2021	12/31/2382
85380	FIBRIN DEGRADATION PRODUCTS, D-DIMER; ULTRASENSITIVE, QUALITATIVE OR SEMIQUANTITATIVE	L1	\$16.02	7/1/2021	12/31/2382
85384	FIBRINOGEN; ACTIVITY		\$13.36	7/1/2021	12/31/2382
85384	FIBRINOGEN; ACTIVITY	L1	\$13.36	7/1/2021	12/31/2382
85385	FIBRINOGEN; ANTIGEN		\$13.36	7/1/2021	12/31/2382
85385	FIBRINOGEN; ANTIGEN	L1	\$13.36	7/1/2021	12/31/2382
85390	FIBRINOLYSINS OR COAGULOPATHY SCREEN, INTERPRETATION AND REPORT		\$8.13	7/1/2021	12/31/2382
85390	FIBRINOLYSINS OR COAGULOPATHY SCREEN, INTERPRETATION AND REPORT	26	\$20.43	7/1/2021	12/31/2382
85390	FIBRINOLYSINS OR COAGULOPATHY SCREEN, INTERPRETATION AND REPORT	L1	\$20.43	7/1/2021	12/31/2382
85392	FIBRINOLYSINS; WITH EACA CONTROL		\$13.51	7/1/2021	12/31/2382
85395	FIBRINOLYSINS; SEMIQUANTITATIVE		\$12.51	7/1/2021	12/31/2382
85397	COAGULATION AND FIBRINOLYSIS, FUNCTIONAL ACTIVITY, NOT OTHERWISE SPECIFIED, EACH ANALYTE		\$37.73	7/1/2021	12/31/2382
85397	COAGULATION AND FIBRINOLYSIS, FUNCTIONAL ACTIVITY, NOT OTHERWISE SPECIFIED, EACH ANALYTE	L1	\$37.73	7/1/2021	12/31/2382
85398	FIBRINOLYSIS, QUANTITATIVE		\$17.15	7/1/2021	12/31/2382
85400	FIBRINOLYTIC FACTORS AND INHIBITORS; PLASMIN		\$13.92	7/1/2021	12/31/2382
85400	FIBRINOLYTIC FACTORS AND INHIBITORS; PLASMIN	L1	\$13.92	7/1/2021	12/31/2382
85410	FIBRINOLYTIC FACTORS AND INHIBITORS; ALPHA-2 ANTIPLASMIN		\$12.13	7/1/2021	12/31/2382
85410	FIBRINOLYTIC FACTORS AND INHIBITORS; ALPHA-2 ANTIPLASMIN	L1	\$12.13	7/1/2021	12/31/2382
85415	FIBRINOLYTIC FACTORS AND INHIBITORS; PLASMINOGEN ACTIVATOR		\$27.05	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
85415	FIBRINOLYTIC FACTORS AND INHIBITORS; PLASMINOGEN ACTIVATOR	L1	\$27.05	7/1/2021	12/31/2382
85420	FIBRINOLYTIC FACTORS AND INHIBITORS; PLASMINOGEN, EXCEPT ANTIGENIC ASSAY		\$10.28	7/1/2021	12/31/2382
85420	FIBRINOLYTIC FACTORS AND INHIBITORS; PLASMINOGEN, EXCEPT ANTIGENIC ASSAY	L1	\$10.28	7/1/2021	12/31/2382
85421	FIBRINOLYTIC FACTORS AND INHIBITORS; PLASMINOGEN, ANTIGENIC ASSAY		\$16.03	7/1/2021	12/31/2382
85421	FIBRINOLYTIC FACTORS AND INHIBITORS; PLASMINOGEN, ANTIGENIC ASSAY	L1	\$16.03	7/1/2021	12/31/2382
85426	FIBRINOLYTIC MECHANISMS; VON WILLEBRAND FACTOR ASSAY		\$39.69	7/1/2021	12/31/2382
85441	HEINZ BODIES; DIRECT		\$6.62	7/1/2021	12/31/2382
85441	HEINZ BODIES; DIRECT	L1	\$6.62	7/1/2021	12/31/2382
85445	HEINZ BODIES; INDUCED, ACETYL PHENYLHYDRAZINE		\$10.73	7/1/2021	12/31/2382
85445	HEINZ BODIES; INDUCED, ACETYL PHENYLHYDRAZINE	L1	\$10.73	7/1/2021	12/31/2382
85460	HEMOGLOBIN, FETAL, DIFFERENTIAL LYSIS (KLEIHAUER)		\$12.18	7/1/2021	12/31/2382
85460	HEMOGLOBIN, FETAL, DIFFERENTIAL LYSIS (KLEIHAUER)	L1	\$12.18	7/1/2021	12/31/2382
85461	HEMOGLOBIN OR RBC'S, FETAL, FOR FETOMATERNAL HEMORRHAGE; ROSETTE		\$10.43	7/1/2021	12/31/2382
85461	HEMOGLOBIN OR RBC'S, FETAL, FOR FETOMATERNAL HEMORRHAGE; ROSETTE	L1	\$10.43	7/1/2021	12/31/2382
85475	HEMOLYSIN, ACID		\$13.97	7/1/2021	12/31/2382
85475	HEMOLYSIN, ACID	L1	\$13.97	7/1/2021	12/31/2382
85520	HEPARIN ASSAY		\$20.60	7/1/2021	12/31/2382
85520	HEPARIN ASSAY	L1	\$20.60	7/1/2021	12/31/2382
85525	HEPARIN NEUTRALIZATION		\$18.64	7/1/2021	12/31/2382
85525	HEPARIN NEUTRALIZATION	L1	\$18.64	7/1/2021	12/31/2382
85530	HEPARIN-PROTAMINE TOLERANCE TEST		\$22.31	7/1/2021	12/31/2382
85530	HEPARIN-PROTAMINE TOLERANCE TEST	L1	\$22.31	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
85536	IRON STAIN, PERIPHERAL BLOOD		\$10.18	7/1/2021	12/31/2382
85536	IRON STAIN, PERIPHERAL BLOOD	L1	\$10.18	7/1/2021	12/31/2382
85538	LEDER STAIN (ESTERASE) BLOOD OR BONE MARROW		\$17.39	7/1/2021	12/31/2382
85540	LEUKOCYTE ALKALINE PHOSPHATASE WITH COUNT		\$13.55	7/1/2021	12/31/2382
85540	LEUKOCYTE ALKALINE PHOSPHATASE WITH COUNT	L1	\$13.55	7/1/2021	12/31/2382
85544	LUPUS ERYTHEMATOSUS (LE) CELL PREP		\$15.73	7/1/2021	12/31/2382
85547	MECHANICAL FRAGILITY, RBC		\$4.53	7/1/2021	12/31/2382
85547	MECHANICAL FRAGILITY, RBC	L1	\$4.53	7/1/2021	12/31/2382
85548	MORPHOLOGY OF RED BLOOD CELLS, ONLY		\$4.38	7/1/2021	12/31/2382
85549	MURAMIDASE		\$29.52	7/1/2021	12/31/2382
85549	MURAMIDASE	L1	\$29.52	7/1/2021	12/31/2382
85555	OSMOTIC FRAGILITY, RBC; UNINCUBATED		\$10.52	7/1/2021	12/31/2382
85555	OSMOTIC FRAGILITY, RBC; UNINCUBATED	L1	\$10.52	7/1/2021	12/31/2382
85556	OSMOTIC FRAGILITY, RBC; INCUBATED, QUALITATIVE		\$14.52	7/1/2021	12/31/2382
85557	OSMOTIC FRAGILITY, RBC; INCUBATED		\$21.01	7/1/2021	12/31/2382
85557	OSMOTIC FRAGILITY, RBC; INCUBATED	L1	\$21.01	7/1/2021	12/31/2382
85560	PEROXIDASE STAIN, WBC		\$5.26	7/1/2021	12/31/2382
85575	PLATELET; IN VITRO		\$19.54	7/1/2021	12/31/2382
85576	PLATELET; EACH AGENT		\$33.80	7/1/2021	12/31/2382
85576	PLATELET; EACH AGENT	26	\$20.43	7/1/2021	12/31/2382
85576	PLATELET; EACH AGENT	59	\$33.80	7/1/2021	12/31/2382
85576	PLATELET; EACH AGENT	91	\$33.80	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
85576	PLATELET; EACH AGENT	L1	\$33.80	7/1/2021	12/31/2382
85576	PLATELET; EACH AGENT	QW	\$33.80	7/1/2021	12/31/2382
85577	PLATELET; RETENTION (IN VITRO), GLASS BEAD		\$18.67	7/1/2021	12/31/2382
85580	PLATELET; COUNT (REES-ECKER)		\$7.44	7/1/2021	12/31/2382
85597	PLATELET NEUTRALIZATION		\$28.29	7/1/2021	12/31/2382
85597	PLATELET NEUTRALIZATION	91	\$28.29	7/1/2021	12/31/2382
85597	PLATELET NEUTRALIZATION	L1	\$28.29	7/1/2021	12/31/2382
85598	PHOSPHOLIPID NEUTRALIZATION; HEXAGONAL PHOSPHOLIPID		\$28.50	7/1/2021	12/31/2382
85598	PHOSPHOLIPID NEUTRALIZATION; HEXAGONAL PHOSPHOLIPID	L1	\$28.50	7/1/2021	12/31/2382
85610	PROTHROMBIN TIME;		\$6.18	7/1/2021	12/31/2382
85610	PROTHROMBIN TIME;	91	\$6.18	7/1/2021	12/31/2382
85610	PROTHROMBIN TIME;	AY	\$6.18	7/1/2021	12/31/2382
85610	PROTHROMBIN TIME;	CR	\$6.18	7/1/2021	12/31/2382
85610	PROTHROMBIN TIME;	ET	\$6.18	7/1/2021	12/31/2382
85610	PROTHROMBIN TIME;	GA	\$6.18	7/1/2021	12/31/2382
85610	PROTHROMBIN TIME;	GZ	\$6.18	7/1/2021	12/31/2382
85610	PROTHROMBIN TIME;	L1	\$6.18	7/1/2021	12/31/2382
85610	PROTHROMBIN TIME;	Q6	\$6.18	7/1/2021	12/31/2382
85610	PROTHROMBIN TIME;	QJ	\$6.18	7/1/2021	12/31/2382
85610	PROTHROMBIN TIME;	QW	\$6.18	7/1/2021	12/31/2382
85611	PROTHROMBIN TIME; SUBSTITUTION, PLASMA FRACTIONS, EACH		\$6.21	7/1/2021	12/31/2382
85611	PROTHROMBIN TIME; SUBSTITUTION, PLASMA FRACTIONS, EACH	L1	\$6.21	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
85612	RUSSELL VIPER VENOM TIME (INCLUDES VENOM); UNDILUTED		\$10.11	7/1/2021	12/31/2382
85612	RUSSELL VIPER VENOM TIME (INCLUDES VENOM); UNDILUTED	L1	\$10.11	7/1/2021	12/31/2382
85613	RUSSELL VIPER VENOM TIME (INCLUDES VENOM); DILUTED		\$10.11	7/1/2021	12/31/2382
85613	RUSSELL VIPER VENOM TIME (INCLUDES VENOM); DILUTED	L1	\$10.11	7/1/2021	12/31/2382
85613	RUSSELL VIPER VENOM TIME (INCLUDES VENOM); DILUTED	XU	\$10.11	7/1/2021	12/31/2382
85615	PROTHROMBIN UTILIZATION (CONSUMPTION)		\$11.21	7/1/2021	12/31/2382
85618	PROTHROMBIN-PROCONVERTIN, P&P (OWREN)		\$8.91	7/1/2021	12/31/2382
85630	RED BLOOD CELL SIZE (PRICE-JONES)		\$15.94	7/1/2021	12/31/2382
85632	RED BLOOD CELL PEROXIDE HEMOLYSIS		\$13.95	7/1/2021	12/31/2382
85635	REPTILASE TEST		\$15.49	7/1/2021	12/31/2382
85635	REPTILASE TEST	L1	\$15.49	7/1/2021	12/31/2382
85650	SEDIMENTATION RATE (ESR); WINTROBE TYPE		\$6.11	7/1/2021	12/31/2382
85651	SEDIMENTATION RATE, ERYTHROCYTE; NON-AUTOMATED		\$5.59	7/1/2021	12/31/2382
85651	SEDIMENTATION RATE, ERYTHROCYTE; NON-AUTOMATED	91	\$5.59	7/1/2021	12/31/2382
85651	SEDIMENTATION RATE, ERYTHROCYTE; NON-AUTOMATED	L1	\$5.59	7/1/2021	12/31/2382
85651	SEDIMENTATION RATE, ERYTHROCYTE; NON-AUTOMATED	QW	\$5.59	7/1/2021	12/31/2382
85652	SEDIMENTATION RATE, ERYTHROCYTE; AUTOMATED		\$4.25	7/1/2021	12/31/2382
85652	SEDIMENTATION RATE, ERYTHROCYTE; AUTOMATED	CR	\$4.25	7/1/2021	12/31/2382
85652	SEDIMENTATION RATE, ERYTHROCYTE; AUTOMATED	GZ	\$4.25	7/1/2021	12/31/2382
85652	SEDIMENTATION RATE, ERYTHROCYTE; AUTOMATED	L1	\$4.25	7/1/2021	12/31/2382
85660	SICKLING OF RBC, REDUCTION, SLIDE METHOD		\$7.54	7/1/2021	12/31/2382
85660	SICKLING OF RBC, REDUCTION, SLIDE METHOD	L1	\$7.54	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
85665	STREPTOKINASE TITER (PLASMINOGEN ACTIVATOR)		\$29.75	7/1/2021	12/31/2382
85670	THROMBIN TIME; PLASMA		\$9.08	7/1/2021	12/31/2382
85670	THROMBIN TIME; PLASMA	L1	\$9.08	7/1/2021	12/31/2382
85675	THROMBIN TIME; TITER		\$10.79	7/1/2021	12/31/2382
85675	THROMBIN TIME; TITER	L1	\$10.79	7/1/2021	12/31/2382
85700	THROMBOPLASTIN GENERATION TEST; SCREENING (HICKS-PITNEY)		\$14.78	7/1/2021	12/31/2382
85705	THROMBOPLASTIN INHIBITION; TISSUE		\$15.14	7/1/2021	12/31/2382
85705	THROMBOPLASTIN INHIBITION; TISSUE	L1	\$15.14	7/1/2021	12/31/2382
85710	THROMBOPLASTIN GENERATION TEST; DEFINITIVE, WITH PLATELET SUBSTITUTE		\$17.72	7/1/2021	12/31/2382
85711	THROMBOPLASTIN GENERATION TEST; WITH PATIENT'S PLATELETS		\$17.72	7/1/2021	12/31/2382
85730	THROMBOPLASTIN TIME, PARTIAL (PTT); PLASMA OR WHOLE BLOOD		\$9.43	7/1/2021	12/31/2382
85730	THROMBOPLASTIN TIME, PARTIAL (PTT); PLASMA OR WHOLE BLOOD	59	\$9.43	7/1/2021	12/31/2382
85730	THROMBOPLASTIN TIME, PARTIAL (PTT); PLASMA OR WHOLE BLOOD	91	\$9.43	7/1/2021	12/31/2382
85730	THROMBOPLASTIN TIME, PARTIAL (PTT); PLASMA OR WHOLE BLOOD	GA	\$9.43	7/1/2021	12/31/2382
85730	THROMBOPLASTIN TIME, PARTIAL (PTT); PLASMA OR WHOLE BLOOD	GZ	\$9.43	7/1/2021	12/31/2382
85730	THROMBOPLASTIN TIME, PARTIAL (PTT); PLASMA OR WHOLE BLOOD	L1	\$9.43	7/1/2021	12/31/2382
85730	THROMBOPLASTIN TIME, PARTIAL (PTT); PLASMA OR WHOLE BLOOD	QJ	\$9.43	7/1/2021	12/31/2382
85730	THROMBOPLASTIN TIME, PARTIAL (PTT); PLASMA OR WHOLE BLOOD	XU	\$9.43	7/1/2021	12/31/2382
85732	THROMBOPLASTIN TIME, PARTIAL (PTT); SUBSTITUTION, PLASMA		\$10.18	7/1/2021	12/31/2382
85732	THROMBOPLASTIN TIME, PARTIAL (PTT); SUBSTITUTION, PLASMA	L1	\$10.18	7/1/2021	12/31/2382
85810	VISCOSITY; BLOOD		\$18.39	7/1/2021	12/31/2382
85810	VISCOSITY; BLOOD	L1	\$18.39	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
85820	VISCOSITY; SERUM OR PLASMA		\$19.82	7/1/2021	12/31/2382
85999	UNLISTED HEMATOLOGY PROCEDURE		\$0.00	7/1/2021	12/31/2382
85999	UNLISTED HEMATOLOGY PROCEDURE	L1	\$0.00	7/1/2021	12/31/2382
86000	AGGLUTININS, FEBRILE (EG, BRUCELLA, FRANCISELLA, MURINE TYPHUS, Q FEVER, ROCKY MOUNTAIN SPOTTED FEVER, SCRUB T		\$10.98	7/1/2021	12/31/2382
86000	AGGLUTININS, FEBRILE (EG, BRUCELLA, FRANCISELLA, MURINE TYPHUS, Q FEVER, ROCKY MOUNTAIN SPOTTED FEVER, SCRUB T	L1	\$10.98	7/1/2021	12/31/2382
86001	ALLERGEN SPECIFIC IGG QUANTITATIVE OR SEMIQUANTITAVE, EACH ALLERGEN		\$8.22	7/1/2021	12/31/2382
86001	ALLERGEN SPECIFIC IGG QUANTITATIVE OR SEMIQUANTITAVE, EACH ALLERGEN	L1	\$8.22	7/1/2021	12/31/2382
86002	AGGLUTININS; FEBRILE PANEL (TYPHOID O & H, PARATYPHOID A & B, BRUCELLA AND PROTEUS OX-19)		\$10.63	7/1/2021	12/31/2382
86003	ALLERGEN SPECIFIC IGE; QUANTITATIVE OR SEMIQUANTITATIVE, EACH ALLERGEN		\$8.22	7/1/2021	12/31/2382
86003	ALLERGEN SPECIFIC IGE; QUANTITATIVE OR SEMIQUANTITATIVE, EACH ALLERGEN	59	\$8.22	7/1/2021	12/31/2382
86003	ALLERGEN SPECIFIC IGE; QUANTITATIVE OR SEMIQUANTITATIVE, EACH ALLERGEN	91	\$8.22	7/1/2021	12/31/2382
86003	ALLERGEN SPECIFIC IGE; QUANTITATIVE OR SEMIQUANTITATIVE, EACH ALLERGEN	L1	\$8.22	7/1/2021	12/31/2382
86003	ALLERGEN SPECIFIC IGE; QUANTITATIVE OR SEMIQUANTITATIVE, EACH ALLERGEN	XU	\$8.22	7/1/2021	12/31/2382
86004	AGGLUTININS; WARM		\$10.49	7/1/2021	12/31/2382
86005	ALLERGEN SPECIFICIGE; QUALITATIVE, MULTIALLERGEN SCREEN (DIPSTICK, PADDLE OR DISK)		\$11.83	7/1/2021	12/31/2382
86005	ALLERGEN SPECIFICIGE; QUALITATIVE, MULTIALLERGEN SCREEN (DIPSTICK, PADDLE OR DISK)	L1	\$11.83	7/1/2021	12/31/2382
86006	ANTIBODY, NON-RBC, QUALITATIVE; FIRST ANTIGEN, SLIDE OR TUBE		\$9.27	7/1/2021	12/31/2382
86007	ANTIBODY, NON-RBC, QUALITATIVE; EACH ADDITIONAL ANTIGEN		\$5.39	7/1/2021	12/31/2382
86008	ALLERGEN SPECIFIC IGE; QUANTITATIVE OR SEMIQUANTITATIVE, RECOMBINANT OR PURIFIED COMPONENT, EACH		\$12.62	7/1/2021	12/31/2382
86009	ANTIBODY, NON-RBC, QUANTITATIVE; EACH ADDITIONAL ANTIGEN		\$7.49	7/1/2021	12/31/2382
86011	ANTIBODY, DETECTION, LEUKOCYTE ANTIBODY		\$25.24	7/1/2021	12/31/2382
86014	ANTIBODY, PLATELET ANTIBODIES (AGGLUTININS)		\$22.26	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
86015	ACTIN (SMOOTH MUSCLE) ANTIBODY (ASMA), EACH		\$11.53	1/1/2022	12/31/2382
86021	ANTIBODY IDENTIFICATION; LEUKOCYTE ANTIBODIES		\$23.69	7/1/2021	12/31/2382
86021	ANTIBODY IDENTIFICATION; LEUKOCYTE ANTIBODIES	59	\$23.69	7/1/2021	12/31/2382
86021	ANTIBODY IDENTIFICATION; LEUKOCYTE ANTIBODIES	91	\$23.69	7/1/2021	12/31/2382
86022	ANTIBODY IDENTIFICATION; PLATELET ANTIBODIES		\$28.91	7/1/2021	12/31/2382
86022	ANTIBODY IDENTIFICATION; PLATELET ANTIBODIES	L1	\$28.91	7/1/2021	12/31/2382
86023	ANTIBODY IDENTIFICATION; PLATELET ASSOCIATED IMMUNOGLOBULIN ASSAY		\$18.31	7/1/2021	12/31/2382
86023	ANTIBODY IDENTIFICATION; PLATELET ASSOCIATED IMMUNOGLOBULIN ASSAY	L1	\$18.31	7/1/2021	12/31/2382
86031	ANTI HUMAN GLOBULIN TEST; DIRECT (COOMBS) (BROAD, IGG AND NON-IGG), EACH		\$9.27	7/1/2021	12/31/2382
86032	ANTI HUMAN GLOBULIN TEST; INDIRECT, QUALITATIVE (BROAD, GAMMA OR NONGAMMA), EACH		\$9.87	7/1/2021	12/31/2382
86033	ANTI HUMAN GLOBULIN TEST; INDIRECT, TITER (BROAD, GAMMA OR NONGAMMA), EACH		\$8.94	7/1/2021	12/31/2382
86036	ANTINEUTROPHIL CYTOPLASMIC ANTIBODY (ANCA); SCREEN, EACH ANTIBODY		\$12.05	1/1/2022	12/31/2382
86037	ANTINEUTROPHIL CYTOPLASMIC ANTIBODY (ANCA); TITER, EACH ANTIBODY		\$12.05	1/1/2022	12/31/2382
86038	ANTINUCLEAR ANTIBODIES (ANA);		\$19.03	7/1/2021	12/31/2382
86038	ANTINUCLEAR ANTIBODIES (ANA);	L1	\$19.03	7/1/2021	12/31/2382
86038	ANTINUCLEAR ANTIBODIES (ANA);	PO	\$19.03	7/1/2021	12/31/2382
86039	ANTINUCLEAR ANTIBODIES (ANA); TITER	L1	\$17.56	7/1/2021	12/31/2382
86051	AQUAPORIN-4 (NEUROMYELITIS OPTICA [NMO]) ANTIBODY; ENZYME-LINKED IMMUNOSORBENT IMMUNOASSAY (ELISA)		\$11.53	1/1/2022	12/31/2382
86052	AQUAPORIN-4 (NEUROMYELITIS OPTICA [NMO]) ANTIBODY; CELL-BASED IMMUNOFLUORESCENCE ASSAY (CBA), EACH		\$12.05	1/1/2022	12/31/2382
86060	ANTISTREPTOLYSIN O; TITER	L1	\$11.48	7/1/2021	12/31/2382
86063	ANTISTREPTOLYSIN O; SCREEN	LT	\$9.08	7/1/2021	12/31/2382
86064	B CELLS, TOTAL COUNT		\$30.04	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
86066	ANTITRYPSIN, ALPHA-1; PI (PROTEASE INHIBITOR) TYPING		\$22.11	7/1/2021	12/31/2382
86067	ANTITRYPSIN, ALPHA-1; OTHER METHOD (SPECIFY)		\$22.11	7/1/2021	12/31/2382
86078	BLOOD BANK PHYSICIAN SERVICES; INVESTIGATION OF TRANSFUSION REACTION INCLUDING SUSPICION OF TRANSMISSIBLE DISE		\$46.55	7/1/2021	12/31/2382
86079	BLOOD BANK PHYSICIAN SERVICES; AUTHORIZATION FOR DEVIATION FROM STANDARD BLOOD BANKING PROCEDURES (EG, USE OF		\$25.24	7/1/2021	12/31/2382
86080	BLOOD TYPING; ABO ONLY		\$7.33	7/1/2021	12/31/2382
86082	BLOOD TYPING; ABO AND RHO(D)		\$9.28	7/1/2021	12/31/2382
86083	BLOOD TYPING; ABO, RH(D) AND RBC ANTIBODY SCREENING		\$6.08	7/1/2021	12/31/2382
86084	BLOOD TYPING; ANTIGEN SCREENING FOR COMPATIBLE BLOOD UNIT USING REAGENT SERUM, PER UNIT SCREENED		\$15.18	7/1/2021	12/31/2382
86085	BLOOD TYPING; ANTIGEN SCREENING FOR COMPATIBLE UNIT USING PATIENT'S SERUM, PER UNIT SCREENED		\$15.18	7/1/2021	12/31/2382
86095	BLOOD TYPING; RBC ANTIGENS, OTHER THAN ABO, AND/OR RHO(D)		\$6.59	7/1/2021	12/31/2382
86105	BLOOD TYPING; RH GENOTYPING, COMPLETE		\$12.22	7/1/2021	12/31/2382
86115	BLOOD TYPING; ANTI-RH IMMUNOGLOBULIN TESTING (RHOGAM TYPE)		\$22.67	7/1/2021	12/31/2382
86140	C-REACTIVE PROTEIN	L1	\$8.14	7/1/2021	12/31/2382
86140	C-REACTIVE PROTEIN	PO	\$7.40	7/1/2021	12/31/2382
86141	C-REACTIVE PROTEIN; HIGH SENSITIVITY (HSCR)	91	\$20.37	7/1/2021	12/31/2382
86141	C-REACTIVE PROTEIN; HIGH SENSITIVITY (HSCR)	CR	\$19.01	7/1/2021	12/31/2382
86141	C-REACTIVE PROTEIN; HIGH SENSITIVITY (HSCR)	L1	\$20.37	7/1/2021	12/31/2382
86146	BETA 2 GLYCOPROTEIN I ANTIBODY, EACH	59	\$40.03	7/1/2021	12/31/2382
86146	BETA 2 GLYCOPROTEIN I ANTIBODY, EACH	91	\$40.03	7/1/2021	12/31/2382
86146	BETA 2 GLYCOPROTEIN I ANTIBODY, EACH	L1	\$40.03	7/1/2021	12/31/2382
86146	BETA 2 GLYCOPROTEIN I ANTIBODY, EACH	XU	\$40.03	7/1/2021	12/31/2382
86147	CARDIOLIPIN (PHOSPHOLIPID) ANTIBODY	59	\$40.03	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
86147	CARDIOLIPIN (PHOSPHOLIPID) ANTIBODY	91	\$40.03	7/1/2021	12/31/2382
86147	CARDIOLIPIN (PHOSPHOLIPID) ANTIBODY	L1	\$40.03	7/1/2021	12/31/2382
86147	CARDIOLIPIN (PHOSPHOLIPID) ANTIBODY	XU	\$40.03	7/1/2021	12/31/2382
86148	ANTI-PHOSPHATIDYLSERINE (PHOSPHOLIPID)_ANTIBODY	L1	\$25.28	7/1/2021	12/31/2382
86149	CARCINOEMBRYONIC ANTIGEN (CEA); GEL DIFFUSION		\$32.72	7/1/2021	12/31/2382
86151	CARCINOEMBRYONIC ANTIGEN (CEA); RIA OR EIA		\$32.75	7/1/2021	12/31/2382
86155	CHEMOTAXIS ASSAY, SPECIFY METHOD	L1	\$25.15	7/1/2021	12/31/2382
86156	COLD AGGLUTININ; SCREEN	L1	\$10.54	7/1/2021	12/31/2382
86157	COLD AGGLUTININ; TITER	L1	\$12.69	7/1/2021	12/31/2382
86158	COMPLEMENT; C'1 ESTERASE		\$24.51	7/1/2021	12/31/2382
86159	COMPLEMENT; C'2 ESTERASE		\$25.35	7/1/2021	12/31/2382
86160	COMPLEMENT; ANTIGEN, EACH COMPONENT	59	\$18.90	7/1/2021	12/31/2382
86160	COMPLEMENT; ANTIGEN, EACH COMPONENT	91	\$18.90	7/1/2021	12/31/2382
86160	COMPLEMENT; ANTIGEN, EACH COMPONENT	L1	\$18.90	7/1/2021	12/31/2382
86161	COMPLEMENT; FUNCTIONAL ACTIVITY, EACH COMPONENT	L1	\$18.90	7/1/2021	12/31/2382
86162	COMPLEMENT; TOTAL HEMOLYTIC (CH50)	L1	\$31.97	7/1/2021	12/31/2382
86163	COMPLEMENT; C'3 ESTERASE		\$17.72	7/1/2021	12/31/2382
86164	COMPLEMENT; C'4 ESTERASE		\$22.15	7/1/2021	12/31/2382
86171	COMPLEMENT FIXATION TESTS, EACH ANTIGEN	L1	\$15.77	7/1/2021	12/31/2382
86185	COUNTERIMMUNOELECTROPHORESIS, EACH ANTIGEN	L1	\$14.08	7/1/2021	12/31/2382
86200	CYCLIC CITRULLINATED PEPTIDE (CCP), ANTIBODY		\$20.37	7/1/2021	12/31/2382
86200	CYCLIC CITRULLINATED PEPTIDE (CCP), ANTIBODY	L1	\$20.37	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
86200	CYCLIC CITRULLINATED PEPTIDE (CCP), ANTIBODY	QW	\$20.37	7/1/2021	12/31/2382
86215	DEOXYRIBONUCLEASE, ANTIBODY	L1	\$20.85	7/1/2021	12/31/2382
86225	DEOXYRIBONUCLEIC ACID (DNA) ANTIBODY; NATIVE OR DOUBLE STRANDED	L1	\$21.63	7/1/2021	12/31/2382
86226	DEOXYRIBONUCLEIC ACID (DNA) ANTIBODY; SINGLE STRANDED	L1	\$10.81	7/1/2021	12/31/2382
86231	ENDOMYSIAL ANTIBODY (EMA), EACH IMMUNOGLOBULIN (IG) CLASS		\$12.09	1/1/2022	12/31/2382
86235	EXTRACTABLE NUCLEAR ANTIGEN, ANTIBODY TO, ANY METHOD (EG, NRNP, SS-A, SS-B, SM, RNP, SC170, J01), EACH ANTIBOD		\$11.00	7/1/2021	12/31/2382
86235	EXTRACTABLE NUCLEAR ANTIGEN, ANTIBODY TO, ANY METHOD (EG, NRNP, SS-A, SS-B, SM, RNP, SC170, J01), EACH ANTIBOD	59	\$11.00	7/1/2021	12/31/2382
86235	EXTRACTABLE NUCLEAR ANTIGEN, ANTIBODY TO, ANY METHOD (EG, NRNP, SS-A, SS-B, SM, RNP, SC170, J01), EACH ANTIBOD	91	\$11.00	7/1/2021	12/31/2382
86235	EXTRACTABLE NUCLEAR ANTIGEN, ANTIBODY TO, ANY METHOD (EG, NRNP, SS-A, SS-B, SM, RNP, SC170, J01), EACH ANTIBOD	L1	\$11.00	7/1/2021	12/31/2382
86243	FC RECEPTOR	L1	\$15.38	7/1/2021	12/31/2382
86244	FETO-PROTEIN, ALPHA-1, RIA OR EIA		\$13.02	7/1/2021	12/31/2382
86244	FETO-PROTEIN, ALPHA-1, RIA OR EIA	L1	\$13.02	7/1/2021	12/31/2382
86255	FLUORESCENT ANTIBODY; SCREEN, EACH ANTIBODY	26	\$20.43	7/1/2021	12/31/2382
86255	FLUORESCENT ANTIBODY; SCREEN, EACH ANTIBODY	91	\$18.96	7/1/2021	12/31/2382
86255	FLUORESCENT ANTIBODY; SCREEN, EACH ANTIBODY	L1	\$18.96	7/1/2021	12/31/2382
86256	FLUORESCENT ANTIBODY; TITER, EACH ANTIBODY	26	\$20.43	7/1/2021	12/31/2382
86256	FLUORESCENT ANTIBODY; TITER, EACH ANTIBODY	59	\$18.76	7/1/2021	12/31/2382
86256	FLUORESCENT ANTIBODY; TITER, EACH ANTIBODY	91	\$18.76	7/1/2021	12/31/2382
86256	FLUORESCENT ANTIBODY; TITER, EACH ANTIBODY	L1	\$18.76	7/1/2021	12/31/2382
86258	GLIADIN (DEAMIDATED) (DGP) ANTIBODY, EACH IMMUNOGLOBULIN (IG) CLASS		\$11.53	1/1/2022	12/31/2382
86277	GROWTH HORMONE, HUMAN (HGH), ANTIBODY	L1	\$24.76	7/1/2021	12/31/2382
86280	HEMAGGLUTINATION INHIBITION TEST (HAI)	L1	\$12.88	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
86281	HEMOLYSINS, ACID (FOR PAROXYSMAL HEMOGLOBINURIA) (HAM TEST)		\$15.30	7/1/2021	12/31/2382
86282	HEMOLYSINS AND AGGLUTININS, AUTO, SCREEN, EACH;		\$14.12	7/1/2021	12/31/2382
86283	HEMOLYSINS AND AGGLUTININS, AUTO, SCREEN, EACH; INCUBATED WITH GLUCOSE (EG, ATP)		\$21.41	7/1/2021	12/31/2382
86287	HEPATITIS B SURFACE ANTIGEN (HBSAG)		\$16.60	7/1/2021	12/31/2382
86288	HEPATITIS B CORE ANTIGEN (HBCAG), RIA		\$18.81	7/1/2021	12/31/2382
86289	HEPATITIS B CORE ANTIBODY (HBCAB); IGG AND IGM		\$19.38	7/1/2021	12/31/2382
86290	HEPATITIS B CORE ANTIBODY (HBCAB); IGM ANTIBODY		\$18.92	7/1/2021	12/31/2382
86291	HEPATITIS B SURFACE ANTIBODY (HBSAB)		\$17.26	7/1/2021	12/31/2382
86293	HEPATITIS BE ANTIGEN (HBEAG)		\$18.52	7/1/2021	12/31/2382
86294	IMMUNOASSAY FOR TUMOR ANTIGEN, QUALITATIVE OR SEMIQUALITATIVE (EG, BLADDER TUMOR ANTIGEN)	L1	\$24.29	7/1/2021	12/31/2382
86295	HEPATITIS BE ANTIBODY (HBEAB)		\$18.60	7/1/2021	12/31/2382
86296	HEPATITIS A ANTIBODY (HAAB), IGG AND IGM		\$19.92	7/1/2021	12/31/2382
86298	HEPATITIS A ANTIBODY (HAAB) (EG, RIA, EIA); IGG ANTIBODY		\$18.59	7/1/2021	12/31/2382
86299	HEPATITIS A ANTIBODY (HAAB), IGG AND IGM IGM ANTIBODY		\$18.10	7/1/2021	12/31/2382
86300	IMMUNOASSAY FOR TUMOR ANTIGEN, QUANTITATIVE; CA 15-3 (27.29)	59	\$32.74	7/1/2021	12/31/2382
86300	IMMUNOASSAY FOR TUMOR ANTIGEN, QUANTITATIVE; CA 15-3 (27.29)	L1	\$32.74	7/1/2021	12/31/2382
86301	IMMUNOASSAY FOR TUMOR ANTIGEN, QUANTITATIVE; CA 19-9	GZ	\$32.74	7/1/2021	12/31/2382
86301	IMMUNOASSAY FOR TUMOR ANTIGEN, QUANTITATIVE; CA 19-9	L1	\$32.74	7/1/2021	12/31/2382
86301	IMMUNOASSAY FOR TUMOR ANTIGEN, QUANTITATIVE; CA 19-9	PO	\$32.74	7/1/2021	12/31/2382
86301	IMMUNOASSAY FOR TUMOR ANTIGEN, QUANTITATIVE; CA 19-9	QW	\$32.74	7/1/2021	12/31/2382
86302	HEPATITIS C ANTIBODY		\$21.52	7/1/2021	12/31/2382
86303	HEPATITIS C ANTIBODY; CONFIRMATORY TEST (EG, IMMUNOBLOT)		\$24.90	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
86304	IMMUNOASSAY FOR TUMOR ANTIGEN, QUANTITATIVE; CA 125	L1	\$32.74	7/1/2021	12/31/2382
86305	HUMAN EPIDIDYMIS PROTEIN 4 (HE4)		\$33.58	7/1/2021	12/31/2382
86305	HUMAN EPIDIDYMIS PROTEIN 4 (HE4)	L1	\$33.58	7/1/2021	12/31/2382
86306	HEPATITIS, DELTA AGENT		\$21.52	7/1/2021	12/31/2382
86308	HETEROPHILE ANTIBODIES; SCREENING	L1	\$8.05	7/1/2021	12/31/2382
86309	HETEROPHILE ANTIBODIES; TITER	L1	\$10.18	7/1/2021	12/31/2382
86310	HETEROPHILE ANTIBODIES; TITERS AFTER ABSORPTION WITH BEEF CELLS AND GUINEA PIG KIDNEY	L1	\$11.60	7/1/2021	12/31/2382
86312	HIV (HTLV-III) ANTIBODY DETECTION; IMMUNOASSAY		\$15.37	7/1/2021	12/31/2382
86313	IMMUNOASSAY FOR INFECTIOUS AGENT ANTIGEN, QUALITATIVE OR SEMIQUANTITATIVE; MULTIPLE STEP METHOD		\$19.29	7/1/2021	12/31/2382
86314	HIV (HTLV-III) ANTIBODY DETECTION; CONFIRMATORY TEST (EG, WESTERN BLOT)		\$33.47	7/1/2021	12/31/2382
86315	IMMUNOASSAY FOR INFECTIOUS AGENT ANTIGEN, QUALITATIVE OR SEMIQUANTITATIVE; SINGLE STEP METHOD		\$15.42	7/1/2021	12/31/2382
86316	IMMUNOASSAY FOR TUMOR ANTIGEN (EG, CANCER ANTIGEN 125); EACH	L1	\$32.74	7/1/2021	12/31/2382
86317	IMMUNOASSAY FOR INFECTIOUS AGENT ANTIBODY, QUANTITATIVE, NOT ELSEWHERE SPECIFIED	33	\$21.45	7/1/2021	12/31/2382
86317	IMMUNOASSAY FOR INFECTIOUS AGENT ANTIBODY, QUANTITATIVE, NOT ELSEWHERE SPECIFIED	59	\$23.59	7/1/2021	12/31/2382
86317	IMMUNOASSAY FOR INFECTIOUS AGENT ANTIBODY, QUANTITATIVE, NOT ELSEWHERE SPECIFIED	91	\$23.59	7/1/2021	12/31/2382
86317	IMMUNOASSAY FOR INFECTIOUS AGENT ANTIBODY, QUANTITATIVE, NOT ELSEWHERE SPECIFIED	L1	\$23.59	7/1/2021	12/31/2382
86317	IMMUNOASSAY FOR INFECTIOUS AGENT ANTIBODY, QUANTITATIVE, NOT ELSEWHERE SPECIFIED	PO	\$21.45	7/1/2021	12/31/2382
86318	IMMUNOASSAY TO INFECTIOUS AGENT ANTIBODY, QUALITATIVE OR SEMIQUANTITATIVE (EG, REAGENT STRIP)	L1	\$20.15	7/1/2021	12/31/2382
86319	IMMUNOASSAY TECHNIQUE FOR DRUGS		\$18.52	7/1/2021	12/31/2382
86320	IMMUNOELECTROPHORESIS; SERUM	26	\$20.43	7/1/2021	12/31/2382
86320	IMMUNOELECTROPHORESIS; SERUM	L1	\$20.43	7/1/2021	12/31/2382
86325	IMMUNOELECTROPHORESIS; OTHER FLUIDS (EG, URINE, CSF) WITH CONCENTRATION	26	\$20.43	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
86325	IMMUNOELECTROPHORESIS; OTHER FLUIDS (EG, URINE, CSF) WITH CONCENTRATION	L1	\$20.43	7/1/2021	12/31/2382
86327	IMMUNOELECTROPHORESIS; CROSSED (2-DIMENSIONAL ASSAY)	26	\$20.43	7/1/2021	12/31/2382
86327	IMMUNOELECTROPHORESIS; CROSSED (2-DIMENSIONAL ASSAY)	L1	\$20.43	7/1/2021	12/31/2382
86328	METHOD (EG, REAGENT STRIP); SEVERE ACUTE RESPIRATORY SYNDROME CORONAVIRUS 2 (SARS-COV-2) (CORONAVIRUS DISEASE [COVID-19])		\$45.23	4/10/2020	12/31/2382
86329	IMMUNODIFFUSION, NOT ELSEWHERE SPECIFIED	59	\$22.10	7/1/2021	12/31/2382
86329	IMMUNODIFFUSION, NOT ELSEWHERE SPECIFIED	L1	\$22.10	7/1/2021	12/31/2382
86331	IMMUNODIFFUSION, NOT ELSEWHERE SPECIFIED GEL DIFFUSION, QUALITATIVE (OUCHTERLONY), EACH ANTIGEN OR ANTIBODY	L1	\$18.87	7/1/2021	12/31/2382
86332	IMMUNE COMPLEX ASSAY	91	\$38.35	7/1/2021	12/31/2382
86332	IMMUNE COMPLEX ASSAY	L1	\$38.35	7/1/2021	12/31/2382
86333	IMMUNE COMPLEX ASSAY; RAJI CELL		\$103.71	7/1/2021	12/31/2382
86334	IMMUNOFIXATION ELECTROPHORESIS	26	\$20.43	7/1/2021	12/31/2382
86334	IMMUNOFIXATION ELECTROPHORESIS	59	\$35.15	7/1/2021	12/31/2382
86334	IMMUNOFIXATION ELECTROPHORESIS	91	\$35.15	7/1/2021	12/31/2382
86334	IMMUNOFIXATION ELECTROPHORESIS	L1	\$35.15	7/1/2021	12/31/2382
86335	IMMUNOFIXATION ELECTROPHORESIS; OTHER FLUIDS WITH CONCENTRATION (EG, URINE, CSF)		\$46.17	7/1/2021	12/31/2382
86335	IMMUNOFIXATION ELECTROPHORESIS; OTHER FLUIDS WITH CONCENTRATION (EG, URINE, CSF)	L1	\$46.17	7/1/2021	12/31/2382
86336	INHIBIN A	L1	\$21.64	7/1/2021	12/31/2382
86337	INSULIN ANTIBODIES	L1	\$33.69	7/1/2021	12/31/2382
86338	INSULIN FACTOR ANTIBODIES, RIA		\$36.08	7/1/2021	12/31/2382
86340	INTRINSIC FACTOR ANTIBODIES	L1	\$23.73	7/1/2021	12/31/2382
86341	ISLET CELL ANTIBODY	L1	\$31.11	7/1/2021	12/31/2382
86343	LEUKOCYTE HISTAMINE RELEASE TEST (LHR)	L1	\$18.14	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
86344	LEUKOCYTE PHAGOCYTOSIS	L1	\$12.56	7/1/2021	12/31/2382
86349	LEUKOCYTE TRANSFUSION (LEUKAPHERESIS)		\$86.51	7/1/2021	12/31/2382
86352	CELLULAR FUNCTION ASSAY INVOLVING STIMULATION (EG, MITOGEN OR ANTIGEN) AND DETECTION OF BIOMARKERS (EG, ATP)		\$46.57	7/1/2021	12/31/2382
86352	CELLULAR FUNCTION ASSAY INVOLVING STIMULATION (EG, MITOGEN OR ANTIGEN) AND DETECTION OF BIOMARKERS (EG, ATP)	59	\$46.57	7/1/2021	12/31/2382
86352	CELLULAR FUNCTION ASSAY INVOLVING STIMULATION (EG, MITOGEN OR ANTIGEN) AND DETECTION OF BIOMARKERS (EG, ATP)	L1	\$46.57	7/1/2021	12/31/2382
86353	LYMPHOCYTE TRANSFORMATION, MITOGEN (PHYTOMITOGEN) OR ANTIGEN INDUCED BLASTOGENESIS	90	\$21.39	7/1/2021	12/31/2382
86353	LYMPHOCYTE TRANSFORMATION, MITOGEN (PHYTOMITOGEN) OR ANTIGEN INDUCED BLASTOGENESIS	91	\$21.39	7/1/2021	12/31/2382
86353	LYMPHOCYTE TRANSFORMATION, MITOGEN (PHYTOMITOGEN) OR ANTIGEN INDUCED BLASTOGENESIS	L1	\$21.39	7/1/2021	12/31/2382
86355	B CELLS, TOTAL COUNT		\$30.04	7/1/2021	12/31/2382
86355	B CELLS, TOTAL COUNT	59	\$30.04	7/1/2021	12/31/2382
86355	B CELLS, TOTAL COUNT	91	\$30.04	7/1/2021	12/31/2382
86355	B CELLS, TOTAL COUNT	L1	\$30.04	7/1/2021	12/31/2382
86356	MONONUCLEAR CELL ANTIGEN, QUANTITATIVE, NOT OTHERWISE SPECIFIED, EACH ANTIGEN		\$30.04	7/1/2021	12/31/2382
86357	NATURAL KILLER (NK) CELLS, TOTAL COUNT		\$30.04	7/1/2021	12/31/2382
86357	NATURAL KILLER (NK) CELLS, TOTAL COUNT	59	\$30.04	7/1/2021	12/31/2382
86357	NATURAL KILLER (NK) CELLS, TOTAL COUNT	91	\$30.04	7/1/2021	12/31/2382
86357	NATURAL KILLER (NK) CELLS, TOTAL COUNT	L1	\$30.04	7/1/2021	12/31/2382
86358	LYMPHOCYTES; B-CELL EVALUATION		\$44.66	7/1/2021	12/31/2382
86359	T CELLS; TOTAL COUNT	59	\$30.04	7/1/2021	12/31/2382
86359	T CELLS; TOTAL COUNT	L1	\$30.04	7/1/2021	12/31/2382
86359	T CELLS; TOTAL COUNT	XU	\$30.04	7/1/2021	12/31/2382
86360	T CELLS; ABSOLUTE CD4 AND CD8 COUNT, INCLUDING RATIO	59	\$60.11	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
86360	T CELLS; ABSOLUTE CD4 AND CD8 COUNT, INCLUDING RATIO	L1	\$60.11	7/1/2021	12/31/2382
86361	T CELLS; ABSOLUTE CD4 COUNT	L1	\$30.04	7/1/2021	12/31/2382
86362	MYELIN OLIGODENDROCYTE GLYCOPROTEIN (MOG-IGG1) ANTIBODY; CELL-BASED IMMUNOFLUORESCENCE ASSAY (CBA), EACH		\$12.05	1/1/2022	12/31/2382
86363	MYELIN OLIGODENDROCYTE GLYCOPROTEIN (MOG-IGG1) ANTIBODY; FLOW CYTOMETRY (IE, FLUORESCENCE-ACTIVATED CELL SORTING [FACS]), EACH		\$12.05	1/1/2022	12/31/2382
86364	TISSUE TRANSGLUTAMINASE, EACH IMMUNOGLOBULIN (IG) CLASS		\$11.53	1/1/2022	12/31/2382
86367	STEM CELLS (IE, CD34), TOTAL COUNT		\$30.04	7/1/2021	12/31/2382
86367	STEM CELLS (IE, CD34), TOTAL COUNT	59	\$30.04	7/1/2021	12/31/2382
86367	STEM CELLS (IE, CD34), TOTAL COUNT	L1	\$30.04	7/1/2021	12/31/2382
86376	MICROSOMAL ANTIBODIES (EG, THYROID OR LIVER-KIDNEY), EACH	L1	\$22.90	7/1/2021	12/31/2382
86377	MICROSOMAL ANTIBODY (THYROID); OTHER METHOD (SPECIFY)		\$23.45	7/1/2021	12/31/2382
86378	MIGRATION INHIBITORY FACTOR TEST (MIF)	L1	\$30.99	7/1/2021	12/31/2382
86379	NATURAL KILLER (NK) CELLS, TOTAL COUNT		\$30.04	7/1/2021	12/31/2382
86381	MITOCHONDRIAL ANTIBODY (EG, M2), EACH		\$25.45	1/1/2022	12/31/2382
86382	NEUTRALIZATION TEST, VIRAL	90	\$17.00	7/1/2021	12/31/2382
86382	NEUTRALIZATION TEST, VIRAL	91	\$17.00	7/1/2021	12/31/2382
86382	NEUTRALIZATION TEST, VIRAL	L1	\$17.00	7/1/2021	12/31/2382
86384	NITROBLUE TETRAZOLIUM DYE TEST (NTD)	L1	\$17.92	7/1/2021	12/31/2382
86385	PATERNITY TESTING, ABO+RH FACTORS+MN (PER INDIVIDUAL);		\$31.85	7/1/2021	12/31/2382
86386	PATERNITY TESTING, ABO+RH FACTORS+MN (PER INDIVIDUAL); EACH ADDITIONAL ANTIGEN SYSTEM		\$9.05	7/1/2021	12/31/2382
86403	PARTICLE AGGLUTINATION, ANTIBODY OR ANTIGEN, EACH	90	\$16.05	7/1/2021	12/31/2382
86403	PARTICLE AGGLUTINATION, ANTIBODY OR ANTIGEN, EACH	91	\$16.05	7/1/2021	12/31/2382
86403	PARTICLE AGGLUTINATION, ANTIBODY OR ANTIGEN, EACH	L1	\$16.05	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
86405	PRECIPITIN TEST FOR BLOOD (SPECIES IDENTIFICATION)		\$18.11	7/1/2021	12/31/2382
86406	PARTICLE AGGLUTINATION; TITER, EACH ANTIBODY	L1	\$16.74	7/1/2021	12/31/2382
86408	NEUTRALIZING ANTIBODY, SEVERE ACUTE RESPIRATORY SYNDROME CORONAVIRUS 2 (SARS-COV-2) (CORONAVIRUS DISEASE [COVID19]); SCREEN		\$42.13	8/10/2020	12/31/2382
86409	NEUTRALIZING ANTIBODY, SEVERE ACUTE RESPIRATORY SYNDROME CORONAVIRUS 2 (SARS-COV-2) (CORONAVIRUS DISEASE [COVID19]); TITER		\$79.61	8/10/2020	12/31/2382
86411	PRETREATMENT OF RBC'S FOR USE IN RBC ANTIBODY DETECTION, IDENTIFICATION, AND/OR COMPATIBILITY TESTING; INCUBAT		\$15.18	7/1/2021	12/31/2382
86413	SEVERE ACUTE RESPIRATORY SYNDROME CORONAVIRUS 2 (SARS-COV-2) (CORONAVIRUS DISEASE [COVID-19]) ANTIBODY, QUANTITATIVE		\$51.43	9/8/2020	12/31/2382
86421	RADIOALLERGOSORBENT TEST, IN VITRO TESTING FOR ALLERGEN-SPECIFIC IGE; UP TO 5 TESTS		\$24.81	7/1/2021	12/31/2382
86421	RADIOALLERGOSORBENT TEST, IN VITRO TESTING FOR ALLERGEN-SPECIFIC IGE; UP TO 5 TESTS	L1	\$24.81	7/1/2021	12/31/2382
86422	RADIOALLERGOSORBENT TEST, IN VITRO TESTING FOR ALLERGEN-SPECIFIC IGE; 6 OR MORE TESTS		\$14.88	7/1/2021	12/31/2382
86422	RADIOALLERGOSORBENT TEST, IN VITRO TESTING FOR ALLERGEN-SPECIFIC IGE; 6 OR MORE TESTS	L1	\$14.88	7/1/2021	12/31/2382
86423	RADIOIMMUNOSORBENT TEST (RIST) IGE, QUANTITATIVE		\$26.13	7/1/2021	12/31/2382
86430	RHEUMATOID FACTOR; QUALITATIVE	L1	\$8.93	7/1/2021	12/31/2382
86430	RHEUMATOID FACTOR; QUALITATIVE	PO	\$8.12	7/1/2021	12/31/2382
86431	RHEUMATOID FACTOR; QUANTITATIVE	L1	\$8.93	7/1/2021	12/31/2382
86480	TUBERCULOSIS TEST, CELL MEDIATED IMMUNITY MEASUREMENT OF GAMMA INTERFERON ANTIGEN RESPONSE		\$48.93	7/1/2021	12/31/2382
86480	TUBERCULOSIS TEST, CELL MEDIATED IMMUNITY MEASUREMENT OF GAMMA INTERFERON ANTIGEN RESPONSE	L1	\$48.93	7/1/2021	12/31/2382
86481	TUBERCULOSIS TEST, CELL MEDIATED IMMUNITY ANTIGEN RESPONSE MEASUREMENT; ENUMERATION OF GAMMA INTERFERON		\$49.27	7/1/2021	12/31/2382
86481	TUBERCULOSIS TEST, CELL MEDIATED IMMUNITY ANTIGEN RESPONSE MEASUREMENT; ENUMERATION OF GAMMA INTERFERON	L1	\$49.27	7/1/2021	12/31/2382
86485	SKIN TEST; CANDIDA		\$6.68	7/1/2021	12/31/2382
86485	SKIN TEST; CANDIDA	L1	\$6.68	7/1/2021	12/31/2382
86486	SKIN TEST; UNLISTED ANTIGEN, EACH	L1	\$0.00	7/1/2021	12/31/2382
86490	SKIN TEST; COCCIDIOIDOMYCOSIS		\$10.35	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
86490	SKIN TEST; COCCIDIOIDOMYCOSIS	L1	\$10.35	7/1/2021	12/31/2382
86510	SKIN TEST; HISTOPLASMOSIS		\$11.05	7/1/2021	12/31/2382
86510	SKIN TEST; HISTOPLASMOSIS	L1	\$11.05	7/1/2021	12/31/2382
86580	SKIN TEST; TUBERCULOSIS, INTRADERMAL		\$8.94	7/1/2021	12/31/2382
86580	SKIN TEST; TUBERCULOSIS, INTRADERMAL	L1	\$8.94	7/1/2021	12/31/2382
86585	SKIN TEST; TUBERCULOSIS, TINE TEST		\$6.92	7/1/2021	12/31/2382
86586	SKIN TEST; UNLISTED ANTIGEN, EACH		\$6.68	7/1/2021	12/31/2382
86587	STEM CELLS (IE, CD34), TOTAL COUNT		\$30.04	7/1/2021	12/31/2382
86590	STREPTOKINASE, ANTIBODY	L1	\$17.36	7/1/2021	12/31/2382
86592	SYPHILIS TEST; QUALITATIVE (EG, VDRL, RPR, ART)	L1	\$6.72	7/1/2021	12/31/2382
86593	SYPHILIS TEST; QUANTITATIVE	L1	\$6.93	7/1/2021	12/31/2382
86594	THYROID AUTOANTIBODIES		\$26.00	7/1/2021	12/31/2382
86596	VOLTAGE-GATED CALCIUM CHANNEL ANTIBODY, EACH		\$18.40	1/1/2022	12/31/2382
86600	TOXOPLASMOSIS, DYE TEST		\$25.55	7/1/2021	12/31/2382
86602	ANTIBODY; ACTINOMYCES	L1	\$16.02	7/1/2021	12/31/2382
86603	ANTIBODY; ADENOVIRUS	L1	\$20.24	7/1/2021	12/31/2382
86606	ANTIBODY; ASPIRGILLUS	91	\$23.69	7/1/2021	12/31/2382
86606	ANTIBODY; ASPIRGILLUS	L1	\$23.69	7/1/2021	12/31/2382
86609	ANTIBODY; BACTERIUM, NOT ELSEWHERE SPECIFIED	59	\$20.28	7/1/2021	12/31/2382
86609	ANTIBODY; BACTERIUM, NOT ELSEWHERE SPECIFIED	91	\$20.28	7/1/2021	12/31/2382
86609	ANTIBODY; BACTERIUM, NOT ELSEWHERE SPECIFIED	L1	\$20.28	7/1/2021	12/31/2382
86611	ANTIBODY; BARTONELLA	91	\$16.02	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
86611	ANTIBODY; BARTONELLA	L1	\$16.02	7/1/2021	12/31/2382
86612	ANTIBODY; BLASTOMYCES	L1	\$20.31	7/1/2021	12/31/2382
86615	ANTIBODY; BORDETELLA	91	\$20.76	7/1/2021	12/31/2382
86615	ANTIBODY; BORDETELLA	L1	\$20.76	7/1/2021	12/31/2382
86615	ANTIBODY; BORDETELLA	XU	\$20.76	7/1/2021	12/31/2382
86617	BORRELIA BURGDORFERI (LYME DISEASE)	59	\$24.37	7/1/2021	12/31/2382
86617	BORRELIA BURGDORFERI (LYME DISEASE)	90	\$24.37	7/1/2021	12/31/2382
86617	BORRELIA BURGDORFERI (LYME DISEASE)	91	\$24.37	7/1/2021	12/31/2382
86617	BORRELIA BURGDORFERI (LYME DISEASE)	L1	\$24.37	7/1/2021	12/31/2382
86617	BORRELIA BURGDORFERI (LYME DISEASE)	PO	\$22.16	7/1/2021	12/31/2382
86617	BORRELIA BURGDORFERI (LYME DISEASE)	XU	\$24.37	7/1/2021	12/31/2382
86618	ANTIBODY; BORELLIA BUFGDORFERI (LYME DISEASE)	59	\$26.16	7/1/2021	12/31/2382
86618	ANTIBODY; BORELLIA BUFGDORFERI (LYME DISEASE)	91	\$26.16	7/1/2021	12/31/2382
86618	ANTIBODY; BORELLIA BUFGDORFERI (LYME DISEASE)	L1	\$26.16	7/1/2021	12/31/2382
86618	ANTIBODY; BORELLIA BUFGDORFERI (LYME DISEASE)	PO	\$23.79	7/1/2021	12/31/2382
86618	ANTIBODY; BORELLIA BUFGDORFERI (LYME DISEASE)	XU	\$26.16	7/1/2021	12/31/2382
86619	ANTIBODY; BORRELIA (RELAPSING FEVER)	L1	\$21.05	7/1/2021	12/31/2382
86622	ANTIBODY; BRUCELLA	59	\$14.06	7/1/2021	12/31/2382
86622	ANTIBODY; BRUCELLA	91	\$14.06	7/1/2021	12/31/2382
86622	ANTIBODY; BRUCELLA	L1	\$14.06	7/1/2021	12/31/2382
86625	ANTIBODY; CAMPYLOBACTER	L1	\$20.64	7/1/2021	12/31/2382
86628	ANTIBODY; CANDIDA	L1	\$10.81	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
86631	ANTIBODY; CHLAMYDIA		\$18.61	7/1/2021	12/31/2382
86631	ANTIBODY; CHLAMYDIA	59	\$18.61	7/1/2021	12/31/2382
86631	ANTIBODY; CHLAMYDIA	91	\$18.61	7/1/2021	12/31/2382
86631	ANTIBODY; CHLAMYDIA	L1	\$18.61	7/1/2021	12/31/2382
86631	ANTIBODY; CHLAMYDIA	XU	\$18.61	7/1/2021	12/31/2382
86632	ANTIBODY; CHLAMYDIA, IGM	L1	\$19.98	7/1/2021	12/31/2382
86632	ANTIBODY; CHLAMYDIA, IGM	XU	\$18.64	7/1/2021	12/31/2382
86635	ANTIBODY; COCCIDIOIDES	L1	\$18.05	7/1/2021	12/31/2382
86638	ANTIBODY; COXIELLA BRUNETII (Q FEVER)	L1	\$19.08	7/1/2021	12/31/2382
86641	ANTIBODY; CRYPTOCOCCUS	L1	\$22.68	7/1/2021	12/31/2382
86644	ANTIBODY; CYTOMEGALOVIRUS (CMV)	L1	\$22.65	7/1/2021	12/31/2382
86645	ANTIBODY; CYTOMEGALOVIRUS (CMV), IGM	91	\$26.51	7/1/2021	12/31/2382
86645	ANTIBODY; CYTOMEGALOVIRUS (CMV), IGM	L1	\$26.51	7/1/2021	12/31/2382
86648	ANTIBODY; DIPHTHERIA	L1	\$23.93	7/1/2021	12/31/2382
86650	TREPONEMA ANTIBODIES, FLUORESCENT, ABSORBED (FTA-ABS)		\$18.59	7/1/2021	12/31/2382
86651	ANTIBODY; ENCEPHALITIS, CALIFORNIA (LA CROSSE)	L1	\$20.76	7/1/2021	12/31/2382
86652	ANTIBODY; ENCEPHALITIS, EASTERN EQUINE	91	\$20.76	7/1/2021	12/31/2382
86652	ANTIBODY; ENCEPHALITIS, EASTERN EQUINE	L1	\$20.76	7/1/2021	12/31/2382
86653	ANTIBODY; ENCEPHALITIS, ST. LOUIS	L1	\$20.76	7/1/2021	12/31/2382
86654	ANTIBODY; ENCEPHALITIS, WESTERN EQUINE	L1	\$20.76	7/1/2021	12/31/2382
86658	ANTIBODY; ENTEROVIRUS (EG, COXSACKIE, ECHO, POLIO)	L1	\$20.50	7/1/2021	12/31/2382
86658	ANTIBODY; ENTEROVIRUS (EG, COXSACKIE, ECHO, POLIO)	XU	\$20.50	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
86662	TREPONEMA PALLIDUM TEST, OTHER, SPECIFY (EG, TPIA, TPA, TPMB, TPCF, RPCF)		\$22.90	7/1/2021	12/31/2382
86663	ANTIBODY; EPSTEIN-BARR (EB) VIRUS, EARLY ANTIGEN (EA)	91	\$20.64	7/1/2021	12/31/2382
86663	ANTIBODY; EPSTEIN-BARR (EB) VIRUS, EARLY ANTIGEN (EA)	L1	\$20.64	7/1/2021	12/31/2382
86664	ANTIBODY; EPSTEIN-BARR (EB) VIRUS, NUCLEAR ANTIGEN (EBNA)	91	\$24.08	7/1/2021	12/31/2382
86664	ANTIBODY; EPSTEIN-BARR (EB) VIRUS, NUCLEAR ANTIGEN (EBNA)	L1	\$24.08	7/1/2021	12/31/2382
86665	ANTIBODY; EPSTEIN-BARR (EB) VIRUS, VIRAL CAPSID (VCA)	59	\$28.56	7/1/2021	12/31/2382
86665	ANTIBODY; EPSTEIN-BARR (EB) VIRUS, VIRAL CAPSID (VCA)	91	\$28.56	7/1/2021	12/31/2382
86665	ANTIBODY; EPSTEIN-BARR (EB) VIRUS, VIRAL CAPSID (VCA)	L1	\$28.56	7/1/2021	12/31/2382
86665	ANTIBODY; EPSTEIN-BARR (EB) VIRUS, VIRAL CAPSID (VCA)	XU	\$28.56	7/1/2021	12/31/2382
86666	ANTIBODY; EHRLICHIA	59	\$16.02	7/1/2021	12/31/2382
86666	ANTIBODY; EHRLICHIA	90	\$16.02	7/1/2021	12/31/2382
86666	ANTIBODY; EHRLICHIA	91	\$16.02	7/1/2021	12/31/2382
86666	ANTIBODY; EHRLICHIA	L1	\$16.02	7/1/2021	12/31/2382
86666	ANTIBODY; EHRLICHIA	XU	\$16.02	7/1/2021	12/31/2382
86668	ANTIBODY; FRANCISELLA TULARENSIS	L1	\$16.37	7/1/2021	12/31/2382
86671	ANTIBODY; FUNGUS, NOT ELSEWHERE SPECIFIED	L1	\$19.36	7/1/2021	12/31/2382
86674	ANTIBODY; GIARDIA LAMBLIA	L1	\$23.15	7/1/2021	12/31/2382
86677	ANTIBODY; HELICOBACTER PYLORI	59	\$22.85	7/1/2021	12/31/2382
86677	ANTIBODY; HELICOBACTER PYLORI	91	\$22.85	7/1/2021	12/31/2382
86677	ANTIBODY; HELICOBACTER PYLORI	L1	\$22.85	7/1/2021	12/31/2382
86681	ADRENAL CORTEX ANTIBODIES, RIA		\$30.98	7/1/2021	12/31/2382
86682	ANTIBODY; HELMINTH, NOT ELSEWHERE SPECIFIED	90	\$20.47	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
86682	ANTIBODY; HELMINTH, NOT ELSEWHERE SPECIFIED	91	\$20.47	7/1/2021	12/31/2382
86682	ANTIBODY; HELMINTH, NOT ELSEWHERE SPECIFIED	L1	\$20.47	7/1/2021	12/31/2382
86684	ANTIBODY; HEMOPHILUS INFLUENZA	L1	\$24.93	7/1/2021	12/31/2382
86685	ANTI-ACHR (ACETYLCHOLINE RECEPTOR) ANTIBODY TITER		\$59.48	7/1/2021	12/31/2382
86687	ANTIBODY; HTLV I	L1	\$13.20	7/1/2021	12/31/2382
86688	ANTIBODY; HTLV-II	L1	\$22.05	7/1/2021	12/31/2382
86689	ANTIBODY; HTLV OR HIV ANTIBODY, CONFIRMATORY TEST (EG, WESTERN BLOT)	L1	\$30.46	7/1/2021	12/31/2382
86692	ANTIBODY; HEPATITIS, DELTA AGENT	L1	\$26.83	7/1/2021	12/31/2382
86694	ANTIBODY; HERPES SIMPLEX, NON-SPECIFIC TYPE TEST	L1	\$2.26	7/1/2021	12/31/2382
86695	ANTIBODY; HERPES SIMPLEX, TYPE I	59	\$20.76	7/1/2021	12/31/2382
86695	ANTIBODY; HERPES SIMPLEX, TYPE I	91	\$20.76	7/1/2021	12/31/2382
86695	ANTIBODY; HERPES SIMPLEX, TYPE I	L1	\$20.76	7/1/2021	12/31/2382
86695	ANTIBODY; HERPES SIMPLEX, TYPE I	XU	\$20.76	7/1/2021	12/31/2382
86696	ANTIBODY; HERPES SIMPLEX, TYPE 2	59	\$30.46	7/1/2021	12/31/2382
86696	ANTIBODY; HERPES SIMPLEX, TYPE 2	91	\$30.46	7/1/2021	12/31/2382
86696	ANTIBODY; HERPES SIMPLEX, TYPE 2	L1	\$30.46	7/1/2021	12/31/2382
86696	ANTIBODY; HERPES SIMPLEX, TYPE 2	XU	\$30.46	7/1/2021	12/31/2382
86698	ANTIBODY; HISTOPLASMA	L1	\$19.67	7/1/2021	12/31/2382
86701	ANTIBODY; HIV-1	92	\$13.98	7/1/2021	12/31/2382
86701	ANTIBODY; HIV-1	GA	\$13.98	7/1/2021	12/31/2382
86701	ANTIBODY; HIV-1	GZ	\$13.98	7/1/2021	12/31/2382
86701	ANTIBODY; HIV-1	L1	\$13.98	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
86701	ANTIBODY; HIV-1	QW	\$13.98	7/1/2021	12/31/2382
86702	ANTIBODY; HIV-2	92	\$16.61	7/1/2021	12/31/2382
86702	ANTIBODY; HIV-2	L1	\$16.61	7/1/2021	12/31/2382
86703	ANTIBODY; HIV-1 AND HIV-2, SINGLE ASSAY	59	\$21.59	7/1/2021	12/31/2382
86703	ANTIBODY; HIV-1 AND HIV-2, SINGLE ASSAY	92	\$21.59	7/1/2021	12/31/2382
86703	ANTIBODY; HIV-1 AND HIV-2, SINGLE ASSAY	GA	\$21.59	7/1/2021	12/31/2382
86703	ANTIBODY; HIV-1 AND HIV-2, SINGLE ASSAY	GZ	\$21.59	7/1/2021	12/31/2382
86703	ANTIBODY; HIV-1 AND HIV-2, SINGLE ASSAY	L1	\$21.59	7/1/2021	12/31/2382
86704	HEPATITIS B CORE ANTIBODY (HBCAB); IGG AND IGM	GZ	\$16.84	1/1/2020	12/31/2382
86704	HEPATITIS B CORE ANTIBODY (HBCAB); IGG AND IGM	L1	\$18.96	7/1/2021	12/31/2382
86705	HEPATITIS B CORE IGM ANTIBODY	59	\$18.51	7/1/2021	12/31/2382
86705	HEPATITIS B CORE IGM ANTIBODY	L1	\$18.51	7/1/2021	12/31/2382
86706	HEPATITIS B SURFACE ANTIBODY (HBSAB)	GZ	\$15.01	1/1/2020	12/31/2382
86706	HEPATITIS B SURFACE ANTIBODY (HBSAB)	L1	\$16.71	7/1/2021	12/31/2382
86708	HEPATITIS A ANTIBODY (HAAB); IGG AND IGM	59	\$19.50	7/1/2021	12/31/2382
86708	HEPATITIS A ANTIBODY (HAAB); IGG AND IGM	L1	\$19.28	7/1/2021	12/31/2382
86709	HEPATITIS A IGM ANTIBODY	59	\$17.72	7/1/2021	12/31/2382
86709	HEPATITIS A IGM ANTIBODY	L1	\$17.72	7/1/2021	12/31/2382
86710	ANTIBODY; INFLUENZA VIRUS	59	\$21.33	7/1/2021	12/31/2382
86710	ANTIBODY; INFLUENZA VIRUS	91	\$21.33	7/1/2021	12/31/2382
86710	ANTIBODY; INFLUENZA VIRUS	L1	\$21.33	7/1/2021	12/31/2382
86713	ANTIBODY; LEGIONELLA	91	\$24.09	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
86713	ANTIBODY; LEGIONELLA	L1	\$24.09	7/1/2021	12/31/2382
86717	ANTIBODY; LEISHMANIA	L1	\$19.28	7/1/2021	12/31/2382
86720	ANTIBODY; LEPTOSPIRA	L1	\$20.76	7/1/2021	12/31/2382
86723	ANTIBODY; LISTERIA MONOCYTOGENES	L1	\$20.76	7/1/2021	12/31/2382
86727	ANTIBODY; LYMPHOCYTIC CHORIOMENINGITIS	L1	\$20.24	7/1/2021	12/31/2382
86729	ANTIBODY; LYMPHOGRANULOMA VENEREUM	L1	\$18.80	7/1/2021	12/31/2382
86732	ANTIBODY; MUCORMYCOSIS	L1	\$20.76	7/1/2021	12/31/2382
86735	ANTIBODY; MUMPS	91	\$20.53	7/1/2021	12/31/2382
86735	ANTIBODY; MUMPS	L1	\$20.53	7/1/2021	12/31/2382
86735	ANTIBODY; MUMPS	XU	\$20.53	7/1/2021	12/31/2382
86738	ANTIBODY; MYCOPLASMA	91	\$20.85	7/1/2021	12/31/2382
86738	ANTIBODY; MYCOPLASMA	L1	\$20.85	7/1/2021	12/31/2382
86738	ANTIBODY; MYCOPLASMA	XU	\$20.85	7/1/2021	12/31/2382
86741	ANTIBODY; NEISSERIA MENINGITIDIS	L1	\$20.76	7/1/2021	12/31/2382
86744	ANTIBODY; NOCARDIA	L1	\$20.76	7/1/2021	12/31/2382
86747	ANTIBODY; PARVOVIRUS	59	\$23.65	7/1/2021	12/31/2382
86747	ANTIBODY; PARVOVIRUS	L1	\$23.65	7/1/2021	12/31/2382
86747	ANTIBODY; PARVOVIRUS	XU	\$23.65	7/1/2021	12/31/2382
86750	ANTIBODY; PLASMODIUM (MALARIA)	L1	\$20.76	7/1/2021	12/31/2382
86753	ANTIBODY; PROTOZOA, NOT ELSEWHERE SPECIFIED	59	\$19.51	7/1/2021	12/31/2382
86753	ANTIBODY; PROTOZOA, NOT ELSEWHERE SPECIFIED	91	\$19.51	7/1/2021	12/31/2382
86753	ANTIBODY; PROTOZOA, NOT ELSEWHERE SPECIFIED	L1	\$19.51	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
86753	ANTIBODY; PROTOZOA, NOT ELSEWHERE SPECIFIED	XU	\$19.51	7/1/2021	12/31/2382
86756	ANTIBODY; RESPIRATORY SYNCYTIAL VIRUS	L1	\$20.29	7/1/2021	12/31/2382
86757	ANTIBODY; RICKETTSIA	91	\$30.46	7/1/2021	12/31/2382
86757	ANTIBODY; RICKETTSIA	L1	\$30.46	7/1/2021	12/31/2382
86759	ANTIBODY; ROTAVIRUS	L1	\$20.76	7/1/2021	12/31/2382
86762	ANTIBODY; RUBELLA	L1	\$22.65	7/1/2021	12/31/2382
86765	ANTIBODY; RUBEOLA	91	\$20.28	7/1/2021	12/31/2382
86765	ANTIBODY; RUBEOLA	L1	\$20.28	7/1/2021	12/31/2382
86765	ANTIBODY; RUBEOLA	XU	\$20.28	7/1/2021	12/31/2382
86768	ANTIBODY; SALMONELLA	L1	\$20.76	7/1/2021	12/31/2382
86769	ANTIBODY; SEVERE ACUTE RESPIRATORY SYNDROME CORONAVIRUS 2 (SARS-COV-2) (CORONAVIRUS DISEASE [COVID-19])		\$43.14	7/1/2021	12/31/2382
86771	ANTIBODY; SHIGELLA	L1	\$20.76	7/1/2021	12/31/2382
86774	ANTIBODY; TETANUS	L1	\$23.19	7/1/2021	12/31/2382
86777	ANTIBODY; TOXOPLASMA	L1	\$22.65	7/1/2021	12/31/2382
86778	ANTIBODY; TOXOPLASMA, IGM	L1	\$22.65	7/1/2021	12/31/2382
86780	TREPONEMA PALLIDUM		\$21.37	7/1/2021	12/31/2382
86780	TREPONEMA PALLIDUM	91	\$21.37	7/1/2021	12/31/2382
86780	TREPONEMA PALLIDUM	L1	\$21.37	7/1/2021	12/31/2382
86780	TREPONEMA PALLIDUM	XU	\$21.37	7/1/2021	12/31/2382
86784	ANTIBODY; TRICHINELLA	L1	\$19.76	7/1/2021	12/31/2382
86787	ANTIBODY; VARICELLA-ZOSTER	59	\$20.28	7/1/2021	12/31/2382
86787	ANTIBODY; VARICELLA-ZOSTER	91	\$20.28	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
86787	ANTIBODY; VARICELLA-ZOSTER	L1	\$20.28	7/1/2021	12/31/2382
86788	ANTIBODY; WEST NILE VIRUS, IGM		\$26.51	7/1/2021	12/31/2382
86788	ANTIBODY; WEST NILE VIRUS, IGM	L1	\$26.51	7/1/2021	12/31/2382
86789	ANTIBODY; WEST NILE VIRUS		\$22.65	7/1/2021	12/31/2382
86789	ANTIBODY; WEST NILE VIRUS	L1	\$22.65	7/1/2021	12/31/2382
86790	ANTIBODY; VIRUS, NOT ELSEWHERE SPECIFIED	L1	\$20.28	7/1/2021	12/31/2382
86793	ANTIBODY; YERSINIA	L1	\$20.76	7/1/2021	12/31/2382
86793	ANTIBODY; YERSINIA	XU	\$20.76	7/1/2021	12/31/2382
86794	ANTIBODY; ZIKA VIRUS, IGM		\$23.43	7/1/2021	12/31/2382
86800	THYROGLOBULIN ANTIBODY	59	\$24.74	7/1/2021	12/31/2382
86800	THYROGLOBULIN ANTIBODY	91	\$24.74	7/1/2021	12/31/2382
86800	THYROGLOBULIN ANTIBODY	L1	\$24.74	7/1/2021	12/31/2382
86803	HEPATITIS C ANTIBODY	59	\$21.64	7/1/2021	12/31/2382
86803	HEPATITIS C ANTIBODY	L1	\$21.64	7/1/2021	12/31/2382
86804	HEPATITIS C ANTIBODY; CONFIRMATORY TEST (EG, IMUNOBLOT)	L1	\$24.37	7/1/2021	12/31/2382
86805	LYMPHOCYTOTOXICITY ASSAY, VISUAL CROSSMATCH; WITH TITRATION	L1	\$82.28	7/1/2021	12/31/2382
86806	LYMPHOCYTOTOXICITY ASSAY, VISUAL CROSSMATCH; WITHOUT TITRATION	L1	\$74.89	7/1/2021	12/31/2382
86807	SERUM SCREENING FOR CYTOTOXIC PERCENT REACTIVE ANTIBODY (PRA); STANDARD METHOD	L1	\$62.27	7/1/2021	12/31/2382
86808	SERUM SCREENING FOR CYTOTOXIC PERCENT REACTIVE ANTIBODY (PRA); QUICK METHOD	L1	\$46.71	7/1/2021	12/31/2382
86812	HLA TYPING; A, B, OR C (EG, A10, B7, B27), SINGLE ANTIGEN	GZ	\$36.93	7/1/2021	12/31/2382
86812	HLA TYPING; A, B, OR C (EG, A10, B7, B27), SINGLE ANTIGEN	L1	\$40.62	7/1/2021	12/31/2382
86813	HLA TYPING; A, B, OR C, MULTIPLE ANTIGENS	L1	\$55.91	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
86816	HLA TYPING; DR/DQ, SINGLE ANTIGEN	L1	\$43.83	7/1/2021	12/31/2382
86817	HLA TYPING; DR/DQ, MULTIPLE ANTIGENS	L1	\$101.31	7/1/2021	12/31/2382
86821	HLA TYPING; LYMPHOCYTE CULTURE, MIXED (MLC)	L1	\$88.84	7/1/2021	12/31/2382
86822	HLA TYPING; LYMPHOCYTE CULTURE, PRIMED (PLC)	L1	\$57.52	7/1/2021	12/31/2382
86825	HUMAN LEUKOCYTE ANTIGEN (HLA) CROSSMATCH, NON-CYTOXIC (EG, USING FLOW CYTOMETRY); FIRST SERUM SAMPLE OR		\$92.42	7/1/2021	12/31/2382
86825	HUMAN LEUKOCYTE ANTIGEN (HLA) CROSSMATCH, NON-CYTOXIC (EG, USING FLOW CYTOMETRY); FIRST SERUM SAMPLE OR	L1	\$92.42	7/1/2021	12/31/2382
86826	HUMAN LEUKOCYTE ANTIGEN (HLA) CROSSMATCH, NON-CYTOXIC (EG, USING FLOW CYTOMETRY); EACH ADDITIONAL SERUM		\$30.80	7/1/2021	12/31/2382
86826	HUMAN LEUKOCYTE ANTIGEN (HLA) CROSSMATCH, NON-CYTOXIC (EG, USING FLOW CYTOMETRY); EACH ADDITIONAL SERUM	L1	\$30.80	7/1/2021	12/31/2382
86828	ANTIBODY TO HUMAN LEUKOCYTE ANTIGENS, SOLID PHASE ASSAYS; QUALITATIVE ASSESSMENT OF THE PRESENCE		\$61.28	7/1/2021	12/31/2382
86828	ANTIBODY TO HUMAN LEUKOCYTE ANTIGENS, SOLID PHASE ASSAYS; QUALITATIVE ASSESSMENT OF THE PRESENCE	L1	\$61.28	7/1/2021	12/31/2382
86828	ANTIBODY TO HUMAN LEUKOCYTE ANTIGENS, SOLID PHASE ASSAYS; QUALITATIVE ASSESSMENT OF THE PRESENCE	XU	\$61.28	7/1/2021	12/31/2382
86829	ANTIBODY TO HUMAN LEUKOCYTE ANTIGENS, SOLID PHASE ASSAYS; QUALITATIVE ASSESSMENT OF THE PRESENCE		\$45.96	7/1/2021	12/31/2382
86829	ANTIBODY TO HUMAN LEUKOCYTE ANTIGENS, SOLID PHASE ASSAYS; QUALITATIVE ASSESSMENT OF THE PRESENCE	L1	\$45.96	7/1/2021	12/31/2382
86830	ANTIBODY TO HUMAN LEUKOCYTE ANTIGENS, SOLID PHASE ASSAYS; ANTIBODY IDENTIFICATION BY QUALIATIVE PANEL USING		\$125.00	7/1/2021	12/31/2382
86830	ANTIBODY TO HUMAN LEUKOCYTE ANTIGENS, SOLID PHASE ASSAYS; ANTIBODY IDENTIFICATION BY QUALIATIVE PANEL USING	L1	\$125.00	7/1/2021	12/31/2382
86831	ANTIBODY TO HUMAN LEUKOCYTE ANTIGENS, SOLID PHASE ASSAYS; ANTIBODY IDENTIFICATION BY QUALIATIVE PANEL USING		\$107.14	7/1/2021	12/31/2382
86831	ANTIBODY TO HUMAN LEUKOCYTE ANTIGENS, SOLID PHASE ASSAYS; ANTIBODY IDENTIFICATION BY QUALIATIVE PANEL USING	L1	\$107.14	7/1/2021	12/31/2382
86832	ANTIBODY TO HUMAN LEUKOCYTE ANTIGENS, SOLID PHASE ASSAYS; HIGH DEFINITION QUALIATIVE PANEL FOR IDENTIFICATION		\$196.42	7/1/2021	12/31/2382
86832	ANTIBODY TO HUMAN LEUKOCYTE ANTIGENS, SOLID PHASE ASSAYS; HIGH DEFINITION QUALIATIVE PANEL FOR IDENTIFICATION	L1	\$196.42	7/1/2021	12/31/2382
86832	ANTIBODY TO HUMAN LEUKOCYTE ANTIGENS, SOLID PHASE ASSAYS; HIGH DEFINITION QUALIATIVE PANEL FOR IDENTIFICATION	XU	\$196.42	7/1/2021	12/31/2382
86833	ANTIBODY TO HUMAN LEUKOCYTE ANTIGENS, SOLID PHASE ASSAYS; HIGH DEFINITION QUALIATIVE PANEL FOR IDENTIFICATION		\$178.58	7/1/2021	12/31/2382
86833	ANTIBODY TO HUMAN LEUKOCYTE ANTIGENS, SOLID PHASE ASSAYS; HIGH DEFINITION QUALIATIVE PANEL FOR IDENTIFICATION	L1	\$178.58	7/1/2021	12/31/2382

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86834	ANTIBODY TO HUMAN LEUKOCYTE ANTIGENS, SOLID PHASE ASSAYS; SEMI QUANTITATIVE PANEL, HLA CLASS I		\$553.55	7/1/2021	12/31/2382
86834	ANTIBODY TO HUMAN LEUKOCYTE ANTIGENS, SOLID PHASE ASSAYS; SEMI QUANTITATIVE PANEL, HLA CLASS I	L1	\$553.55	7/1/2021	12/31/2382
86835	ANTIBODY TO HUMAN LEUKOCYTE ANTIGENS, SOLID PHASE ASSAYS; SEMI QUANTITATIVE PANEL, HLA CLASS II		\$499.98	7/1/2021	12/31/2382
86835	ANTIBODY TO HUMAN LEUKOCYTE ANTIGENS, SOLID PHASE ASSAYS; SEMI QUANTITATIVE PANEL, HLA CLASS II	L1	\$499.98	7/1/2021	12/31/2382
86849	UNLISTED IMMUNOLOGY PROCEDURE		\$25.97	7/1/2021	12/31/2382
86849	UNLISTED IMMUNOLOGY PROCEDURE	L1	\$25.97	7/1/2021	12/31/2382
86850	ANTIBODY SCREEN, RBC, EACH SERUM TECHNIQUE	91	\$5.45	7/1/2021	12/31/2382
86850	ANTIBODY SCREEN, RBC, EACH SERUM TECHNIQUE	L1	\$5.45	7/1/2021	12/31/2382
86850	ANTIBODY SCREEN, RBC, EACH SERUM TECHNIQUE	Q6	\$4.84	1/1/2020	12/31/2382
86850	ANTIBODY SCREEN, RBC, EACH SERUM TECHNIQUE	QJ	\$5.45	7/1/2021	12/31/2382
86860	ANTIBODY ELUTION (RBC), EACH ELUTION	L1	\$45.96	7/1/2021	12/31/2382
86870	ANTIBODY IDENTIFICATION, RBC ANTIBODIES, EACH PANEL FOR EACH SERUM TECHNIQUE	91	\$13.97	7/1/2021	12/31/2382
86870	ANTIBODY IDENTIFICATION, RBC ANTIBODIES, EACH PANEL FOR EACH SERUM TECHNIQUE	L1	\$13.97	7/1/2021	12/31/2382
86880	ANTIHUMAN GLOBULIN TEST (COOMBS TEST); DIRECT, EACH ANTISERUM	59	\$8.45	7/1/2021	12/31/2382
86880	ANTIHUMAN GLOBULIN TEST (COOMBS TEST); DIRECT, EACH ANTISERUM	91	\$8.45	7/1/2021	12/31/2382
86885	ANTIHUMAN GLOBULIN TEST (COOMBS TEST); INDIRECT, QUALITATIVE, EACH ANTISERUM	L1	\$9.00	7/1/2021	12/31/2382
86886	ANTIHUMAN GLOBULIN TEST (COOMBS TEST); INDIRECT, TITER, EACH ANTISERUM	L1	\$8.14	7/1/2021	12/31/2382
86900	BLOOD TYPING; ABO	59	\$4.70	7/1/2021	12/31/2382
86900	BLOOD TYPING; ABO	91	\$4.70	7/1/2021	12/31/2382
86900	BLOOD TYPING; ABO	L1	\$4.70	7/1/2021	12/31/2382
86900	BLOOD TYPING; ABO	Q6	\$4.17	1/1/2020	12/31/2382
86900	BLOOD TYPING; ABO	QJ	\$4.70	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
86901	BLOOD TYPING; RH (D)		\$4.70	7/1/2021	12/31/2382
86901	BLOOD TYPING; RH (D)	59	\$4.66	7/1/2021	12/31/2382
86901	BLOOD TYPING; RH (D)	91	\$4.66	7/1/2021	12/31/2382
86901	BLOOD TYPING; RH (D)	L1	\$4.66	7/1/2021	12/31/2382
86901	BLOOD TYPING; RH (D)	Q6	\$4.70	7/1/2021	12/31/2382
86901	BLOOD TYPING; RH (D)	QJ	\$4.70	7/1/2021	12/31/2382
86902	BLOOD TYPING; ANTIGEN TESTING OF DONOR BLOOD USING REAGENT SERUM, EACH ANTIGEN		\$6.06	7/1/2021	12/31/2382
86902	BLOOD TYPING; ANTIGEN TESTING OF DONOR BLOOD USING REAGENT SERUM, EACH ANTIGEN	L1	\$6.06	7/1/2021	12/31/2382
86903	BLOOD TYPING; ANTIGEN SCREENING FOR COMPATIBLE BLOOD UNIT USING REAGENT SERUM, PER UNIT SCREENED	59	\$14.86	7/1/2021	12/31/2382
86903	BLOOD TYPING; ANTIGEN SCREENING FOR COMPATIBLE BLOOD UNIT USING REAGENT SERUM, PER UNIT SCREENED	91	\$14.86	7/1/2021	12/31/2382
86903	BLOOD TYPING; ANTIGEN SCREENING FOR COMPATIBLE BLOOD UNIT USING REAGENT SERUM, PER UNIT SCREENED	L1	\$14.86	7/1/2021	12/31/2382
86904	BLOOD TYPING; ANTIGEN SCREENING FOR COMPATIBLE UNIT USING PATIENT SERUM, PER UNIT SCREENED	L1	\$14.96	7/1/2021	12/31/2382
86905	BLOOD TYPING; RBC ANTIGENS, OTHER THAN ABO OR RH (D), EACH	59	\$6.01	7/1/2021	12/31/2382
86905	BLOOD TYPING; RBC ANTIGENS, OTHER THAN ABO OR RH (D), EACH	91	\$6.01	7/1/2021	12/31/2382
86905	BLOOD TYPING; RBC ANTIGENS, OTHER THAN ABO OR RH (D), EACH	L1	\$6.01	7/1/2021	12/31/2382
86906	BLOOD TYPING; RH PHENOTYPING, COMPLETE	L1	\$12.20	7/1/2021	12/31/2382
86910	BLOOD TYPING; TYPING FOR PATERNITY TESTING, ABO, RH AND MN, PER INDIVIDUAL TYPING FOR PATERNITY TESTING, EACH		\$29.60	7/1/2021	12/31/2382
86910	BLOOD TYPING; TYPING FOR PATERNITY TESTING, ABO, RH AND MN, PER INDIVIDUAL TYPING FOR PATERNITY TESTING, EACH	L1	\$29.60	7/1/2021	12/31/2382
86911	BLOOD TYPING, FOR PATERNITY TESTING, PER INDIVIDUAL, ABO, RH AND MN; EACH ADDITIONAL ANTIGEN SYSTEM		\$8.42	7/1/2021	12/31/2382
86911	BLOOD TYPING, FOR PATERNITY TESTING, PER INDIVIDUAL, ABO, RH AND MN; EACH ADDITIONAL ANTIGEN SYSTEM	L1	\$8.42	7/1/2021	12/31/2382
86920	COMPATIBILITY TEST EACH UNIT; IMMEDIATE SPIN TECHNIQUE	59	\$12.63	7/1/2021	12/31/2382
86920	COMPATIBILITY TEST EACH UNIT; IMMEDIATE SPIN TECHNIQUE	91	\$12.63	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
86920	COMPATIBILITY TEST EACH UNIT; IMMEDIATE SPIN TECHNIQUE	L1	\$12.63	7/1/2021	12/31/2382
86921	COMPATIBILITY TEST EACH UNIT; INCUBATION TECHNIQUE	59	\$39.42	7/1/2021	12/31/2382
86921	COMPATIBILITY TEST EACH UNIT; INCUBATION TECHNIQUE	91	\$39.42	7/1/2021	12/31/2382
86921	COMPATIBILITY TEST EACH UNIT; INCUBATION TECHNIQUE	L1	\$39.42	7/1/2021	12/31/2382
86922	COMPATIBILITY TEST EACH UNIT; ANTIGLOBULIN TECHNIQUE	59	\$45.05	7/1/2021	12/31/2382
86922	COMPATIBILITY TEST EACH UNIT; ANTIGLOBULIN TECHNIQUE	91	\$45.05	7/1/2021	12/31/2382
86922	COMPATIBILITY TEST EACH UNIT; ANTIGLOBULIN TECHNIQUE	L1	\$45.05	7/1/2021	12/31/2382
86923	COMPATIBILITY TEST EACH UNIT; ELECTRONIC		\$45.05	7/1/2021	12/31/2382
86923	COMPATIBILITY TEST EACH UNIT; ELECTRONIC	L1	\$45.05	7/1/2021	12/31/2382
86923	COMPATIBILITY TEST EACH UNIT; ELECTRONIC	Q6	\$45.05	7/1/2021	12/31/2382
86940	HEMOLYSINS AND AGGLUTININS, AUTO, SCREEN, EACH;	L1	\$12.91	7/1/2021	12/31/2382
86941	HEMOLYSINS AND AGGLUTININS, AUTO, SCREEN, EACH; INCUBATED	L1	\$18.01	7/1/2021	12/31/2382
86999	UNLISTED TRANSFUSION MEDICINE PROCEDURE	L1	\$0.00	7/1/2021	12/31/2382
87001	ANIMAL INOCULATION, SMALL ANIMAL; WITH OBSERVATION	L1	\$18.31	7/1/2021	12/31/2382
87003	ANIMAL INOCULATION, SMALL ANIMAL; WITH OBSERVATION AND DISSECTION	L1	\$18.31	7/1/2021	12/31/2382
87015	CONCENTRATION (ANY TYPE), FOR PARASITES, OVA, OR TUBERCLE BACILLUS (TB, AFB)	59	\$10.51	7/1/2021	12/31/2382
87015	CONCENTRATION (ANY TYPE), FOR PARASITES, OVA, OR TUBERCLE BACILLUS (TB, AFB)	91	\$10.51	7/1/2021	12/31/2382
87015	CONCENTRATION (ANY TYPE), FOR PARASITES, OVA, OR TUBERCLE BACILLUS (TB, AFB)	L1	\$10.51	7/1/2021	12/31/2382
87015	CONCENTRATION (ANY TYPE), FOR PARASITES, OVA, OR TUBERCLE BACILLUS (TB, AFB)	XU	\$10.51	7/1/2021	12/31/2382
87040	CULTURE, BACTERIAL, DEFINITIVE; BLOOD (INCLUDES ANAEROBIC SCREEN)	59	\$16.24	7/1/2021	12/31/2382
87040	CULTURE, BACTERIAL, DEFINITIVE; BLOOD (INCLUDES ANAEROBIC SCREEN)	91	\$16.24	7/1/2021	12/31/2382
87040	CULTURE, BACTERIAL, DEFINITIVE; BLOOD (INCLUDES ANAEROBIC SCREEN)	L1	\$16.24	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
87040	CULTURE, BACTERIAL, DEFINITIVE; BLOOD (INCLUDES ANAEROBIC SCREEN)	QJ	\$16.24	7/1/2021	12/31/2382
87040	CULTURE, BACTERIAL, DEFINITIVE; BLOOD (INCLUDES ANAEROBIC SCREEN)	XU	\$16.24	7/1/2021	12/31/2382
87045	CULTURE, BACTERIAL, DEFINITIVE; STOOL	59	\$13.76	7/1/2021	12/31/2382
87045	CULTURE, BACTERIAL, DEFINITIVE; STOOL	91	\$13.76	7/1/2021	12/31/2382
87045	CULTURE, BACTERIAL, DEFINITIVE; STOOL	L1	\$13.76	7/1/2021	12/31/2382
87046	CULTURE, BACTERIAL; STOOL, ADDITIONAL PATHOGENS, ISOLATION AND PRELIMINARY EXAMINATION, EACH PLATE		\$13.76	7/1/2021	12/31/2382
87046	CULTURE, BACTERIAL; STOOL, ADDITIONAL PATHOGENS, ISOLATION AND PRELIMINARY EXAMINATION, EACH PLATE	59	\$13.76	7/1/2021	12/31/2382
87046	CULTURE, BACTERIAL; STOOL, ADDITIONAL PATHOGENS, ISOLATION AND PRELIMINARY EXAMINATION, EACH PLATE	91	\$13.76	7/1/2021	12/31/2382
87046	CULTURE, BACTERIAL; STOOL, ADDITIONAL PATHOGENS, ISOLATION AND PRELIMINARY EXAMINATION, EACH PLATE	L1	\$13.76	7/1/2021	12/31/2382
87046	CULTURE, BACTERIAL; STOOL, ADDITIONAL PATHOGENS, ISOLATION AND PRELIMINARY EXAMINATION, EACH PLATE	XU	\$13.76	7/1/2021	12/31/2382
87070	CULTURE, BACTERIAL, DEFINITIVE; ANY OTHER SOURCE	50	\$13.56	7/1/2021	12/31/2382
87070	CULTURE, BACTERIAL, DEFINITIVE; ANY OTHER SOURCE	59	\$13.56	7/1/2021	12/31/2382
87070	CULTURE, BACTERIAL, DEFINITIVE; ANY OTHER SOURCE	91	\$13.56	7/1/2021	12/31/2382
87070	CULTURE, BACTERIAL, DEFINITIVE; ANY OTHER SOURCE	L1	\$13.56	7/1/2021	12/31/2382
87070	CULTURE, BACTERIAL, DEFINITIVE; ANY OTHER SOURCE	XS	\$13.56	7/1/2021	12/31/2382
87070	CULTURE, BACTERIAL, DEFINITIVE; ANY OTHER SOURCE	XU	\$13.56	7/1/2021	12/31/2382
87071	CULTURE, BACTERIAL; QUANTITATIVE, AEROBIC WITH ISOLATION AND PRELIMINARY EXAMINATION (EG, CAMPYLOBACTER, YERSI		\$13.76	7/1/2021	12/31/2382
87071	CULTURE, BACTERIAL; QUANTITATIVE, AEROBIC WITH ISOLATION AND PRELIMINARY EXAMINATION (EG, CAMPYLOBACTER, YERSI	L1	\$13.76	7/1/2021	12/31/2382
87073	CULTURE, BACTERIAL; QUANTITATIVE, ANAEROBIC WITH ISOLATION AND PRESUMPTIVE IDENTIFICATION OF ISOLATES, ANY SOU		\$13.76	7/1/2021	12/31/2382
87073	CULTURE, BACTERIAL; QUANTITATIVE, ANAEROBIC WITH ISOLATION AND PRESUMPTIVE IDENTIFICATION OF ISOLATES, ANY SOU	L1	\$13.76	7/1/2021	12/31/2382
87075	CULTURE, BACTERIAL, ANY SOURCE; ANAEROBIC (ISOLATION)	59	\$11.00	7/1/2021	12/31/2382
87075	CULTURE, BACTERIAL, ANY SOURCE; ANAEROBIC (ISOLATION)	91	\$11.23	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
87075	CULTURE, BACTERIAL, ANY SOURCE; ANAEROBIC (ISOLATION)	L1	\$11.00	7/1/2021	12/31/2382
87075	CULTURE, BACTERIAL, ANY SOURCE; ANAEROBIC (ISOLATION)	XU	\$11.00	7/1/2021	12/31/2382
87076	CULTURE, BACTERIAL, ANY SOURCE; DEFINITIVE IDENTIFICATION, EACH ANAEROBIC ORGANISM, INCLUDING GAS CHROMATOGRAP	59	\$9.70	7/1/2021	12/31/2382
87076	CULTURE, BACTERIAL, ANY SOURCE; DEFINITIVE IDENTIFICATION, EACH ANAEROBIC ORGANISM, INCLUDING GAS CHROMATOGRAP	91	\$9.70	7/1/2021	12/31/2382
87076	CULTURE, BACTERIAL, ANY SOURCE; DEFINITIVE IDENTIFICATION, EACH ANAEROBIC ORGANISM, INCLUDING GAS CHROMATOGRAP	L1	\$9.70	7/1/2021	12/31/2382
87077	CULTURE, BACTERIAL; AEROBIC ISOLATE, ADDITIONAL METHODS REQUIRED FOR DEFINITIVE IDENTIFICATION, EACH ISOLATE	59	\$9.80	7/1/2021	12/31/2382
87077	CULTURE, BACTERIAL; AEROBIC ISOLATE, ADDITIONAL METHODS REQUIRED FOR DEFINITIVE IDENTIFICATION, EACH ISOLATE	91	\$9.80	7/1/2021	12/31/2382
87077	CULTURE, BACTERIAL; AEROBIC ISOLATE, ADDITIONAL METHODS REQUIRED FOR DEFINITIVE IDENTIFICATION, EACH ISOLATE	L1	\$9.70	7/1/2021	12/31/2382
87077	CULTURE, BACTERIAL; AEROBIC ISOLATE, ADDITIONAL METHODS REQUIRED FOR DEFINITIVE IDENTIFICATION, EACH ISOLATE	XU	\$8.61	1/1/2020	12/31/2382
87081	CULTURE, BACTERIAL, SCREENING ONLY, FOR SINGLE ORGANISMS	59	\$10.43	7/1/2021	12/31/2382
87081	CULTURE, BACTERIAL, SCREENING ONLY, FOR SINGLE ORGANISMS	91	\$10.43	7/1/2021	12/31/2382
87081	CULTURE, BACTERIAL, SCREENING ONLY, FOR SINGLE ORGANISMS	L1	\$9.80	7/1/2021	12/31/2382
87081	CULTURE, BACTERIAL, SCREENING ONLY, FOR SINGLE ORGANISMS	XS	\$10.43	7/1/2021	12/31/2382
87081	CULTURE, BACTERIAL, SCREENING ONLY, FOR SINGLE ORGANISMS	XU	\$10.43	7/1/2021	12/31/2382
87084	CULTURE, PRESUMPTIVE, PATHOGENIC ORGANISMS, SCREENING ONLY, BY COMMERCIAL KIT (SPECIFY TYPE); WITH COLONY ESTI	L1	\$9.80	7/1/2021	12/31/2382
87086	CULTURE, BACTERIAL, URINE; QUANTITATIVE, COLONY COUNT	59	\$8.19	7/1/2021	12/31/2382
87086	CULTURE, BACTERIAL, URINE; QUANTITATIVE, COLONY COUNT	91	\$8.19	7/1/2021	12/31/2382
87086	CULTURE, BACTERIAL, URINE; QUANTITATIVE, COLONY COUNT	GA	\$8.19	7/1/2021	12/31/2382
87086	CULTURE, BACTERIAL, URINE; QUANTITATIVE, COLONY COUNT	GZ	\$8.19	7/1/2021	12/31/2382
87086	CULTURE, BACTERIAL, URINE; QUANTITATIVE, COLONY COUNT	L1	\$8.19	7/1/2021	12/31/2382
87086	CULTURE, BACTERIAL, URINE; QUANTITATIVE, COLONY COUNT	QJ	\$8.19	7/1/2021	12/31/2382
87086	CULTURE, BACTERIAL, URINE; QUANTITATIVE, COLONY COUNT	XU	\$8.19	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
87088	CULTURE, BACTERIAL, URINE; IDENTIFICATION, IN ADDITION TO QUANTITATIVE OR COMMERCIAL KIT	59	\$12.74	7/1/2021	12/31/2382
87088	CULTURE, BACTERIAL, URINE; IDENTIFICATION, IN ADDITION TO QUANTITATIVE OR COMMERCIAL KIT	91	\$12.74	7/1/2021	12/31/2382
87088	CULTURE, BACTERIAL, URINE; IDENTIFICATION, IN ADDITION TO QUANTITATIVE OR COMMERCIAL KIT	GA	\$12.74	7/1/2021	12/31/2382
87088	CULTURE, BACTERIAL, URINE; IDENTIFICATION, IN ADDITION TO QUANTITATIVE OR COMMERCIAL KIT	L1	\$12.74	7/1/2021	12/31/2382
87088	CULTURE, BACTERIAL, URINE; IDENTIFICATION, IN ADDITION TO QUANTITATIVE OR COMMERCIAL KIT	XS	\$12.74	7/1/2021	12/31/2382
87088	CULTURE, BACTERIAL, URINE; IDENTIFICATION, IN ADDITION TO QUANTITATIVE OR COMMERCIAL KIT	XU	\$12.74	7/1/2021	12/31/2382
87101	CULTURE, FUNGI, ISOLATION (WITH OR WITHOUT PRESUMPTIVE IDENTIFICATION); SKIN	91	\$12.13	7/1/2021	12/31/2382
87101	CULTURE, FUNGI, ISOLATION (WITH OR WITHOUT PRESUMPTIVE IDENTIFICATION); SKIN	L1	\$12.13	7/1/2021	12/31/2382
87102	CULTURE, FUNGI, ISOLATION (WITH OR WITHOUT PRESUMPTIVE IDENTIFICATION); OTHER SOURCE (EXCEPT BLOOD)	59	\$13.23	7/1/2021	12/31/2382
87102	CULTURE, FUNGI, ISOLATION (WITH OR WITHOUT PRESUMPTIVE IDENTIFICATION); OTHER SOURCE (EXCEPT BLOOD)	91	\$13.23	7/1/2021	12/31/2382
87102	CULTURE, FUNGI, ISOLATION (WITH OR WITHOUT PRESUMPTIVE IDENTIFICATION); OTHER SOURCE (EXCEPT BLOOD)	L1	\$13.23	7/1/2021	12/31/2382
87102	CULTURE, FUNGI, ISOLATION (WITH OR WITHOUT PRESUMPTIVE IDENTIFICATION); OTHER SOURCE (EXCEPT BLOOD)	XU	\$11.74	1/1/2020	12/31/2382
87103	CULTURE, FUNGI, ISOLATION (WITH OR WITHOUT PRESUMPTIVE IDENTIFICATION); BLOOD	L1	\$14.19	7/1/2021	12/31/2382
87106	CULTURE, FUNGI, DEFINITIVE IDENTIFICATION OF EACH FUNGUS (USE IN ADDITION TO CODES 87101, 87102, OR 87103 WHEN	91	\$16.24	7/1/2021	12/31/2382
87106	CULTURE, FUNGI, DEFINITIVE IDENTIFICATION OF EACH FUNGUS (USE IN ADDITION TO CODES 87101, 87102, OR 87103 WHEN	L1	\$16.24	7/1/2021	12/31/2382
87107	CULTURE, FUNGI, DEFINITIVE IDENTIFICATION, EACH ORGANISM; MOLD	59	\$16.24	7/1/2021	12/31/2382
87107	CULTURE, FUNGI, DEFINITIVE IDENTIFICATION, EACH ORGANISM; MOLD	91	\$16.24	7/1/2021	12/31/2382
87107	CULTURE, FUNGI, DEFINITIVE IDENTIFICATION, EACH ORGANISM; MOLD	L1	\$16.24	7/1/2021	12/31/2382
87109	CULTURE, MYCOPLASMA, ANY SOURCE	L1	\$13.76	7/1/2021	12/31/2382
87110	CULTURE, CHLAMYDIA	L1	\$30.82	7/1/2021	12/31/2382
87116	CULTURE, TUBERCLE OR OTHER ACID-FAST BACILLI (EG, TB, AFB, MYCOBACTERIA); ANY SOURCE, ISOLATION ONLY	59	\$4.53	7/1/2021	12/31/2382
87116	CULTURE, TUBERCLE OR OTHER ACID-FAST BACILLI (EG, TB, AFB, MYCOBACTERIA); ANY SOURCE, ISOLATION ONLY	91	\$4.53	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
87116	CULTURE, TUBERCLE OR OTHER ACID-FAST BACILLI (EG, TB, AFB, MYCOBACTERIA); ANY SOURCE, ISOLATION ONLY	L1	\$4.53	7/1/2021	12/31/2382
87116	CULTURE, TUBERCLE OR OTHER ACID-FAST BACILLI (EG, TB, AFB, MYCOBACTERIA); ANY SOURCE, ISOLATION ONLY	XU	\$4.02	1/1/2020	12/31/2382
87118	CULTURE, MYCOBACTERIA, DEFINITIVE IDENTIFICATION OF EACH ORGANISM	L1	\$17.22	7/1/2021	12/31/2382
87140	CULTURE, TYPING; FLUORESCENT METHOD, EACH ANTISERUM	91	\$8.78	7/1/2021	12/31/2382
87140	CULTURE, TYPING; FLUORESCENT METHOD, EACH ANTISERUM	L1	\$8.78	7/1/2021	12/31/2382
87143	CULTURE, TYPING; GAS LIQUID CHROMATOGRAPHY (GLC) METHOD	L1	\$18.31	7/1/2021	12/31/2382
87147	CULTURE, TYPING; SEROLOGIC METHOD, AGGLUTINATION GROUPING, PER ANTISERUM	59	\$8.14	7/1/2021	12/31/2382
87147	CULTURE, TYPING; SEROLOGIC METHOD, AGGLUTINATION GROUPING, PER ANTISERUM	91	\$8.14	7/1/2021	12/31/2382
87147	CULTURE, TYPING; SEROLOGIC METHOD, AGGLUTINATION GROUPING, PER ANTISERUM	L1	\$8.14	7/1/2021	12/31/2382
87147	CULTURE, TYPING; SEROLOGIC METHOD, AGGLUTINATION GROUPING, PER ANTISERUM	XU	\$7.23	1/1/2020	12/31/2382
87149	CULTURE, TYPING; IDENTIFICATION BY NUCLEIC ACID PROBE	L1	\$31.56	7/1/2021	12/31/2382
87150	CULTURE, TYPING; IDENTIFICATION BY NUCLEIC ACID (DNA OR RNA) PROBE, AMPLIFIED PROBE TECHNIQUE, PER CULTURE OR		\$56.62	7/1/2021	12/31/2382
87150	CULTURE, TYPING; IDENTIFICATION BY NUCLEIC ACID (DNA OR RNA) PROBE, AMPLIFIED PROBE TECHNIQUE, PER CULTURE OR	91	\$56.62	7/1/2021	12/31/2382
87150	CULTURE, TYPING; IDENTIFICATION BY NUCLEIC ACID (DNA OR RNA) PROBE, AMPLIFIED PROBE TECHNIQUE, PER CULTURE OR	L1	\$56.62	7/1/2021	12/31/2382
87150	CULTURE, TYPING; IDENTIFICATION BY NUCLEIC ACID (DNA OR RNA) PROBE, AMPLIFIED PROBE TECHNIQUE, PER CULTURE OR	XS	\$56.62	7/1/2021	12/31/2382
87150	CULTURE, TYPING; IDENTIFICATION BY NUCLEIC ACID (DNA OR RNA) PROBE, AMPLIFIED PROBE TECHNIQUE, PER CULTURE OR	XU	\$56.62	7/1/2021	12/31/2382
87152	CULTURE, TYPING; IDENTIFICATION BY PULSE FIELD GEL TYPING	L1	\$8.23	7/1/2021	12/31/2382
87153	CULTURE, TYPING; IDENTIFICATION BY NUCLEIC ACID SEQUENCING METHOD, EACH ISOLATE(EG, SEQUENCING OF THE 16S RRNA		\$186.09	7/1/2021	12/31/2382
87153	CULTURE, TYPING; IDENTIFICATION BY NUCLEIC ACID SEQUENCING METHOD, EACH ISOLATE(EG, SEQUENCING OF THE 16S RRNA	L1	\$186.09	7/1/2021	12/31/2382
87158	CULTURE, TYPING; OTHER METHODS	L1	\$8.23	7/1/2021	12/31/2382
87164	DARK FIELD EXAMINATION, ANY SOURCE (EG, PENILE, VAGINAL, ORAL, SKIN); INCLUDES SPECIMEN COLLECTION	26	\$20.43	7/1/2021	12/31/2382
87164	DARK FIELD EXAMINATION, ANY SOURCE (EG, PENILE, VAGINAL, ORAL, SKIN); INCLUDES SPECIMEN COLLECTION	L1	\$20.43	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
87166	DARK FIELD EXAMINATION, ANY SOURCE (EG, PENILE, VAGINAL, ORAL, SKIN); WITHOUT COLLECTION	L1	\$20.43	7/1/2021	12/31/2382
87168	MACROSCOPIC EXAMINATION; ARTHROPOD	L1	\$6.64	7/1/2021	12/31/2382
87169	MACROSCOPIC EXAMINATION; PARASITE	L1	\$6.64	7/1/2021	12/31/2382
87172	PINWORM EXAM (EG, CELLOPHANE TAPE PREP)	L1	\$6.64	7/1/2021	12/31/2382
87176	ENDOTOXIN, BACTERIAL (PYROGENS); HOMOGENIZATION, TISSUE, FOR CULTURE	59	\$9.26	7/1/2021	12/31/2382
87176	ENDOTOXIN, BACTERIAL (PYROGENS); HOMOGENIZATION, TISSUE, FOR CULTURE	91	\$9.26	7/1/2021	12/31/2382
87176	ENDOTOXIN, BACTERIAL (PYROGENS); HOMOGENIZATION, TISSUE, FOR CULTURE	L1	\$9.26	7/1/2021	12/31/2382
87176	ENDOTOXIN, BACTERIAL (PYROGENS); HOMOGENIZATION, TISSUE, FOR CULTURE	XU	\$8.22	1/1/2020	12/31/2382
87177	OVA AND PARASITES, DIRECT SMEARS, CONCENTRATION AND IDENTIFICATION	59	\$10.82	7/1/2021	12/31/2382
87177	OVA AND PARASITES, DIRECT SMEARS, CONCENTRATION AND IDENTIFICATION	91	\$10.82	7/1/2021	12/31/2382
87177	OVA AND PARASITES, DIRECT SMEARS, CONCENTRATION AND IDENTIFICATION	L1	\$10.82	7/1/2021	12/31/2382
87177	OVA AND PARASITES, DIRECT SMEARS, CONCENTRATION AND IDENTIFICATION	XU	\$10.82	7/1/2021	12/31/2382
87178	MICROBIAL IDENTIFICATION, NUCLEIC ACID PROBES, EACH PROBE USED;		\$26.73	7/1/2021	12/31/2382
87179	MICROBIAL IDENTIFICATION, NUCLEIC ACID PROBES, EACH PROBE USED; WITH AMPLIFICATION, EG, POLYMERASE CHAIN REACT		\$26.99	7/1/2021	12/31/2382
87181	SENSITIVITY STUDIES, ANTIBIOTIC; AGAR DIFFUSION METHOD, PER ANTIBIOTIC	91	\$7.49	7/1/2021	12/31/2382
87181	SENSITIVITY STUDIES, ANTIBIOTIC; AGAR DIFFUSION METHOD, PER ANTIBIOTIC	L1	\$7.49	7/1/2021	12/31/2382
87184	SENSITIVITY STUDIES, ANTIBIOTIC; DISK METHOD, PER PLATE (12 OR LESS DISKS)	59	\$10.84	7/1/2021	12/31/2382
87184	SENSITIVITY STUDIES, ANTIBIOTIC; DISK METHOD, PER PLATE (12 OR LESS DISKS)	91	\$10.84	7/1/2021	12/31/2382
87184	SENSITIVITY STUDIES, ANTIBIOTIC; DISK METHOD, PER PLATE (12 OR LESS DISKS)	L1	\$10.84	7/1/2021	12/31/2382
87184	SENSITIVITY STUDIES, ANTIBIOTIC; DISK METHOD, PER PLATE (12 OR LESS DISKS)	XU	\$10.84	7/1/2021	12/31/2382
87185	SUSCEPTIBILITY STUDIES, ANTIMICROBIAL AGENT; ENZYME DETECTION (EG, BETA LACTAMASE), PER ENZYME	59	\$7.49	7/1/2021	12/31/2382
87185	SUSCEPTIBILITY STUDIES, ANTIMICROBIAL AGENT; ENZYME DETECTION (EG, BETA LACTAMASE), PER ENZYME	91	\$7.49	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
87185	SUSCEPTIBILITY STUDIES, ANTIMICROBIAL AGENT; ENZYME DETECTION (EG, BETA LACTAMASE), PER ENZYME	L1	\$7.49	7/1/2021	12/31/2382
87186	SENSITIVITY STUDIES, ANTIBIOTIC; MICROTITER, MINIMUM INHIBITORY CONCENTRATION (MIC), ANY NUMBER OF ANTIBIOTICS	59	\$13.61	7/1/2021	12/31/2382
87186	SENSITIVITY STUDIES, ANTIBIOTIC; MICROTITER, MINIMUM INHIBITORY CONCENTRATION (MIC), ANY NUMBER OF ANTIBIOTICS	91	\$13.61	7/1/2021	12/31/2382
87186	SENSITIVITY STUDIES, ANTIBIOTIC; MICROTITER, MINIMUM INHIBITORY CONCENTRATION (MIC), ANY NUMBER OF ANTIBIOTICS	GA	\$13.61	7/1/2021	12/31/2382
87186	SENSITIVITY STUDIES, ANTIBIOTIC; MICROTITER, MINIMUM INHIBITORY CONCENTRATION (MIC), ANY NUMBER OF ANTIBIOTICS	L1	\$13.61	7/1/2021	12/31/2382
87186	SENSITIVITY STUDIES, ANTIBIOTIC; MICROTITER, MINIMUM INHIBITORY CONCENTRATION (MIC), ANY NUMBER OF ANTIBIOTICS	XU	\$13.61	7/1/2021	12/31/2382
87187	SENSITIVITY STUDIES, ANTIBIOTIC; MINIMUM BACTERICIDAL CONCENTRATION (MBC) (USE IN ADDITION TO 87186 OR 87188)	L1	\$16.30	7/1/2021	12/31/2382
87188	SENSITIVITY STUDIES, ANTIBIOTIC; MACROTUBE DILUTION METHOD, EACH ANTIBIOTIC	L1	\$10.44	7/1/2021	12/31/2382
87190	SENSITIVITY STUDIES, ANTIBIOTIC; TUBERCLE BACILLUS (TB, AFB), EACH DRUG	L1	\$8.90	7/1/2021	12/31/2382
87197	SERUM BACTERICIDAL TITER (SCHLICHTER TEST)	L1	\$23.64	7/1/2021	12/31/2382
87205	SMEAR, PRIMARY SOURCE, WITH INTERPRETATION; ROUTINE STAIN FOR BACTERIA, FUNGI, OR CELL TYPES	59	\$6.72	7/1/2021	12/31/2382
87205	SMEAR, PRIMARY SOURCE, WITH INTERPRETATION; ROUTINE STAIN FOR BACTERIA, FUNGI, OR CELL TYPES	91	\$6.72	7/1/2021	12/31/2382
87205	SMEAR, PRIMARY SOURCE, WITH INTERPRETATION; ROUTINE STAIN FOR BACTERIA, FUNGI, OR CELL TYPES	L1	\$6.72	7/1/2021	12/31/2382
87205	SMEAR, PRIMARY SOURCE, WITH INTERPRETATION; ROUTINE STAIN FOR BACTERIA, FUNGI, OR CELL TYPES	XU	\$6.72	7/1/2021	12/31/2382
87206	SMEAR, PRIMARY SOURCE, WITH INTERPRETATION; FLUORESCENT AND/OR ACID FAST STAIN FOR BACTERIA, FUNGI, OR CELL TY	59	\$8.45	7/1/2021	12/31/2382
87206	SMEAR, PRIMARY SOURCE, WITH INTERPRETATION; FLUORESCENT AND/OR ACID FAST STAIN FOR BACTERIA, FUNGI, OR CELL TY	91	\$8.45	7/1/2021	12/31/2382
87206	SMEAR, PRIMARY SOURCE, WITH INTERPRETATION; FLUORESCENT AND/OR ACID FAST STAIN FOR BACTERIA, FUNGI, OR CELL TY	L1	\$8.45	7/1/2021	12/31/2382
87206	SMEAR, PRIMARY SOURCE, WITH INTERPRETATION; FLUORESCENT AND/OR ACID FAST STAIN FOR BACTERIA, FUNGI, OR CELL TY	XU	\$8.45	7/1/2021	12/31/2382
87207	SMEAR, PRIMARY SOURCE, WITH INTERPRETATION; SPECIAL STAIN FOR INCLUSION BODIES OR INTRACELLULAR PARASITES (EG,	26	\$20.43	7/1/2021	12/31/2382
87207	SMEAR, PRIMARY SOURCE, WITH INTERPRETATION; SPECIAL STAIN FOR INCLUSION BODIES OR INTRACELLULAR PARASITES (EG,	59	\$9.42	7/1/2021	12/31/2382
87207	SMEAR, PRIMARY SOURCE, WITH INTERPRETATION; SPECIAL STAIN FOR INCLUSION BODIES OR INTRACELLULAR PARASITES (EG,	91	\$9.42	7/1/2021	12/31/2382
87207	SMEAR, PRIMARY SOURCE, WITH INTERPRETATION; SPECIAL STAIN FOR INCLUSION BODIES OR INTRACELLULAR PARASITES (EG,	L1	\$9.42	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
87209	SMEAR, PRIMARY SOURCE WITH INTERPERTATION; COMPLEX SPECIAL STAIN FOR OVA AND PARASITE		\$28.28	7/1/2021	12/31/2382
87209	SMEAR, PRIMARY SOURCE WITH INTERPERTATION; COMPLEX SPECIAL STAIN FOR OVA AND PARASITE	91	\$28.28	7/1/2021	12/31/2382
87209	SMEAR, PRIMARY SOURCE WITH INTERPERTATION; COMPLEX SPECIAL STAIN FOR OVA AND PARASITE	L1	\$28.28	7/1/2021	12/31/2382
87209	SMEAR, PRIMARY SOURCE WITH INTERPERTATION; COMPLEX SPECIAL STAIN FOR OVA AND PARASITE	XU	\$28.28	7/1/2021	12/31/2382
87210	SMEAR, PRIMARY SOURCE, WITH INTERPRETATION; WET MOUNT WITH SIMPLE STAIN, FOR BACTERIA, FUNGI, OVA, AND/OR PARA	25	\$6.72	7/1/2021	12/31/2382
87210	SMEAR, PRIMARY SOURCE, WITH INTERPRETATION; WET MOUNT WITH SIMPLE STAIN, FOR BACTERIA, FUNGI, OVA, AND/OR PARA	59	\$6.72	7/1/2021	12/31/2382
87210	SMEAR, PRIMARY SOURCE, WITH INTERPRETATION; WET MOUNT WITH SIMPLE STAIN, FOR BACTERIA, FUNGI, OVA, AND/OR PARA	91	\$6.72	7/1/2021	12/31/2382
87210	SMEAR, PRIMARY SOURCE, WITH INTERPRETATION; WET MOUNT WITH SIMPLE STAIN, FOR BACTERIA, FUNGI, OVA, AND/OR PARA	L1	\$6.72	7/1/2021	12/31/2382
87210	SMEAR, PRIMARY SOURCE, WITH INTERPRETATION; WET MOUNT WITH SIMPLE STAIN, FOR BACTERIA, FUNGI, OVA, AND/OR PARA	XU	\$6.72	7/1/2021	12/31/2382
87220	TISSUE EXAMINATION FOR FUNGI (EG, KOH SLIDE)	91	\$6.72	7/1/2021	12/31/2382
87220	TISSUE EXAMINATION FOR FUNGI (EG, KOH SLIDE)	L1	\$6.72	7/1/2021	12/31/2382
87230	TOXIN OR ANTITOXIN ASSAY, TISSUE CULTURE (EG, CLOSTRIDIUM DIFFICILE TOXIN)	L1	\$30.98	7/1/2021	12/31/2382
87250	VIRUS IDENTIFICATION; INOCULATION OF EMBRYONATED EGGS, OR SMALL ANIMAL, INCLUDES OBSERVATION AND DISSECTION	L1	\$30.77	7/1/2021	12/31/2382
87252	VIRUS IDENTIFICATION; TISSUE CULTURE INOCULATION AND OBSERVATION	91	\$41.02	7/1/2021	12/31/2382
87252	VIRUS IDENTIFICATION; TISSUE CULTURE INOCULATION AND OBSERVATION	L1	\$41.02	7/1/2021	12/31/2382
87253	VIRUS IDENTIFICATION; TISSUE CULTURE, ADDITIONAL STUDIES (EG, HEMABSORPTION, NEUTRALIZATION) EACH ISOLATE	91	\$31.78	7/1/2021	12/31/2382
87253	VIRUS IDENTIFICATION; TISSUE CULTURE, ADDITIONAL STUDIES (EG, HEMABSORPTION, NEUTRALIZATION) EACH ISOLATE	L1	\$31.78	7/1/2021	12/31/2382
87254	VIRUS ISOLATION; SHELL VIAL, INCLUDES IDENTIFICATION WITH IMMUNOFLUORESCENCE STAIN, EACH VIRUS		\$30.77	7/1/2021	12/31/2382
87254	VIRUS ISOLATION; SHELL VIAL, INCLUDES IDENTIFICATION WITH IMMUNOFLUORESCENCE STAIN, EACH VIRUS	59	\$30.77	7/1/2021	12/31/2382
87254	VIRUS ISOLATION; SHELL VIAL, INCLUDES IDENTIFICATION WITH IMMUNOFLUORESCENCE STAIN, EACH VIRUS	91	\$30.77	7/1/2021	12/31/2382
87254	VIRUS ISOLATION; SHELL VIAL, INCLUDES IDENTIFICATION WITH IMMUNOFLUORESCENCE STAIN, EACH VIRUS	L1	\$30.77	7/1/2021	12/31/2382
87255	VIRUS ISOLATION; INCLUDING IDENTIFICATION BY NON-IMMUNOLOGIC METHOD, OTHER THAN BY CYTOPATHIC EFFECT	L1	\$53.29	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
87260	INFECTIOUS AGENT ANTIGEN DETECTION BY DIRECT FLUORESCENT ANTIBODY TECHNIQUE; ADENOVIRUS	L1	\$18.88	7/1/2021	12/31/2382
87265	INFECTIOUS AGENT ANTIGEN DETERCTION BY DIRECT FLORESCENT ANTIBODY TECHNIQUE; BORDETELLA PERTUSSIS/PARAPERTUSS	L1	\$18.88	7/1/2021	12/31/2382
87267	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOFLOURESCENT TECHNIQUE; ENTEROVIRUS, DIRECT FLOURESCENT ANTIBODY	L1	\$18.88	7/1/2021	12/31/2382
87269	INFECTIOUS AGENT ANTIGEN DETECTION BY DIRECT FLUORESCENT ANTIBODY TECHNIQUE; GIARDIA		\$18.88	7/1/2021	12/31/2382
87269	INFECTIOUS AGENT ANTIGEN DETECTION BY DIRECT FLUORESCENT ANTIBODY TECHNIQUE; GIARDIA	L1	\$18.88	7/1/2021	12/31/2382
87270	INFECTIOUS AGENT ANTIGEN DETECTION BY DIRECT FLORESCENT ANTIBODY TECHNIQUES; CHLAMYDIA TRACHOMATIS	L1	\$18.88	7/1/2021	12/31/2382
87271	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOFLOURESCENT TECHNIQUE; CYTOMEGALOVIRUS, DIRECT FLOURESCENT ANTIBOD	L1	\$18.88	7/1/2021	12/31/2382
87272	INFECTIOUS AGENT ANTIGEN DETECTION BY DIRECT FLUORESCENT ANTIBODY TECHNIQUE; CRYPTOSPORIDIUM/GIARDIA	L1	\$18.88	7/1/2021	12/31/2382
87273	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOFLOURESCENT TECHNIQUE; HERPES	91	\$18.67	7/1/2021	12/31/2382
87273	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOFLOURESCENT TECHNIQUE; HERPES	L1	\$18.67	7/1/2021	12/31/2382
87274	INFECTIOUS AGENT ANTIGEN DETECTION BY DIRECT FLORESCENT ANTIBODY TECHNIQUE; HERPES SIMPLEX VIRUS	59	\$18.67	7/1/2021	12/31/2382
87274	INFECTIOUS AGENT ANTIGEN DETECTION BY DIRECT FLORESCENT ANTIBODY TECHNIQUE; HERPES SIMPLEX VIRUS	91	\$18.67	7/1/2021	12/31/2382
87274	INFECTIOUS AGENT ANTIGEN DETECTION BY DIRECT FLORESCENT ANTIBODY TECHNIQUE; HERPES SIMPLEX VIRUS	L1	\$18.67	7/1/2021	12/31/2382
87275	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOFLOURESCENT TECHNIQUE; INFLUENZA B	L1	\$18.67	7/1/2021	12/31/2382
87276	INFECTIOUS AGENT ANTIGEN DETECTION BY DIRECT FLORESCENT ANTIBODY TECHNIQUE; INFLUENZA A VIRUS	L1	\$18.67	7/1/2021	12/31/2382
87277	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOFLOURESCENT TECHNIQUE; LEGIONELLA	L1	\$18.67	7/1/2021	12/31/2382
87278	INFECTIOUS AGENT ANTIGEN DETECTION BY DIRECT FLORESCENT ANTIBODY TECHNIQUE; LEGIONELLA PNEUMOPHILA	91	\$18.67	7/1/2021	12/31/2382
87278	INFECTIOUS AGENT ANTIGEN DETECTION BY DIRECT FLORESCENT ANTIBODY TECHNIQUE; LEGIONELLA PNEUMOPHILA	L1	\$18.67	7/1/2021	12/31/2382
87279	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOFLOURESCENT TECHNIQUE; PARAINFLUENZA VIRUS, EACH TYPE	L1	\$18.67	7/1/2021	12/31/2382
87280	INFECTIOUS AGENT ANTIGEN DETECTION BY DIRECT FLORESCENT ANTIBODY TECHNIQUE; RESPIRATORY SYNCYTIAL	L1	\$18.67	7/1/2021	12/31/2382
87281	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOFLOURESCENT TECHNIQUE; PNEUMOCYSTIS CARINII	91	\$16.58	1/1/2020	12/31/2382
87281	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOFLOURESCENT TECHNIQUE; PNEUMOCYSTIS CARINII	L1	\$18.67	7/1/2021	12/31/2382

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87283	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOFLUORESCENT TECHNIQUE; RUBEOLA	L1	\$18.67	7/1/2021	12/31/2382
87285	INFECTIOUS AGENT ANTIGEN DETECTION BY DIRECT FLORESCENT ANTIBODY TECHNIQUE; TREPONEMA PALLIDUM	L1	\$18.67	7/1/2021	12/31/2382
87290	INFECTIOUS AGENT ANTIGEN DETECTION BY DIRECT FLORESCENT ANTIBODY TECHNIQUE; VARICELLA ZOSTER VIRUS	L1	\$18.67	7/1/2021	12/31/2382
87299	INFECTIOUS AGENT ANTIGEN DETECTION BY DIRECT FLORESCENT ANTIBODY TECHNIQUE, NOT OTHERWISE SPECIFIED	L1	\$18.67	7/1/2021	12/31/2382
87300	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOFLUORESCENT TECHNIQUE, POLYVALENT FOR MULTIPLE ORGANISMS, EACH POL		\$18.88	7/1/2021	12/31/2382
87300	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOFLUORESCENT TECHNIQUE, POLYVALENT FOR MULTIPLE ORGANISMS, EACH POL	L1	\$18.88	7/1/2021	12/31/2382
87301	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE OR SEMIQUANTITATIVE, MULTIPLE	L1	\$11.33	7/1/2021	12/31/2382
87305	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE OR SEMIQUANTITATIVE, MULTIPLE-		\$18.88	7/1/2021	12/31/2382
87305	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE OR SEMIQUANTITATIVE, MULTIPLE-	L1	\$18.88	7/1/2021	12/31/2382
87320	INFECTIOUS AGENT DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE; CHLAMYDIA TRACHOMATIS	L1	\$18.67	7/1/2021	12/31/2382
87324	INFECTIOUS AGENT ANTIGEN BY ENZYME IMMUNOASSAY TECHNIQUE; CLOSTRIDIUM DIFFICILE TOXIN A	59	\$18.67	7/1/2021	12/31/2382
87324	INFECTIOUS AGENT ANTIGEN BY ENZYME IMMUNOASSAY TECHNIQUE; CLOSTRIDIUM DIFFICILE TOXIN A	91	\$18.67	7/1/2021	12/31/2382
87324	INFECTIOUS AGENT ANTIGEN BY ENZYME IMMUNOASSAY TECHNIQUE; CLOSTRIDIUM DIFFICILE TOXIN A	L1	\$18.67	7/1/2021	12/31/2382
87324	INFECTIOUS AGENT ANTIGEN BY ENZYME IMMUNOASSAY TECHNIQUE; CLOSTRIDIUM DIFFICILE TOXIN A	XU	\$16.58	1/1/2020	12/31/2382
87327	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, CRYPTOCOCCUS NEOFORMANS	L1	\$18.67	7/1/2021	12/31/2382
87328	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE; CRYPTOSPORIDIUM/GIARDIA	91	\$18.67	7/1/2021	12/31/2382
87328	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE; CRYPTOSPORIDIUM/GIARDIA	L1	\$18.67	7/1/2021	12/31/2382
87329	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE OR SEMIQUANTITATIVE, GIARDIA		\$18.88	7/1/2021	12/31/2382
87329	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE OR SEMIQUANTITATIVE, GIARDIA	91	\$18.88	7/1/2021	12/31/2382
87329	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE OR SEMIQUANTITATIVE, GIARDIA	L1	\$18.67	7/1/2021	12/31/2382
87332	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE; CYTOMEGALOVIRUS	L1	\$18.67	7/1/2021	12/31/2382
87335	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE; ESCHERICHIA COLI 0157	L1	\$18.67	7/1/2021	12/31/2382

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87336	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, ENTAMOEBA HISTOLYTICA DISPAR GROUP	L1	\$18.67	7/1/2021	12/31/2382
87337	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE; ENTAMOEBA HISTOLYTICA GROUP	L1	\$18.67	7/1/2021	12/31/2382
87338	HELICOBACTER PYLORI, STOOL	L1	\$21.40	7/1/2021	12/31/2382
87339	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE; HELICOBACTER PYLORI	L1	\$18.67	7/1/2021	12/31/2382
87340	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE; HEPATITIS B SURFACE ANTIGEN (HBSAG)	59	\$16.08	7/1/2021	12/31/2382
87340	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE; HEPATITIS B SURFACE ANTIGEN (HBSAG)	GZ	\$14.27	1/1/2020	12/31/2382
87340	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE; HEPATITIS B SURFACE ANTIGEN (HBSAG)	L1	\$16.08	7/1/2021	12/31/2382
87340	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE; HEPATITIS B SURFACE ANTIGEN (HBSAG)	XU	\$16.08	7/1/2021	12/31/2382
87341	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE; HEPATITIS B SURFACE ANTIGEN NEUTRALIZATION	L1	\$16.08	7/1/2021	12/31/2382
87350	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE; HEPATITIS BE ANTIGEN (HBEAG)	L1	\$17.93	7/1/2021	12/31/2382
87380	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE; HEPATITIS, DELTA AGENT	L1	\$21.40	7/1/2021	12/31/2382
87385	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE; HISTOPLASMA CAPSULATUM	L1	\$18.67	7/1/2021	12/31/2382
87389	HIV-1 ANTIGEN(S), WITH HIV-1 AND HIV-2 ANTIBODIES, SINGLE RESULT		\$37.28	7/1/2021	12/31/2382
87389	HIV-1 ANTIGEN(S), WITH HIV-1 AND HIV-2 ANTIBODIES, SINGLE RESULT	59	\$37.28	7/1/2021	12/31/2382
87389	HIV-1 ANTIGEN(S), WITH HIV-1 AND HIV-2 ANTIBODIES, SINGLE RESULT	91	\$37.28	7/1/2021	12/31/2382
87389	HIV-1 ANTIGEN(S), WITH HIV-1 AND HIV-2 ANTIBODIES, SINGLE RESULT	L1	\$37.28	7/1/2021	12/31/2382
87389	HIV-1 ANTIGEN(S), WITH HIV-1 AND HIV-2 ANTIBODIES, SINGLE RESULT	PN	\$37.28	7/1/2021	12/31/2382
87389	HIV-1 ANTIGEN(S), WITH HIV-1 AND HIV-2 ANTIBODIES, SINGLE RESULT	XU	\$37.28	7/1/2021	12/31/2382
87390	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE; HIV-1	L1	\$27.46	7/1/2021	12/31/2382
87391	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE; HIV-2	L1	\$27.46	7/1/2021	12/31/2382
87400	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE; INFLUENZA, A OR B, EACH	59	\$18.88	7/1/2021	12/31/2382
87400	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE; INFLUENZA, A OR B, EACH	91	\$18.88	7/1/2021	12/31/2382

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87400	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE; INFLUENZA, A OR B, EACH	L1	\$18.88	7/1/2021	12/31/2382
87420	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE; RESPIRATORY SYNCYTIAL VIRUS	L1	\$18.67	7/1/2021	12/31/2382
87425	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE; ROTAVIRUS	L1	\$18.67	7/1/2021	12/31/2382
87426	ENZYME-LINKED IMMUNOSORBENT ASSAY [ELISA], FLUORESCENCE IMMUNOASSAY [FIA], IMMUNOCHEMILUMINOMETRIC ASSAY [IMCA]) QUALITATIVE OR		\$12.03	7/1/2021	12/31/2382
87426	ENZYME-LINKED IMMUNOSORBENT ASSAY [ELISA], FLUORESCENCE IMMUNOASSAY [FIA], IMMUNOCHEMILUMINOMETRIC ASSAY [IMCA]) QUALITATIVE OR	PO	\$12.03	7/1/2021	12/31/2382
87426	ENZYME-LINKED IMMUNOSORBENT ASSAY [ELISA], FLUORESCENCE IMMUNOASSAY [FIA], IMMUNOCHEMILUMINOMETRIC ASSAY [IMCA]) QUALITATIVE OR	QW	\$12.03	7/1/2021	12/31/2382
87427	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE; SHIGA-LIKE TOXIN	L1	\$18.67	7/1/2021	12/31/2382
87428	ENZYME-LINKED IMMUNOSORBENT ASSAY [ELISA], FLUORESCENCE IMMUNOASSAY [FIA], IMMUNOCHEMILUMINOMETRIC ASSAY [IMCA]) QUALITATIVE OR		\$75.25	7/1/2021	12/31/2382
87430	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE; STREPTOCOCCUS, GROUP A	59	\$18.67	7/1/2021	12/31/2382
87430	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE; STREPTOCOCCUS, GROUP A	91	\$18.67	7/1/2021	12/31/2382
87430	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE; STREPTOCOCCUS, GROUP A	L1	\$18.67	7/1/2021	12/31/2382
87430	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE; STREPTOCOCCUS, GROUP A	XE	\$18.67	7/1/2021	12/31/2382
87430	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE; STREPTOCOCCUS, GROUP A	XU	\$18.67	7/1/2021	12/31/2382
87449	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE; MULTIPLE STEP METHOD, NOT	59	\$18.88	7/1/2021	12/31/2382
87449	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE; MULTIPLE STEP METHOD, NOT	91	\$18.88	7/1/2021	12/31/2382
87449	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE; MULTIPLE STEP METHOD, NOT	L1	\$18.88	7/1/2021	12/31/2382
87450	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE; SINGLE STEP METHOD, NOT OTHERWISE	L1	\$14.92	7/1/2021	12/31/2382
87451	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE; MULTIPLE STEP METHOD, POLYVALENT FOR MULTI	L1	\$14.92	7/1/2021	12/31/2382
87470	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); BARTONELLA HENSELAE AND BARTONELLA QUINTANA	L1	\$31.21	7/1/2021	12/31/2382
87471	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); BARTONELLA HENSELAE AND BARTONELLA	L1	\$54.62	7/1/2021	12/31/2382
87472	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); BARTONELLA HENSELAE AND BARTONELLA QUINTANA, QUANTIF	L1	\$66.67	7/1/2021	12/31/2382
87475	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); BORRELIA BURGDORFERI, DIRECT PROBE TECHNIQUE	L1	\$31.21	7/1/2021	12/31/2382

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87476	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); BORRELIA BURGDORFERI, AMPLIFIED PROBE TECHNIQUE	L1	\$54.62	7/1/2021	12/31/2382
87480	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); CANDIDA SPECIES, DIRECT PROBE TECHNIQUE	L1	\$31.21	7/1/2021	12/31/2382
87480	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); CANDIDA SPECIES, DIRECT PROBE TECHNIQUE	XU	\$31.21	7/1/2021	12/31/2382
87481	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); CANDIDA SPECIES, AMPLIFIED PROBE TECHNIQUE	59	\$54.62	7/1/2021	12/31/2382
87481	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); CANDIDA SPECIES, AMPLIFIED PROBE TECHNIQUE	91	\$48.50	1/1/2020	12/31/2382
87481	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); CANDIDA SPECIES, AMPLIFIED PROBE TECHNIQUE	L1	\$54.62	7/1/2021	12/31/2382
87481	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); CANDIDA SPECIES, AMPLIFIED PROBE TECHNIQUE	XS	\$48.50	1/1/2020	12/31/2382
87481	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); CANDIDA SPECIES, AMPLIFIED PROBE TECHNIQUE	XU	\$54.62	7/1/2021	12/31/2382
87483	TEST FOR DETECTION NUCLEIC ACID OF ORGANISM CAUSING INFECTION OF CENTRAL NERVOUS SYSTEM		\$643.90	7/1/2021	12/31/2382
87485	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); CHLAMYDIA PNEUMONIAE, DIRECT PROBE TECHNIQUE	L1	\$31.21	7/1/2021	12/31/2382
87486	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); CHLAMYDIA PNEUMONIAE, AMPLIFIED PROBE TECHNIQUE	L1	\$54.62	7/1/2021	12/31/2382
87490	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); CHLAMYDIA TRACHOMATIS, DIRECT PROBE TECHNIQUE	L1	\$31.21	7/1/2021	12/31/2382
87491	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); CHLAMYDIA TRACHOMATIS, AMPLIFIED PROBE TECHNIQUE	59	\$54.62	7/1/2021	12/31/2382
87491	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); CHLAMYDIA TRACHOMATIS, AMPLIFIED PROBE TECHNIQUE	91	\$54.62	7/1/2021	12/31/2382
87491	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); CHLAMYDIA TRACHOMATIS, AMPLIFIED PROBE TECHNIQUE	L1	\$54.62	7/1/2021	12/31/2382
87491	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); CHLAMYDIA TRACHOMATIS, AMPLIFIED PROBE TECHNIQUE	PO	\$54.62	7/1/2021	12/31/2382
87491	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); CHLAMYDIA TRACHOMATIS, AMPLIFIED PROBE TECHNIQUE	XS	\$50.95	7/1/2021	12/31/2382
87491	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); CHLAMYDIA TRACHOMATIS, AMPLIFIED PROBE TECHNIQUE	XU	\$54.62	7/1/2021	12/31/2382
87493	CLOSTRIDIUM DIFFICILE, TOXIN GENE(S), AMPLIFIED PROBE TECHNIQUE		\$56.62	7/1/2021	12/31/2382
87493	CLOSTRIDIUM DIFFICILE, TOXIN GENE(S), AMPLIFIED PROBE TECHNIQUE	59	\$56.62	7/1/2021	12/31/2382
87493	CLOSTRIDIUM DIFFICILE, TOXIN GENE(S), AMPLIFIED PROBE TECHNIQUE	L1	\$56.62	7/1/2021	12/31/2382
87493	CLOSTRIDIUM DIFFICILE, TOXIN GENE(S), AMPLIFIED PROBE TECHNIQUE	XU	\$56.62	7/1/2021	12/31/2382

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87495	CYTOMEGALOVIRUS DETECTION BY DNA, DIRECT PROBE	L1	\$31.56	7/1/2021	12/31/2382
87496	CYTOMEGALOVIRUS DETECTION BY DNA, AMPLIFIED PROBE	L1	\$54.62	7/1/2021	12/31/2382
87497	CYTOMEGALOVIRUS DETECTION BY DNA, QUANTIFICATION	59	\$67.41	7/1/2021	12/31/2382
87497	CYTOMEGALOVIRUS DETECTION BY DNA, QUANTIFICATION	90	\$67.41	7/1/2021	12/31/2382
87497	CYTOMEGALOVIRUS DETECTION BY DNA, QUANTIFICATION	91	\$67.41	7/1/2021	12/31/2382
87497	CYTOMEGALOVIRUS DETECTION BY DNA, QUANTIFICATION	L1	\$67.41	7/1/2021	12/31/2382
87498	INFECTIOUS AGENT DETECTION BY NULEIC ACID; ENTEROVIRUS, AMPLIFIED PROBE TECHNIQUE		\$55.23	7/1/2021	12/31/2382
87498	INFECTIOUS AGENT DETECTION BY NULEIC ACID; ENTEROVIRUS, AMPLIFIED PROBE TECHNIQUE	L1	\$55.23	7/1/2021	12/31/2382
87500	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); VANCOMYCIN RESISTANCE, AMPLIFIED PROBE TECHNIQUE		\$55.23	7/1/2021	12/31/2382
87500	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); VANCOMYCIN RESISTANCE, AMPLIFIED PROBE TECHNIQUE	L1	\$55.23	7/1/2021	12/31/2382
87501	INFECTIOUS AGENT DETECTION BT NUCLEIC ACID (DNA OR RNA); INFLUENZA VIRUS. REVERSE TRANSCRIPTION		\$81.34	7/1/2021	12/31/2382
87501	INFECTIOUS AGENT DETECTION BT NUCLEIC ACID (DNA OR RNA); INFLUENZA VIRUS. REVERSE TRANSCRIPTION	L1	\$81.34	7/1/2021	12/31/2382
87502	INFECTIOUS AGENT DETECTION BT NUCLEIC ACID (DNA OR RNA); INFLUENZA VIRUS, FOR MULTIPLE TYPES OR SUB-TYPES,		\$134.87	7/1/2021	12/31/2382
87502	INFECTIOUS AGENT DETECTION BT NUCLEIC ACID (DNA OR RNA); INFLUENZA VIRUS, FOR MULTIPLE TYPES OR SUB-TYPES,	59	\$134.87	7/1/2021	12/31/2382
87502	INFECTIOUS AGENT DETECTION BT NUCLEIC ACID (DNA OR RNA); INFLUENZA VIRUS, FOR MULTIPLE TYPES OR SUB-TYPES,	91	\$134.87	7/1/2021	12/31/2382
87502	INFECTIOUS AGENT DETECTION BT NUCLEIC ACID (DNA OR RNA); INFLUENZA VIRUS, FOR MULTIPLE TYPES OR SUB-TYPES,	L1	\$134.87	7/1/2021	12/31/2382
87502	INFECTIOUS AGENT DETECTION BT NUCLEIC ACID (DNA OR RNA); INFLUENZA VIRUS, FOR MULTIPLE TYPES OR SUB-TYPES,	XU	\$134.87	7/1/2021	12/31/2382
87503	INFECTIOUS AGENT DETECTION BT NUCLEIC ACID (DNA OR RNA); INFLUENZA VIRUS, FOR MULTIPLE TYPES OR SUB-TYPES,		\$32.90	7/1/2021	12/31/2382
87503	INFECTIOUS AGENT DETECTION BT NUCLEIC ACID (DNA OR RNA); INFLUENZA VIRUS, FOR MULTIPLE TYPES OR SUB-TYPES,	L1	\$32.90	7/1/2021	12/31/2382
87505	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID; GASTROINTESTINAL PATHOGEN, INCLUDING MULTIPLEX REVERSE		\$196.63	7/1/2021	12/31/2382
87505	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID; GASTROINTESTINAL PATHOGEN, INCLUDING MULTIPLEX REVERSE	XE	\$196.63	7/1/2021	12/31/2382
87506	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID; GASTROINTESTINAL PATHOGEN, INCLUDING MULTIPLEX REVERSE		\$327.13	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
87507	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID; GASTROINTESTINAL PATHOGEN, INCLUDING MULTIPLEX REVERSE		\$638.80	7/1/2021	12/31/2382
87510	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); GARDNERELLA VAGINALIS, DIRECT PROBE TECHNIQUE	L1	\$31.56	7/1/2021	12/31/2382
87510	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); GARDNERELLA VAGINALIS, DIRECT PROBE TECHNIQUE	XU	\$31.56	7/1/2021	12/31/2382
87511	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA);GARDNERELLA VAGINALIS, AMPLIFIED PROBE TECHNIQUE	L1	\$54.62	7/1/2021	12/31/2382
87512	GARDNERELLA VAGINALIS DETECTION BY DNA, QUANTIFICATION		\$65.70	7/1/2021	12/31/2382
87512	GARDNERELLA VAGINALIS DETECTION BY DNA, QUANTIFICATION	L1	\$65.70	7/1/2021	12/31/2382
87515	HAPATITIS B DETECTION BY DNA, DIRECT PROBE	L1	\$31.56	7/1/2021	12/31/2382
87516	HEPATITIS B DETECTION BY DNA, AMPLIFIED PROBE	L1	\$54.62	7/1/2021	12/31/2382
87517	HEPATITIS B DETECTION BY DNA, QUANTIFICATION	59	\$67.41	7/1/2021	12/31/2382
87517	HEPATITIS B DETECTION BY DNA, QUANTIFICATION	L1	\$67.41	7/1/2021	12/31/2382
87520	HEPATITIS C DETECTION BY RNA, DIRECT PROBE	L1	\$30.77	7/1/2021	12/31/2382
87521	HEPATITIS C DETECTION BY RNA, AMPLIFIED PROBE	59	\$55.23	7/1/2021	12/31/2382
87521	HEPATITIS C DETECTION BY RNA, AMPLIFIED PROBE	L1	\$54.62	7/1/2021	12/31/2382
87522	HEPATITIS C DETECTION BY RNA, QUANTIFICATION	59	\$67.41	7/1/2021	12/31/2382
87522	HEPATITIS C DETECTION BY RNA, QUANTIFICATION	91	\$67.41	7/1/2021	12/31/2382
87522	HEPATITIS C DETECTION BY RNA, QUANTIFICATION	L1	\$67.41	7/1/2021	12/31/2382
87522	HEPATITIS C DETECTION BY RNA, QUANTIFICATION	XU	\$67.41	7/1/2021	12/31/2382
87525	HEPATITIS G DETECTION BY DNA, DIRECT PROBE	L1	\$31.56	7/1/2021	12/31/2382
87526	HEPATITIS G DETECTION BY DNA, AMPLIFIED PROBE	L1	\$54.62	7/1/2021	12/31/2382
87527	HEPATITIS G DETECTION BY DNA, QUANTIFICATION		\$65.70	7/1/2021	12/31/2382
87527	HEPATITIS G DETECTION BY DNA, QUANTIFICATION	L1	\$65.70	7/1/2021	12/31/2382
87528	HERPES SIMPLEX DETECTIONBY DNA, DIRECT PROBE	L1	\$31.56	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
87529	HERPES SIMPLEX DETECTION BY DNA, AMPLIFIED PROBE	59	\$49.04	1/1/2020	12/31/2382
87529	HERPES SIMPLEX DETECTION BY DNA, AMPLIFIED PROBE	91	\$55.23	7/1/2021	12/31/2382
87529	HERPES SIMPLEX DETECTION BY DNA, AMPLIFIED PROBE	L1	\$55.23	7/1/2021	12/31/2382
87529	HERPES SIMPLEX DETECTION BY DNA, AMPLIFIED PROBE	XU	\$55.23	7/1/2021	12/31/2382
87530	HERPES SIMPLEX DETECTION BY DNA, QUANTIFICATION		\$67.41	7/1/2021	12/31/2382
87530	HERPES SIMPLEX DETECTION BY DNA, QUANTIFICATION	L1	\$66.28	7/1/2021	12/31/2382
87530	HERPES SIMPLEX DETECTION BY DNA, QUANTIFICATION	XU	\$67.41	7/1/2021	12/31/2382
87531	HERPES VIRUS-6 DETECTION BY DNA, DIRECT PROBE	L1	\$31.56	7/1/2021	12/31/2382
87532	HERPES VIRUS-6 DETECTION BY DNA, AMPLIFIED PROBE	L1	\$55.23	7/1/2021	12/31/2382
87533	HERPES VIRUS-6 DETECTION BY DNA, QUANTIFICATION		\$65.70	7/1/2021	12/31/2382
87533	HERPES VIRUS-6 DETECTION BY DNA, QUANTIFICATION	L1	\$65.70	7/1/2021	12/31/2382
87534	HIV-1 DETECTION BY DNA, DIRECT PROBE	L1	\$31.56	7/1/2021	12/31/2382
87535	HIV-1 DETECTION BY DNA, AMPLIFIED PROBE	L1	\$55.23	7/1/2021	12/31/2382
87536	HIV-1 DETECTION BY DNA, QUANTIFICAITON	59	\$133.90	7/1/2021	12/31/2382
87536	HIV-1 DETECTION BY DNA, QUANTIFICAITON	91	\$133.90	7/1/2021	12/31/2382
87536	HIV-1 DETECTION BY DNA, QUANTIFICAITON	GA	\$133.90	7/1/2021	12/31/2382
87536	HIV-1 DETECTION BY DNA, QUANTIFICAITON	L1	\$133.90	7/1/2021	12/31/2382
87537	HIV-2 DETECTION BY DNA, DIRECT PROBE	L1	\$31.56	7/1/2021	12/31/2382
87538	HIV-2 DETECTION BY DNA, AMPLIFIED PROBE	L1	\$55.23	7/1/2021	12/31/2382
87539	HIV-2 DETECTION BY DNA, QUANTIFICATION	59	\$67.41	7/1/2021	12/31/2382
87539	HIV-2 DETECTION BY DNA, QUANTIFICATION	90	\$67.41	7/1/2021	12/31/2382
87539	HIV-2 DETECTION BY DNA, QUANTIFICATION	L1	\$67.41	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
87540	LEGIONELLA PNEUMOPHILA DETECTION BY DNA, DIRECT PROBE	L1	\$31.56	7/1/2021	12/31/2382
87541	LEGIONELLA PNEUMOPHILA DETECTION BY DNA, AMPLIFIED PROB	L1	\$55.23	7/1/2021	12/31/2382
87542	LEGIONELLA PNEUMOPHILA DETECTION BY DNA, QUANTIFICATION		\$65.70	7/1/2021	12/31/2382
87542	LEGIONELLA PNEUMOPHILA DETECTION BY DNA, QUANTIFICATION	L1	\$65.70	7/1/2021	12/31/2382
87550	MYCOBACTERIA DETECTION BY DNA, DIRECT PROBE	L1	\$31.56	7/1/2021	12/31/2382
87551	MYCOBACTERIA DETECTION BY DNA, AMPLIFIED PROBE	L1	\$55.23	7/1/2021	12/31/2382
87552	MYCOBACTERIA DETECTION BY DNA, QUANTIFICATION		\$67.41	7/1/2021	12/31/2382
87552	MYCOBACTERIA DETECTION BY DNA, QUANTIFICATION	L1	\$67.41	7/1/2021	12/31/2382
87555	M. TUBERCULOSIS DETECTION BY DNA, DIRECT PROBE	L1	\$31.56	7/1/2021	12/31/2382
87556	M. TUBERCULOSIS DETECTION BY DNA, AMPLIFIED PROBE	L1	\$55.23	7/1/2021	12/31/2382
87557	M. TUBERCULOSIS DETECTION BY DNA, QUANTIFICATION		\$67.41	7/1/2021	12/31/2382
87557	M. TUBERCULOSIS DETECTION BY DNA, QUANTIFICATION	L1	\$67.41	7/1/2021	12/31/2382
87560	M. AVIUM-INTRACELLULARE BY DNA, DIRECT PROBE	L1	\$31.56	7/1/2021	12/31/2382
87561	M. AVIUM-INTRACELLULARE BY DNA, AMPLIFIED PROBE	L1	\$55.23	7/1/2021	12/31/2382
87562	M. AVIUM-INTRACELLULARE BY DNA, QUANTIFICATION		\$67.41	7/1/2021	12/31/2382
87562	M. AVIUM-INTRACELLULARE BY DNA, QUANTIFICATION	L1	\$67.41	7/1/2021	12/31/2382
87563	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); MYCOPLASMA GENITALIUM, AMPLIFIED PROBE TECHNIQUE		\$36.86	7/1/2021	12/31/2382
87580	M. PNEUMONIAE BY DNA, DIRECT PROBE	L1	\$31.56	7/1/2021	12/31/2382
87581	M. PNEUMONIAE BY DNA, AMPLIFIED PROBE	L1	\$55.23	7/1/2021	12/31/2382
87582	M. PNEUMONIAE BY DNA, QUANTIFICATION		\$65.70	7/1/2021	12/31/2382
87582	M. PNEUMONIAE BY DNA, QUANTIFICATION	L1	\$65.70	7/1/2021	12/31/2382
87590	N. GONORRHOEAE BY DNA, DIRECT PROBE	L1	\$31.56	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
87591	N. GONORRHOEAE BY DNA, AMPLIFIED PROBE	59	\$55.23	7/1/2021	12/31/2382
87591	N. GONORRHOEAE BY DNA, AMPLIFIED PROBE	91	\$55.23	7/1/2021	12/31/2382
87591	N. GONORRHOEAE BY DNA, AMPLIFIED PROBE	L1	\$55.23	7/1/2021	12/31/2382
87591	N. GONORRHOEAE BY DNA, AMPLIFIED PROBE	PO	\$55.23	7/1/2021	12/31/2382
87591	N. GONORRHOEAE BY DNA, AMPLIFIED PROBE	XS	\$51.53	7/1/2021	12/31/2382
87591	N. GONORRHOEAE BY DNA, AMPLIFIED PROBE	XU	\$55.23	7/1/2021	12/31/2382
87592	N. GONORRHOEAE BY DNA, QUANTIFICATION		\$67.41	7/1/2021	12/31/2382
87592	N. GONORRHOEAE BY DNA, QUANTIFICATION	L1	\$67.41	7/1/2021	12/31/2382
87620	HPV BY DNA, DIRECT PROBE	L1	\$31.56	7/1/2021	12/31/2382
87621	HPV BY DNA, AMPLIFIED PROBE	59	\$50.73	7/1/2021	12/31/2382
87621	HPV BY DNA, AMPLIFIED PROBE	L1	\$50.73	7/1/2021	12/31/2382
87622	HPV BY DNA, QUANTIFICATION		\$65.70	7/1/2021	12/31/2382
87622	HPV BY DNA, QUANTIFICATION	L1	\$65.70	7/1/2021	12/31/2382
87623	INFECTIOUS AGENT DETECTION BY NULEIC ACID; HUMAN PAPILLOMAVIRUS, LOW-RISK TYPES		\$53.79	7/1/2021	12/31/2382
87624	INFECTIOUS AGENT DETECTION BY NULEIC ACID; HUMAN PAPILLOMAVIRUS, HIGH-RISK TYPES		\$53.79	7/1/2021	12/31/2382
87624	INFECTIOUS AGENT DETECTION BY NULEIC ACID; HUMAN PAPILLOMAVIRUS, HIGH-RISK TYPES	91	\$53.79	7/1/2021	12/31/2382
87624	INFECTIOUS AGENT DETECTION BY NULEIC ACID; HUMAN PAPILLOMAVIRUS, HIGH-RISK TYPES	L1	\$53.79	7/1/2021	12/31/2382
87624	INFECTIOUS AGENT DETECTION BY NULEIC ACID; HUMAN PAPILLOMAVIRUS, HIGH-RISK TYPES	PO	\$53.79	7/1/2021	12/31/2382
87624	INFECTIOUS AGENT DETECTION BY NULEIC ACID; HUMAN PAPILLOMAVIRUS, HIGH-RISK TYPES	XU	\$53.79	7/1/2021	12/31/2382
87625	INFECTIOUS AGENT DETECTION BY NULEIC ACID; HUMAN PAPILLOMAVIRUS, TYPES 16 AND 18 ONLY, INCLUDES		\$53.79	7/1/2021	12/31/2382
87631	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID; RESPIRATORY VIRUS,MULTIPLEX REVERSE TRANSCRIPTION AND AMPLIFIED		\$198.62	7/1/2021	12/31/2382
87631	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID; RESPIRATORY VIRUS,MULTIPLEX REVERSE TRANSCRIPTION AND AMPLIFIED	L1	\$198.62	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
87632	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID; RESPIRATORY VIRUS,MULTIPLEX REVERSE TRANSCRIPTION AND AMPLIFIED		\$330.41	7/1/2021	12/31/2382
87632	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID; RESPIRATORY VIRUS,MULTIPLEX REVERSE TRANSCRIPTION AND AMPLIFIED	L1	\$330.41	7/1/2021	12/31/2382
87633	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID; RESPIRATORY VIRUS,MULTIPLEX REVERSE TRANSCRIPTION AND AMPLIFIED		\$645.25	7/1/2021	12/31/2382
87633	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID; RESPIRATORY VIRUS,MULTIPLEX REVERSE TRANSCRIPTION AND AMPLIFIED	L1	\$645.25	7/1/2021	12/31/2382
87634	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); RESPIRATORY SYNCYTIAL VIRUS, AMPLIFIED PROBE TECHNIQUE		\$97.61	7/1/2021	12/31/2382
87635	SYNDROME CORONAVIRUS 2 (SARS-COV-2) (CORONAVIRUS DISEASE [COVID-19]), AMPLIFIED PROBE TECHNIQUE		\$53.90	7/1/2021	12/31/2382
87635	SYNDROME CORONAVIRUS 2 (SARS-COV-2) (CORONAVIRUS DISEASE [COVID-19]), AMPLIFIED PROBE TECHNIQUE	Q6	\$53.90	7/1/2021	12/31/2382
87635	SYNDROME CORONAVIRUS 2 (SARS-COV-2) (CORONAVIRUS DISEASE [COVID-19]), AMPLIFIED PROBE TECHNIQUE	QW	\$53.90	7/1/2021	12/31/2382
87636	SEVERE ACUTE RESPIRATORY SYNDROME CORONAVIRUS 2 (SARS-COV-2) (CORONAVIRUS DISEASE [COVID-19]) AND INFLUENZA VIRUS TYPES A AND B, MULTIPLEX AMPLIFIED PROBE TECHNIQUE		\$125.45	7/1/2021	12/31/2382
87637	19]), INFLUENZA VIRUS TYPES A AND B, AND RESPIRATORY SYNCYTIAL VIRUS, MULTIPLEX AMPLIFIED PROBE TECHNIQUE		\$125.45	7/1/2021	12/31/2382
87640	INFECTIOUS AGENT DETECTION BY NULEIC ACID; STAPHYLOCOCCUS AUREUS, AMPLIFIED PROBE TECHNIQUE		\$55.23	7/1/2021	12/31/2382
87640	INFECTIOUS AGENT DETECTION BY NULEIC ACID; STAPHYLOCOCCUS AUREUS, AMPLIFIED PROBE TECHNIQUE	59	\$55.23	7/1/2021	12/31/2382
87640	INFECTIOUS AGENT DETECTION BY NULEIC ACID; STAPHYLOCOCCUS AUREUS, AMPLIFIED PROBE TECHNIQUE	91	\$55.23	7/1/2021	12/31/2382
87640	INFECTIOUS AGENT DETECTION BY NULEIC ACID; STAPHYLOCOCCUS AUREUS, AMPLIFIED PROBE TECHNIQUE	L1	\$55.23	7/1/2021	12/31/2382
87640	INFECTIOUS AGENT DETECTION BY NULEIC ACID; STAPHYLOCOCCUS AUREUS, AMPLIFIED PROBE TECHNIQUE	XU	\$55.23	7/1/2021	12/31/2382
87641	INFECTIOUS AGENT DETECTION BY NULEIC ACID; STAPHYLOCOCCUS AUREUS, METHICILLIN RESISTANT, AMPLIFIED PROBE		\$55.23	7/1/2021	12/31/2382
87641	INFECTIOUS AGENT DETECTION BY NULEIC ACID; STAPHYLOCOCCUS AUREUS, METHICILLIN RESISTANT, AMPLIFIED PROBE	GY	\$55.23	7/1/2021	12/31/2382
87641	INFECTIOUS AGENT DETECTION BY NULEIC ACID; STAPHYLOCOCCUS AUREUS, METHICILLIN RESISTANT, AMPLIFIED PROBE	L1	\$55.23	7/1/2021	12/31/2382
87650	STREP A BY DNA, DIRECT PROBE	91	\$31.56	7/1/2021	12/31/2382
87650	STREP A BY DNA, DIRECT PROBE	L1	\$31.56	7/1/2021	12/31/2382
87650	STREP A BY DNA, DIRECT PROBE	QW	\$31.56	7/1/2021	12/31/2382
87651	STREP A BY DNA, AMPLIFIED PROBE	XU	\$55.23	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
87652	STREP A BY DNA, QUANTIFICATION	L1	\$65.70	7/1/2021	12/31/2382
87653	INFECTIOUS AGENT DETECTION BY NULEIC ACID; STREPTOCOCCUS, GROUP B, AMPLIFIED PROBE TECHNIQUE		\$55.23	7/1/2021	12/31/2382
87653	INFECTIOUS AGENT DETECTION BY NULEIC ACID; STREPTOCOCCUS, GROUP B, AMPLIFIED PROBE TECHNIQUE	L1	\$55.23	7/1/2021	12/31/2382
87653	INFECTIOUS AGENT DETECTION BY NULEIC ACID; STREPTOCOCCUS, GROUP B, AMPLIFIED PROBE TECHNIQUE	XU	\$55.23	7/1/2021	12/31/2382
87660	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); TRICHOMONAS VAGINALIS, DIRECT PROBE TECHNIQUE		\$31.56	7/1/2021	12/31/2382
87660	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); TRICHOMONAS VAGINALIS, DIRECT PROBE TECHNIQUE	59	\$31.56	7/1/2021	12/31/2382
87660	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); TRICHOMONAS VAGINALIS, DIRECT PROBE TECHNIQUE	L1	\$31.56	7/1/2021	12/31/2382
87660	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); TRICHOMONAS VAGINALIS, DIRECT PROBE TECHNIQUE	XU	\$31.56	7/1/2021	12/31/2382
87661	TRICHOMONAS VAGINALIS, AMPLIFIED PROBE TECHNIQUE		\$53.91	7/1/2021	12/31/2382
87661	TRICHOMONAS VAGINALIS, AMPLIFIED PROBE TECHNIQUE	91	\$53.91	7/1/2021	12/31/2382
87661	TRICHOMONAS VAGINALIS, AMPLIFIED PROBE TECHNIQUE	L1	\$53.91	7/1/2021	12/31/2382
87661	TRICHOMONAS VAGINALIS, AMPLIFIED PROBE TECHNIQUE	XU	\$53.91	7/1/2021	12/31/2382
87662	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); ZIKA VIRUS, AMPLIFIED PROBE TECHNIQUE		\$71.35	7/1/2021	12/31/2382
87662	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); ZIKA VIRUS, AMPLIFIED PROBE TECHNIQUE	XU	\$71.35	7/1/2021	12/31/2382
87797	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID, NOS, DIRECT PROBE	L1	\$31.56	7/1/2021	12/31/2382
87798	INFECTIOUS AGENT DETECTIONBY NUCLEIC ACID, NOS, AMPLIFIED PROBE	59	\$55.23	7/1/2021	12/31/2382
87798	INFECTIOUS AGENT DETECTIONBY NUCLEIC ACID, NOS, AMPLIFIED PROBE	90	\$55.23	7/1/2021	12/31/2382
87798	INFECTIOUS AGENT DETECTIONBY NUCLEIC ACID, NOS, AMPLIFIED PROBE	91	\$55.23	7/1/2021	12/31/2382
87798	INFECTIOUS AGENT DETECTIONBY NUCLEIC ACID, NOS, AMPLIFIED PROBE	L1	\$55.23	7/1/2021	12/31/2382
87798	INFECTIOUS AGENT DETECTIONBY NUCLEIC ACID, NOS, AMPLIFIED PROBE	PO	\$50.22	7/1/2021	12/31/2382
87798	INFECTIOUS AGENT DETECTIONBY NUCLEIC ACID, NOS, AMPLIFIED PROBE	XU	\$55.23	7/1/2021	12/31/2382
87799	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID, NOS, QUANTIFICATION		\$67.41	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
87799	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID, NOS, QUANTIFICATION	59	\$67.41	7/1/2021	12/31/2382
87799	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID, NOS, QUANTIFICATION	90	\$67.41	7/1/2021	12/31/2382
87799	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID, NOS, QUANTIFICATION	91	\$67.41	7/1/2021	12/31/2382
87799	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID, NOS, QUANTIFICATION	L1	\$67.41	7/1/2021	12/31/2382
87800	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA) MULTIPLE ORGANISMS; DIRECT PROBE(S) TECHNIQUE	L1	\$63.10	7/1/2021	12/31/2382
87801	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA) MULTIPLE ORGANISMS; AMPLIFIED PROBE(S) TECHNIQUE	59	\$110.45	7/1/2021	12/31/2382
87801	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA) MULTIPLE ORGANISMS; AMPLIFIED PROBE(S) TECHNIQUE	L1	\$110.45	7/1/2021	12/31/2382
87801	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA) MULTIPLE ORGANISMS; AMPLIFIED PROBE(S) TECHNIQUE	XU	\$103.03	7/1/2021	12/31/2382
87802	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOASSAY WITH DIRECT OPTICAL OBSERVATION; STREPTOCOCCUS, GROUP B	L1	\$18.88	7/1/2021	12/31/2382
87803	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOASSAY WITH DIRECT OPTICAL OBSERVATION; CLOSTRIDIUM DIFFICILE TOXIN	L1	\$18.88	7/1/2021	12/31/2382
87804	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOASSAY WITH DIRECT OPTICAL OBSERVATION; INFLUENZA	59	\$18.88	7/1/2021	12/31/2382
87804	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOASSAY WITH DIRECT OPTICAL OBSERVATION; INFLUENZA	91	\$18.88	7/1/2021	12/31/2382
87804	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOASSAY WITH DIRECT OPTICAL OBSERVATION; INFLUENZA	L1	\$18.88	7/1/2021	12/31/2382
87806	INFECTIOUS AGENT DETECTION BY IMMUNOASSAY WITH DIRECT OPTICAL OBSERVATION; HIV-1 ANTIGEN (S), WITH HIV-1 AND		\$36.90	7/1/2021	12/31/2382
87807	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOASSAY WITH DIRECT OPTICAL		\$18.88	7/1/2021	12/31/2382
87807	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOASSAY WITH DIRECT OPTICAL	L1	\$18.88	7/1/2021	12/31/2382
87808	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOASSAY WITH DIRECT OPTICAL OBSERVATION; TRICHOMONAS VAGINALIS		\$18.88	7/1/2021	12/31/2382
87808	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOASSAY WITH DIRECT OPTICAL OBSERVATION; TRICHOMONAS VAGINALIS	L1	\$18.88	7/1/2021	12/31/2382
87809	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOASSAY WITH DIRECT OPTICAL OBSERVATION; ADENOVIRUS		\$18.88	7/1/2021	12/31/2382
87809	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOASSAY WITH DIRECT OPTICAL OBSERVATION; ADENOVIRUS	L1	\$18.88	7/1/2021	12/31/2382
87810	CHLAMYDIA TRACHOMATIS DETECTION BY IMMUNOASSAY WITH OPTICAL OBSERVATION	L1	\$18.88	7/1/2021	12/31/2382
87811	OBSERVATION; SEVERE ACUTE RESPIRATORY SYNDROME CORONAVIRUS 2 (SARS-COV-2) (CORONAVIRUS DISEASE [COVID-19])		\$11.72	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
87850	N. GONORRHOEAE DETECTION BY IMMUNOASSAY WITH OPTICAL OBSERVATION	L1	\$18.88	7/1/2021	12/31/2382
87880	STREP A DETECTION BY IMMUNOASSAY WITH OPTICAL OBSERVATION	L1	\$18.88	7/1/2021	12/31/2382
87899	INFECTIOUS AGENT DETECTION BY IMMUNOASSAY, NOS, WITH OPTICAL OBSERVATION	L1	\$18.88	7/1/2021	12/31/2382
87900	INFECTIOUS AGENT DRUG SUSCEPTIBILITY PHENOTYPE PREDICTION USING REGULARLY UPDATED GENOTYPIC BIOINFORMATICS		\$205.11	7/1/2021	12/31/2382
87900	INFECTIOUS AGENT DRUG SUSCEPTIBILITY PHENOTYPE PREDICTION USING REGULARLY UPDATED GENOTYPIC BIOINFORMATICS	L1	\$205.11	7/1/2021	12/31/2382
87901	INFECTIOUS AGENT GENOTYPE ANALYSIS BY NUCLEIC ACID (DNA OR RNA), HIV 1, REVERSE TRANSCRIPTASE AND PROTEASE	L1	\$405.11	7/1/2021	12/31/2382
87902	INFECTIOUS AGENT GENOTYPE ANALYSIS BY NUCLEIC ACID (DNA OR RNA); HEPATITIS C VIRUS	90	\$405.11	7/1/2021	12/31/2382
87902	INFECTIOUS AGENT GENOTYPE ANALYSIS BY NUCLEIC ACID (DNA OR RNA); HEPATITIS C VIRUS	91	\$405.11	7/1/2021	12/31/2382
87902	INFECTIOUS AGENT GENOTYPE ANALYSIS BY NUCLEIC ACID (DNA OR RNA); HEPATITIS C VIRUS	L1	\$405.11	7/1/2021	12/31/2382
87902	INFECTIOUS AGENT GENOTYPE ANALYSIS BY NUCLEIC ACID (DNA OR RNA); HEPATITIS C VIRUS	XU	\$377.90	7/1/2021	12/31/2382
87903	INFECTIOUS AGENT PHENOTYPE ANALYSIS BY NUCLEIC ACID (DNA OR RNA) WITH DRUG RESISTANCE TISSUE CULTURE ANALYSIS	L1	\$768.93	7/1/2021	12/31/2382
87904	INFECTIOUS AGENT PHENOTYPE ANALYSIS BY NUCLEIC ACID (DNA OR RNA) EACH ADDITIONAL DRUG, UP TO 5 DRUGS	91	\$41.02	7/1/2021	12/31/2382
87904	INFECTIOUS AGENT PHENOTYPE ANALYSIS BY NUCLEIC ACID (DNA OR RNA) EACH ADDITIONAL DRUG, UP TO 5 DRUGS	L1	\$41.02	7/1/2021	12/31/2382
87905	INFECTIOUS AGENT ENZYMATIC ACTIVITY IOTHER THAN VIRUS (EG, SIALIDASE ACTIVITY IN VAGINAL FLUID)		\$20.09	7/1/2021	12/31/2382
87905	INFECTIOUS AGENT ENZYMATIC ACTIVITY IOTHER THAN VIRUS (EG, SIALIDASE ACTIVITY IN VAGINAL FLUID)	L1	\$20.09	7/1/2021	12/31/2382
87906	INFECTIOUS AGENT GENOTYPE ANALYSIS BY NUCLEIC ACID (DNA OR RNA); HIV-1, OTHER REGION (EG, INTEGRASE, FUSION)		\$204.01	7/1/2021	12/31/2382
87906	INFECTIOUS AGENT GENOTYPE ANALYSIS BY NUCLEIC ACID (DNA OR RNA); HIV-1, OTHER REGION (EG, INTEGRASE, FUSION)	90	\$204.01	7/1/2021	12/31/2382
87906	INFECTIOUS AGENT GENOTYPE ANALYSIS BY NUCLEIC ACID (DNA OR RNA); HIV-1, OTHER REGION (EG, INTEGRASE, FUSION)	L1	\$204.01	7/1/2021	12/31/2382
87910	INFECTIOUS AGENT GENOTYPE ANALYSIS BY NUCLEIC ACID; CYTOMEGALOVIRUS		\$398.56	7/1/2021	12/31/2382
87910	INFECTIOUS AGENT GENOTYPE ANALYSIS BY NUCLEIC ACID; CYTOMEGALOVIRUS	L1	\$398.56	7/1/2021	12/31/2382
87912	INFECTIOUS AGENT GENOTYPE ANALYSIS BY NUCLEIC ACID; HEPATITIS B VIRUS		\$398.56	7/1/2021	12/31/2382
87912	INFECTIOUS AGENT GENOTYPE ANALYSIS BY NUCLEIC ACID; HEPATITIS B VIRUS	L1	\$398.56	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
87999	UNLISTED MICROBIOLOGY PROCEDURE	L1	\$0.00	7/1/2021	12/31/2382
88104	CYTOPATHOLOGY, FLUIDS, WASHINGS OR BRUSHINGS, EXCEPT CERVICAL OR VAGINAL; SMEARS WITH INTERPRETATION		\$37.09	7/1/2021	12/31/2382
88104	CYTOPATHOLOGY, FLUIDS, WASHINGS OR BRUSHINGS, EXCEPT CERVICAL OR VAGINAL; SMEARS WITH INTERPRETATION	26	\$17.35	7/1/2021	12/31/2382
88104	CYTOPATHOLOGY, FLUIDS, WASHINGS OR BRUSHINGS, EXCEPT CERVICAL OR VAGINAL; SMEARS WITH INTERPRETATION	59	\$37.09	7/1/2021	12/31/2382
88104	CYTOPATHOLOGY, FLUIDS, WASHINGS OR BRUSHINGS, EXCEPT CERVICAL OR VAGINAL; SMEARS WITH INTERPRETATION	91	\$37.09	7/1/2021	12/31/2382
88104	CYTOPATHOLOGY, FLUIDS, WASHINGS OR BRUSHINGS, EXCEPT CERVICAL OR VAGINAL; SMEARS WITH INTERPRETATION	L1	\$37.09	7/1/2021	12/31/2382
88104	CYTOPATHOLOGY, FLUIDS, WASHINGS OR BRUSHINGS, EXCEPT CERVICAL OR VAGINAL; SMEARS WITH INTERPRETATION	TC	\$7.90	7/1/2021	12/31/2382
88106	CYTOPATHOLOGY, FLUIDS, WASHINGS OR BRUSHINGS, EXCEPT CERVICAL OR VAGINAL; FILTER METHOD ONLY WITH INTERPRETATION		\$34.37	7/1/2021	12/31/2382
88106	CYTOPATHOLOGY, FLUIDS, WASHINGS OR BRUSHINGS, EXCEPT CERVICAL OR VAGINAL; FILTER METHOD ONLY WITH INTERPRETATION	26	\$16.07	7/1/2021	12/31/2382
88106	CYTOPATHOLOGY, FLUIDS, WASHINGS OR BRUSHINGS, EXCEPT CERVICAL OR VAGINAL; FILTER METHOD ONLY WITH INTERPRETATION	L1	\$34.37	7/1/2021	12/31/2382
88106	CYTOPATHOLOGY, FLUIDS, WASHINGS OR BRUSHINGS, EXCEPT CERVICAL OR VAGINAL; FILTER METHOD ONLY WITH INTERPRETATION	TC	\$6.48	7/1/2021	12/31/2382
88107	CYTOPATHOLOGY, FLUIDS, WASHINGS OR BRUSHINGS, EXCEPT CERVICAL OR VAGINAL; SMEARS AND FILTER PREPARATION WITH I		\$41.12	7/1/2021	12/31/2382
88107	CYTOPATHOLOGY, FLUIDS, WASHINGS OR BRUSHINGS, EXCEPT CERVICAL OR VAGINAL; SMEARS AND FILTER PREPARATION WITH I	26	\$17.77	7/1/2021	12/31/2382
88107	CYTOPATHOLOGY, FLUIDS, WASHINGS OR BRUSHINGS, EXCEPT CERVICAL OR VAGINAL; SMEARS AND FILTER PREPARATION WITH I	TC	\$8.59	7/1/2021	12/31/2382
88108	CYTOPATHOLOGY, CONCENTRATION TECHNIQUE, SMEARS AND INTERPRETATION (EG, SACCOMANNO TECHNIQUE)		\$38.13	7/1/2021	12/31/2382
88108	CYTOPATHOLOGY, CONCENTRATION TECHNIQUE, SMEARS AND INTERPRETATION (EG, SACCOMANNO TECHNIQUE)	26	\$22.18	7/1/2021	12/31/2382
88108	CYTOPATHOLOGY, CONCENTRATION TECHNIQUE, SMEARS AND INTERPRETATION (EG, SACCOMANNO TECHNIQUE)	59	\$38.13	7/1/2021	12/31/2382
88108	CYTOPATHOLOGY, CONCENTRATION TECHNIQUE, SMEARS AND INTERPRETATION (EG, SACCOMANNO TECHNIQUE)	91	\$38.13	7/1/2021	12/31/2382
88108	CYTOPATHOLOGY, CONCENTRATION TECHNIQUE, SMEARS AND INTERPRETATION (EG, SACCOMANNO TECHNIQUE)	L1	\$38.13	7/1/2021	12/31/2382
88108	CYTOPATHOLOGY, CONCENTRATION TECHNIQUE, SMEARS AND INTERPRETATION (EG, SACCOMANNO TECHNIQUE)	TC	\$8.59	7/1/2021	12/31/2382
88108	CYTOPATHOLOGY, CONCENTRATION TECHNIQUE, SMEARS AND INTERPRETATION (EG, SACCOMANNO TECHNIQUE)	XU	\$38.13	7/1/2021	12/31/2382
88112	CYTOPATHOLOGY, SELECTIVE CELLULAR ENHANCEMENT TECHNIQUE WITH INTERPRETATION, EXCEPT CERVICAL OR VAGINAL		\$142.16	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
88112	CYTOPATHOLOGY, SELECTIVE CELLULAR ENHANCEMENT TECHNIQUE WITH INTERPRETATION, EXCEPT CERVICAL OR VAGINAL	59	\$142.16	7/1/2021	12/31/2382
88112	CYTOPATHOLOGY, SELECTIVE CELLULAR ENHANCEMENT TECHNIQUE WITH INTERPRETATION, EXCEPT CERVICAL OR VAGINAL	91	\$142.16	7/1/2021	12/31/2382
88112	CYTOPATHOLOGY, SELECTIVE CELLULAR ENHANCEMENT TECHNIQUE WITH INTERPRETATION, EXCEPT CERVICAL OR VAGINAL	L1	\$142.16	7/1/2021	12/31/2382
88112	CYTOPATHOLOGY, SELECTIVE CELLULAR ENHANCEMENT TECHNIQUE WITH INTERPRETATION, EXCEPT CERVICAL OR VAGINAL	XU	\$142.16	7/1/2021	12/31/2382
88120	CYTOPATHOLOGY, IN SITU HYBRIDIZATION (EG, FISH), URINARY TRACT SPECIMEN WITH MORPHOMETRIC ANALYSIS	L1	\$0.00	7/1/2021	12/31/2382
88121	CYTOPATHOLOGY, IN SITU HYBRIDIZATION (EG, FISH), URINARY TRACT SPECIMEN WITH MORPHOMETRIC ANALYSIS	L1	\$0.00	7/1/2021	12/31/2382
88125	CYTOPATHOLOGY, FORENSIC (EG, SPERM)		\$13.10	7/1/2021	12/31/2382
88125	CYTOPATHOLOGY, FORENSIC (EG, SPERM)	26	\$11.69	7/1/2021	12/31/2382
88125	CYTOPATHOLOGY, FORENSIC (EG, SPERM)	L1	\$13.10	7/1/2021	12/31/2382
88125	CYTOPATHOLOGY, FORENSIC (EG, SPERM)	TC	\$1.40	7/1/2021	12/31/2382
88130	SEX CHROMATIN IDENTIFICATION; BARR BODIES	L1	\$23.67	7/1/2021	12/31/2382
88140	SEX CHROMATIN IDENTIFICATION; PERIPHERAL BLOOD SMEAR, POLYMORPHONUCLEAR "DRUMSTICKS"	L1	\$8.77	7/1/2021	12/31/2382
88141	CYTOPATHOLOGY, CERVICAL OR VAGINAL (ANY REPORTING SYSTEM); REQUIRING INTERPRETATION BY PHYSICIAN (LIST SEPARAT	91	\$12.06	7/1/2021	12/31/2382
88141	CYTOPATHOLOGY, CERVICAL OR VAGINAL (ANY REPORTING SYSTEM); REQUIRING INTERPRETATION BY PHYSICIAN (LIST SEPARAT	L1	\$12.06	7/1/2021	12/31/2382
88142	CYTOPATH, CERV/VAG THIN LAYER PREPARATION	59	\$31.16	7/1/2021	12/31/2382
88142	CYTOPATH, CERV/VAG THIN LAYER PREPARATION	L1	\$31.16	7/1/2021	12/31/2382
88143	CYTOPATHOLOGY, CERVICAL OR VAGINAL, COLLECTED IN PRESERVATIVE FLUID; WITH MANUIAL SCREENING AND RESCREENING	L1	\$31.16	7/1/2021	12/31/2382
88147	CYTOPATHOLOGY SMEARS CERVICAL OR VAGINAL; SCREENING BY AUTOMATED SYSTEM	L1	\$16.62	7/1/2021	12/31/2382
88148	CYTOPATHOLOGY SMEARS CERVICAL OR VAGINAL;SCREENING BY AUTOMATED SYSTEM WITH MANUAL RESCREENING	L1	\$16.62	7/1/2021	12/31/2382
88150	CYTOPATHOLOGY, SMEARS, CERVICAL OR VAGINAL, UP TO THREE SMEARS; SCREENING BY TECHNICIAN UNDER PHYSICIAN SUPERV	L1	\$16.62	7/1/2021	12/31/2382
88151	CYTOPATHOLOGY, SMEARS, CERVICAL OR VAGINAL, UP TO THREE SMEARS; REQUIRING INTERPRETATION BY PHYSICIAN	26	\$27.55	7/1/2021	12/31/2382
88152	CYTOPATHOLOGY, CERV/VAG AUTOMATED	L1	\$16.62	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
88153	CYTOPATHOLOGY, SLIDES, CERVICAL VAGINAL; WITH MANUAL SCREENING AND RESCREENING UNDER PHYSICIAN SUPERVISION	L1	\$16.62	7/1/2021	12/31/2382
88154	CYTOPATHOLOGY, SLIDES, CERVICAL OR VAGINAL; WITH MANUAL SCREENING AND COMPUTER ASSISTED RESCREENING USING CELL	L1	\$16.62	7/1/2021	12/31/2382
88155	CYTOPATHOLOGY, SMEARS, CERVICAL OR VAGINAL, UP TO THREE SMEARS; WITH DEFINITIVE HORMONAL EVALUATION (EG, MATUR	L1	\$9.42	7/1/2021	12/31/2382
88157	CYTOPATHOLOGY, SMEARS, CERVICAL OR VAGINAL, THE BETHESDA SYSTEM (TBS), UP TO THREE SMEARS; REQUIRING INTERPRET	26	\$27.55	7/1/2021	12/31/2382
88160	CYTOPATHOLOGY, ANY OTHER SOURCE; SCREENING AND INTERPRETATION		\$32.16	7/1/2021	12/31/2382
88160	CYTOPATHOLOGY, ANY OTHER SOURCE; SCREENING AND INTERPRETATION	26	\$13.64	7/1/2021	12/31/2382
88160	CYTOPATHOLOGY, ANY OTHER SOURCE; SCREENING AND INTERPRETATION	59	\$32.16	7/1/2021	12/31/2382
88160	CYTOPATHOLOGY, ANY OTHER SOURCE; SCREENING AND INTERPRETATION	L1	\$32.16	7/1/2021	12/31/2382
88160	CYTOPATHOLOGY, ANY OTHER SOURCE; SCREENING AND INTERPRETATION	TC	\$6.13	7/1/2021	12/31/2382
88161	CYTOPATHOLOGY, ANY OTHER SOURCE; PREPARATION, SCREENING AND INTERPRETATION		\$19.83	7/1/2021	12/31/2382
88161	CYTOPATHOLOGY, ANY OTHER SOURCE; PREPARATION, SCREENING AND INTERPRETATION	26	\$20.96	7/1/2021	12/31/2382
88161	CYTOPATHOLOGY, ANY OTHER SOURCE; PREPARATION, SCREENING AND INTERPRETATION	59	\$19.83	7/1/2021	12/31/2382
88161	CYTOPATHOLOGY, ANY OTHER SOURCE; PREPARATION, SCREENING AND INTERPRETATION	91	\$19.83	7/1/2021	12/31/2382
88161	CYTOPATHOLOGY, ANY OTHER SOURCE; PREPARATION, SCREENING AND INTERPRETATION	L1	\$19.83	7/1/2021	12/31/2382
88161	CYTOPATHOLOGY, ANY OTHER SOURCE; PREPARATION, SCREENING AND INTERPRETATION	TC	\$7.19	7/1/2021	12/31/2382
88161	CYTOPATHOLOGY, ANY OTHER SOURCE; PREPARATION, SCREENING AND INTERPRETATION	XU	\$19.83	7/1/2021	12/31/2382
88162	CYTOPATHOLOGY, ANY OTHER SOURCE; EXTENDED STUDY INVOLVING OVER 5 SLIDES AND/OR MULTIPLE STAINS		\$57.44	7/1/2021	12/31/2382
88162	CYTOPATHOLOGY, ANY OTHER SOURCE; EXTENDED STUDY INVOLVING OVER 5 SLIDES AND/OR MULTIPLE STAINS	26	\$43.22	7/1/2021	12/31/2382
88162	CYTOPATHOLOGY, ANY OTHER SOURCE; EXTENDED STUDY INVOLVING OVER 5 SLIDES AND/OR MULTIPLE STAINS	L1	\$57.44	7/1/2021	12/31/2382
88162	CYTOPATHOLOGY, ANY OTHER SOURCE; EXTENDED STUDY INVOLVING OVER 5 SLIDES AND/OR MULTIPLE STAINS	TC	\$14.21	7/1/2021	12/31/2382
88164	CYTOPATHOLOGY, SLIDES, CERVICAL OR VAGINAL (THE BETHESDA SYSTEM); MANUAL SCREENING UNDER PHYSICIAN SUPERVISION	L1	\$16.62	7/1/2021	12/31/2382
88165	CYTOPATHOLOGY, SLIDES, CERVICAL OR VAGINAL; WITH MANUAL SCREENING AND RESCREENING UNDER PHYSICIAN SUPERVISION	L1	\$16.62	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
88166	CYTOPATHOLOGY, SLIDES, CERVICAL OR VAGINAL; WITH MANUAL SCREENING AND COMPUTER-ASSISTED RESCREENING UNDER	L1	\$16.62	7/1/2021	12/31/2382
88167	CYTOPATHOLOGY, SLIDES, CERVICAL OR VAGINAL (THE BETHESDA SYSTEM); WITH MANUAL SCREENING AND COMPUTER RESCREEN	L1	\$16.62	7/1/2021	12/31/2382
88170	FINE NEEDLE ASPIRATION WITH OR WITHOUT PREPARATION OF SMEARS; SUPERFICIAL TISSUE (EG, THYROID, BREAST, PROSTAT		\$56.97	7/1/2021	12/31/2382
88170	FINE NEEDLE ASPIRATION WITH OR WITHOUT PREPARATION OF SMEARS; SUPERFICIAL TISSUE (EG, THYROID, BREAST, PROSTAT	26	\$38.73	7/1/2021	12/31/2382
88170	FINE NEEDLE ASPIRATION WITH OR WITHOUT PREPARATION OF SMEARS; SUPERFICIAL TISSUE (EG, THYROID, BREAST, PROSTAT	TC	\$18.25	7/1/2021	12/31/2382
88171	FINE NEEDLE ASPIRATION WITH OR WITHOUT PREPARATION OF SMEARS; DEEP TISSUE UNDER RADIOLOGIC GUIDANCE		\$46.45	7/1/2021	12/31/2382
88171	FINE NEEDLE ASPIRATION WITH OR WITHOUT PREPARATION OF SMEARS; DEEP TISSUE UNDER RADIOLOGIC GUIDANCE	26	\$29.84	7/1/2021	12/31/2382
88171	FINE NEEDLE ASPIRATION WITH OR WITHOUT PREPARATION OF SMEARS; DEEP TISSUE UNDER RADIOLOGIC GUIDANCE	TC	\$24.22	7/1/2021	12/31/2382
88172	EVALUATION OF FINE NEEDLE ASPIRATE WITH OR WITHOUT PREPARATION OF SMEARS; IMMEDIATE CYTOHISTOLOGIC STUDY TO DE		\$23.13	7/1/2021	12/31/2382
88172	EVALUATION OF FINE NEEDLE ASPIRATE WITH OR WITHOUT PREPARATION OF SMEARS; IMMEDIATE CYTOHISTOLOGIC STUDY TO DE	26	\$28.21	7/1/2021	12/31/2382
88172	EVALUATION OF FINE NEEDLE ASPIRATE WITH OR WITHOUT PREPARATION OF SMEARS; IMMEDIATE CYTOHISTOLOGIC STUDY TO DE	59	\$23.13	7/1/2021	12/31/2382
88172	EVALUATION OF FINE NEEDLE ASPIRATE WITH OR WITHOUT PREPARATION OF SMEARS; IMMEDIATE CYTOHISTOLOGIC STUDY TO DE	91	\$23.13	7/1/2021	12/31/2382
88172	EVALUATION OF FINE NEEDLE ASPIRATE WITH OR WITHOUT PREPARATION OF SMEARS; IMMEDIATE CYTOHISTOLOGIC STUDY TO DE	L1	\$23.13	7/1/2021	12/31/2382
88172	EVALUATION OF FINE NEEDLE ASPIRATE WITH OR WITHOUT PREPARATION OF SMEARS; IMMEDIATE CYTOHISTOLOGIC STUDY TO DE	TC	\$12.81	7/1/2021	12/31/2382
88173	EVALUATION OF FINE NEEDLE ASPIRATE WITH OR WITHOUT PREPARATION OF SMEARS; INTERPRETATION AND REPORT		\$51.26	7/1/2021	12/31/2382
88173	EVALUATION OF FINE NEEDLE ASPIRATE WITH OR WITHOUT PREPARATION OF SMEARS; INTERPRETATION AND REPORT	26	\$99.38	7/1/2021	12/31/2382
88173	EVALUATION OF FINE NEEDLE ASPIRATE WITH OR WITHOUT PREPARATION OF SMEARS; INTERPRETATION AND REPORT	59	\$51.26	7/1/2021	12/31/2382
88173	EVALUATION OF FINE NEEDLE ASPIRATE WITH OR WITHOUT PREPARATION OF SMEARS; INTERPRETATION AND REPORT	91	\$51.26	7/1/2021	12/31/2382
88173	EVALUATION OF FINE NEEDLE ASPIRATE WITH OR WITHOUT PREPARATION OF SMEARS; INTERPRETATION AND REPORT	L1	\$51.26	7/1/2021	12/31/2382
88173	EVALUATION OF FINE NEEDLE ASPIRATE WITH OR WITHOUT PREPARATION OF SMEARS; INTERPRETATION AND REPORT	TC	\$15.63	7/1/2021	12/31/2382
88174	CYTOPATHOLOGY, CERVICAL OR VAGINAL (ANY REPORTING SYSTEM), COLLECTED IN PRESERVATIVE FLUID, AUTOMATED THIN LAY	L1	\$32.49	7/1/2021	12/31/2382
88175	CYTOPATHOLOGY, CERVICAL OR VAGINAL (ANY REPORTING SYSTEM) COLLECTED IN PRESERVATIVE FLUID, WITH SCREENING BY AUT	91	\$38.47	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
88175	CYTOPATHOLOGY,CERVICAL OR VAGINAL(ANY REPORTING SYSTEM) COLLECTED IN PRESERVATIVE FLUID, WITH SCREENING BY AUT	L1	\$38.47	7/1/2021	12/31/2382
88177	CYTOPATHOLOGY, EVALUATION OF FINE NEEDLE ASPIRATE; IMMEDIATE CYTOHISTOLOGIC STUDY TO DETERMINE	L1	\$0.00	7/1/2021	12/31/2382
88180	FLOW CYTOMETRY; EACH CELL SURFACE MARKER		\$61.63	7/1/2021	12/31/2382
88180	FLOW CYTOMETRY; EACH CELL SURFACE MARKER	26	\$22.32	7/1/2021	12/31/2382
88180	FLOW CYTOMETRY; EACH CELL SURFACE MARKER	91	\$61.63	7/1/2021	12/31/2382
88180	FLOW CYTOMETRY; EACH CELL SURFACE MARKER	TC	\$6.13	7/1/2021	12/31/2382
88182	FLOW CYTOMETRY; CELL CYCLE OR DNA ANALYSIS		\$61.82	7/1/2021	12/31/2382
88182	FLOW CYTOMETRY; CELL CYCLE OR DNA ANALYSIS	26	\$44.98	7/1/2021	12/31/2382
88182	FLOW CYTOMETRY; CELL CYCLE OR DNA ANALYSIS	L1	\$61.82	7/1/2021	12/31/2382
88182	FLOW CYTOMETRY; CELL CYCLE OR DNA ANALYSIS	TC	\$16.84	7/1/2021	12/31/2382
88184	FLOW CYTOMETRY, CELL SURFACE, CYTOPLASMIC, OR NUCLEAR MARKER, TECHNICAL COMPONENT ONLY; FIRST MARKER		\$58.63	7/1/2021	12/31/2382
88184	FLOW CYTOMETRY, CELL SURFACE, CYTOPLASMIC, OR NUCLEAR MARKER, TECHNICAL COMPONENT ONLY; FIRST MARKER	59	\$58.63	7/1/2021	12/31/2382
88184	FLOW CYTOMETRY, CELL SURFACE, CYTOPLASMIC, OR NUCLEAR MARKER, TECHNICAL COMPONENT ONLY; FIRST MARKER	L1	\$58.63	7/1/2021	12/31/2382
88185	FLOW CYTOMETRY, CELL SURFACE, CYTOPLASMIC, OR NUCLEAR MARKER, TECHNICAL COMPONENT ONLY; EACH ADDITIONAL MARKER		\$28.83	7/1/2021	12/31/2382
88185	FLOW CYTOMETRY, CELL SURFACE, CYTOPLASMIC, OR NUCLEAR MARKER, TECHNICAL COMPONENT ONLY; EACH ADDITIONAL MARKER	59	\$28.83	7/1/2021	12/31/2382
88185	FLOW CYTOMETRY, CELL SURFACE, CYTOPLASMIC, OR NUCLEAR MARKER, TECHNICAL COMPONENT ONLY; EACH ADDITIONAL MARKER	91	\$28.83	7/1/2021	12/31/2382
88185	FLOW CYTOMETRY, CELL SURFACE, CYTOPLASMIC, OR NUCLEAR MARKER, TECHNICAL COMPONENT ONLY; EACH ADDITIONAL MARKER	L1	\$28.83	7/1/2021	12/31/2382
88187	FLOW CYTOMETRY, INTERPRETATION; 2 TO 8 MARKERS		\$79.96	7/1/2021	12/31/2382
88187	FLOW CYTOMETRY, INTERPRETATION; 2 TO 8 MARKERS	L1	\$79.96	7/1/2021	12/31/2382
88188	FLOW CYTOMETRY, INTERPRETATION; 9 TO 15 MARKERS		\$99.75	7/1/2021	12/31/2382
88188	FLOW CYTOMETRY, INTERPRETATION; 9 TO 15 MARKERS	L1	\$99.75	7/1/2021	12/31/2382
88189	FLOW CYTOMETRY, INTERPRETATION; 16 OR MORE MARKERS		\$131.40	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
88189	FLOW CYTOMETRY, INTERPRETATION; 16 OR MORE MARKERS	L1	\$131.40	7/1/2021	12/31/2382
88199	UNLISTED CYTOPATHOLOGY PROCEDURE	L1	\$0.00	7/1/2021	12/31/2382
88230	TISSUE CULTURE FOR CHROMOSOME ANALYSIS; LYMPHOCYTE	L1	\$183.33	7/1/2021	12/31/2382
88233	TISSUE CULTURE FOR CHROMOSOME ANALYSIS; SKIN OR OTHER SOLID TISSUE BIOPSY	L1	\$221.46	7/1/2021	12/31/2382
88235	TISSUE CULTURE FOR CHROMOSOME ANALYSIS; AMNIOTIC FLUID OR CHORIONIC VILLUS CELLS	L1	\$231.71	7/1/2021	12/31/2382
88237	TISSUE CULTURE FOR CHROMOSOME ANALYSIS; BONE MARROW (MYELOID) CELLS	L1	\$196.50	7/1/2021	12/31/2382
88239	TISSUE CULTURE FOR CHROMOSOME ANALYSIS; OTHER TISSUE	L1	\$232.14	7/1/2021	12/31/2382
88240	CRYOPRESERVATION, FREEZING AND STORAGE OF CELLS, EACH CELL LINE	L1	\$15.89	7/1/2021	12/31/2382
88241	THAWING AND EXPANSION OF FROZEN CELLS, EACH ALIQUOT	L1	\$15.89	7/1/2021	12/31/2382
88245	CHROMOSOME ANALYSIS FOR BREAKAGE SYNDROMES; SCORE 25 CELLS (SCE STUDY), COUNT 5 CELLS, 1 KARYOTYPE, WITH BANDI	L1	\$234.24	7/1/2021	12/31/2382
88248	CHROMOSOME ANALYSIS FOR BREAKAGE SYNDROMES; SCORE 100 CELLS, COUNT 20 CELLS, 2 KARYOTYPES, WITH BANDING (EG, A	L1	\$272.51	7/1/2021	12/31/2382
88249	CHROMOSOME ANALYSIS FOR BREAKAGE SYNDROMES; SCORE 100 CELLS, CLASTOGEN STRESS		\$272.51	7/1/2021	12/31/2382
88249	CHROMOSOME ANALYSIS FOR BREAKAGE SYNDROMES; SCORE 100 CELLS, CLASTOGEN STRESS	L1	\$272.51	7/1/2021	12/31/2382
88261	CHROMOSOME ANALYSIS; COUNT 5 CELLS, 1 KARYOTYPE, WITH BANDING	L1	\$278.11	7/1/2021	12/31/2382
88262	CHROMOSOME ANALYSIS; COUNT 15-20 CELLS, 2 KARYOTYPES, WITH BANDING	L1	\$196.13	7/1/2021	12/31/2382
88263	CHROMOSOME ANALYSIS; COUNT 45 CELLS FOR MOSAICISM, 2 KARYOTYPES, WITH BANDING	L1	\$236.48	7/1/2021	12/31/2382
88264	CHROMOSOME ANALYSIS; ANALYZE 20-25 CELLS	L1	\$196.13	7/1/2021	12/31/2382
88267	CHROMOSOME ANALYSIS, AMNIOTIC FLUID OR CHORIONIC VILLUS, COUNT 15 CELLS, 1 KARYOTYPE, WITH BANDING		\$282.88	7/1/2021	12/31/2382
88267	CHROMOSOME ANALYSIS, AMNIOTIC FLUID OR CHORIONIC VILLUS, COUNT 15 CELLS, 1 KARYOTYPE, WITH BANDING	L1	\$282.88	7/1/2021	12/31/2382
88269	CHROMOSOME ANALYSIS, IN SITU FOR AMNIOTIC FLUID CELLS, COUNT CELLS FROM 6-12 COLONIES, 1 KARYOTYPE, WITH BANDI	L1	\$261.72	7/1/2021	12/31/2382
88271	MOLECULAR CYTOGENETICS; DNA PROBE, EACH (EG, FISH)	59	\$33.70	7/1/2021	12/31/2382
88271	MOLECULAR CYTOGENETICS; DNA PROBE, EACH (EG, FISH)	90	\$33.70	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
88271	MOLECULAR CYTOGENETICS; DNA PROBE, EACH (EG, FISH)	91	\$33.70	7/1/2021	12/31/2382
88271	MOLECULAR CYTOGENETICS; DNA PROBE, EACH (EG, FISH)	L1	\$33.70	7/1/2021	12/31/2382
88271	MOLECULAR CYTOGENETICS; DNA PROBE, EACH (EG, FISH)	XU	\$33.70	7/1/2021	12/31/2382
88272	MOLECULAR CYTOGENETICS; CHROMOSOMAL IN SITU HYBRIDIZATION, ANALYZE 3-5 CELLS (EG, FOR DERIVATIVES AND MARKERS)	L1	\$34.16	7/1/2021	12/31/2382
88273	MOLECULAR CYTOGENETICS;CHROMOSOMAL IN SITU HYBRIDIZATION, ANALYZE 10-30 CELLS	L1	\$34.16	7/1/2021	12/31/2382
88274	MOLECULAR CYTOGENETICS; INTERPHASE IN SITU HYBRIDIZATION, ANALYZE 25-99 CELLS	59	\$34.16	7/1/2021	12/31/2382
88274	MOLECULAR CYTOGENETICS; INTERPHASE IN SITU HYBRIDIZATION, ANALYZE 25-99 CELLS	L1	\$34.16	7/1/2021	12/31/2382
88274	MOLECULAR CYTOGENETICS; INTERPHASE IN SITU HYBRIDIZATION, ANALYZE 25-99 CELLS	QW	\$24.74	7/1/2021	12/31/2382
88275	MOLECULAR CYTOGENETICS; INTERPHASE IN SITU HYBRIDIZATION, ANALYZE 100-300 CELLS	59	\$34.16	7/1/2021	12/31/2382
88275	MOLECULAR CYTOGENETICS; INTERPHASE IN SITU HYBRIDIZATION, ANALYZE 100-300 CELLS	90	\$34.16	7/1/2021	12/31/2382
88275	MOLECULAR CYTOGENETICS; INTERPHASE IN SITU HYBRIDIZATION, ANALYZE 100-300 CELLS	91	\$34.16	7/1/2021	12/31/2382
88275	MOLECULAR CYTOGENETICS; INTERPHASE IN SITU HYBRIDIZATION, ANALYZE 100-300 CELLS	L1	\$34.16	7/1/2021	12/31/2382
88275	MOLECULAR CYTOGENETICS; INTERPHASE IN SITU HYBRIDIZATION, ANALYZE 100-300 CELLS	XU	\$34.16	7/1/2021	12/31/2382
88280	CHROMOSOME ANALYSIS; ADDITIONAL KARYOTYPES, EACH STUDY	L1	\$39.51	7/1/2021	12/31/2382
88283	CHROMOSOME ANALYSIS; ADDITIONAL SPECIALIZED BANDING TECHNIQUE (EG, NOR, C-BANDING)	L1	\$44.08	7/1/2021	12/31/2382
88285	CHROMOSOME ANALYSIS; ADDITIONAL CELLS COUNTED, EACH STUDY	L1	\$29.89	7/1/2021	12/31/2382
88289	CHROMOSOME ANALYSIS; ADDITIONAL HIGH RESOLUTION STUDY	L1	\$44.08	7/1/2021	12/31/2382
88291	CYTOGENETICS AND MOLECULAR CYTOGENETICS, INTERPRETATION AND REPORT	L1	\$6.24	7/1/2021	12/31/2382
88299	UNLISTED CYTOGENETIC STUDY	L1	\$0.00	7/1/2021	12/31/2382
88300	LEVEL I - SURGICAL PATHOLOGY, GROSS EXAMINATION ONLY		\$10.82	7/1/2021	12/31/2382
88300	LEVEL I - SURGICAL PATHOLOGY, GROSS EXAMINATION ONLY	26	\$7.20	7/1/2021	12/31/2382
88300	LEVEL I - SURGICAL PATHOLOGY, GROSS EXAMINATION ONLY	59	\$10.82	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
88300	LEVEL I - SURGICAL PATHOLOGY, GROSS EXAMINATION ONLY	L1	\$10.82	7/1/2021	12/31/2382
88300	LEVEL I - SURGICAL PATHOLOGY, GROSS EXAMINATION ONLY	TC	\$3.51	7/1/2021	12/31/2382
88302	LEVEL II - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION APPENDIX, INCIDENTAL FALLOPIAN TUBE, STERILIZ		\$42.99	7/1/2021	12/31/2382
88302	LEVEL II - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION APPENDIX, INCIDENTAL FALLOPIAN TUBE, STERILIZ	26	\$16.67	7/1/2021	12/31/2382
88302	LEVEL II - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION APPENDIX, INCIDENTAL FALLOPIAN TUBE, STERILIZ	59	\$42.99	7/1/2021	12/31/2382
88302	LEVEL II - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION APPENDIX, INCIDENTAL FALLOPIAN TUBE, STERILIZ	L1	\$42.99	7/1/2021	12/31/2382
88302	LEVEL II - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION APPENDIX, INCIDENTAL FALLOPIAN TUBE, STERILIZ	TC	\$8.59	7/1/2021	12/31/2382
88304	LEVEL III - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION ABORTION, INDUCED ABSCESS ANEURYSM - ARTERIA		\$42.05	7/1/2021	12/31/2382
88304	LEVEL III - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION ABORTION, INDUCED ABSCESS ANEURYSM - ARTERIA	26	\$25.02	7/1/2021	12/31/2382
88304	LEVEL III - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION ABORTION, INDUCED ABSCESS ANEURYSM - ARTERIA	59	\$42.05	7/1/2021	12/31/2382
88304	LEVEL III - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION ABORTION, INDUCED ABSCESS ANEURYSM - ARTERIA	91	\$42.05	7/1/2021	12/31/2382
88304	LEVEL III - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION ABORTION, INDUCED ABSCESS ANEURYSM - ARTERIA	L1	\$42.05	7/1/2021	12/31/2382
88304	LEVEL III - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION ABORTION, INDUCED ABSCESS ANEURYSM - ARTERIA	TC	\$12.10	7/1/2021	12/31/2382
88305	LEVEL IV - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION ABORTION - SPONTANEOUS/MISSED ARTERY, BIOPSY		\$66.99	7/1/2021	12/31/2382
88305	LEVEL IV - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION ABORTION - SPONTANEOUS/MISSED ARTERY, BIOPSY	26	\$43.61	7/1/2021	12/31/2382
88305	LEVEL IV - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION ABORTION - SPONTANEOUS/MISSED ARTERY, BIOPSY	59	\$66.99	7/1/2021	12/31/2382
88305	LEVEL IV - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION ABORTION - SPONTANEOUS/MISSED ARTERY, BIOPSY	91	\$66.99	7/1/2021	12/31/2382
88305	LEVEL IV - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION ABORTION - SPONTANEOUS/MISSED ARTERY, BIOPSY	L1	\$66.99	7/1/2021	12/31/2382
88305	LEVEL IV - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION ABORTION - SPONTANEOUS/MISSED ARTERY, BIOPSY	TC	\$19.29	7/1/2021	12/31/2382
88307	LEVEL V - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION ADRENAL, RESECTION BONE - BIOPSY/CURETTINGS BO		\$76.80	7/1/2021	12/31/2382
88307	LEVEL V - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION ADRENAL, RESECTION BONE - BIOPSY/CURETTINGS BO	26	\$75.97	7/1/2021	12/31/2382
88307	LEVEL V - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION ADRENAL, RESECTION BONE - BIOPSY/CURETTINGS BO	59	\$76.80	7/1/2021	12/31/2382

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88307	LEVEL V - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION ADRENAL, RESECTION BONE - BIOPSY/CURETTINGS BO	91	\$76.80	7/1/2021	12/31/2382
88307	LEVEL V - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION ADRENAL, RESECTION BONE - BIOPSY/CURETTINGS BO	L1	\$76.80	7/1/2021	12/31/2382
88307	LEVEL V - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION ADRENAL, RESECTION BONE - BIOPSY/CURETTINGS BO	TC	\$28.25	7/1/2021	12/31/2382
88309	LEVEL VI - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION BONE RESECTION BREAST, MASTECTOMY - WITH REGI		\$110.24	7/1/2021	12/31/2382
88309	LEVEL VI - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION BONE RESECTION BREAST, MASTECTOMY - WITH REGI	26	\$89.85	7/1/2021	12/31/2382
88309	LEVEL VI - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION BONE RESECTION BREAST, MASTECTOMY - WITH REGI	59	\$110.24	7/1/2021	12/31/2382
88309	LEVEL VI - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION BONE RESECTION BREAST, MASTECTOMY - WITH REGI	L1	\$110.24	7/1/2021	12/31/2382
88309	LEVEL VI - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION BONE RESECTION BREAST, MASTECTOMY - WITH REGI	TC	\$34.91	7/1/2021	12/31/2382
88311	DECALCIFICATION PROCEDURE (LIST SEPARATELY IN ADDITION TO CODE FOR SURGICAL PATHOLOGY EXAMINATION)		\$15.53	7/1/2021	12/31/2382
88311	DECALCIFICATION PROCEDURE (LIST SEPARATELY IN ADDITION TO CODE FOR SURGICAL PATHOLOGY EXAMINATION)	26	\$12.65	7/1/2021	12/31/2382
88311	DECALCIFICATION PROCEDURE (LIST SEPARATELY IN ADDITION TO CODE FOR SURGICAL PATHOLOGY EXAMINATION)	59	\$15.53	7/1/2021	12/31/2382
88311	DECALCIFICATION PROCEDURE (LIST SEPARATELY IN ADDITION TO CODE FOR SURGICAL PATHOLOGY EXAMINATION)	91	\$15.53	7/1/2021	12/31/2382
88311	DECALCIFICATION PROCEDURE (LIST SEPARATELY IN ADDITION TO CODE FOR SURGICAL PATHOLOGY EXAMINATION)	L1	\$15.53	7/1/2021	12/31/2382
88311	DECALCIFICATION PROCEDURE (LIST SEPARATELY IN ADDITION TO CODE FOR SURGICAL PATHOLOGY EXAMINATION)	TC	\$3.51	7/1/2021	12/31/2382
88312	SPECIAL STAINS (LIST SEPARATELY IN ADDITION TO CODE FOR SURGICAL PATHOLOGY EXAMINATION); GROUP I FOR MICROORGA		\$15.54	7/1/2021	12/31/2382
88312	SPECIAL STAINS (LIST SEPARATELY IN ADDITION TO CODE FOR SURGICAL PATHOLOGY EXAMINATION); GROUP I FOR MICROORGA	26	\$13.45	7/1/2021	12/31/2382
88312	SPECIAL STAINS (LIST SEPARATELY IN ADDITION TO CODE FOR SURGICAL PATHOLOGY EXAMINATION); GROUP I FOR MICROORGA	59	\$15.54	7/1/2021	12/31/2382
88312	SPECIAL STAINS (LIST SEPARATELY IN ADDITION TO CODE FOR SURGICAL PATHOLOGY EXAMINATION); GROUP I FOR MICROORGA	91	\$15.54	7/1/2021	12/31/2382
88312	SPECIAL STAINS (LIST SEPARATELY IN ADDITION TO CODE FOR SURGICAL PATHOLOGY EXAMINATION); GROUP I FOR MICROORGA	L1	\$15.54	7/1/2021	12/31/2382
88312	SPECIAL STAINS (LIST SEPARATELY IN ADDITION TO CODE FOR SURGICAL PATHOLOGY EXAMINATION); GROUP I FOR MICROORGA	TC	\$4.21	7/1/2021	12/31/2382
88313	SPECIAL STAINS (LIST SEPARATELY IN ADDITION TO CODE FOR SURGICAL PATHOLOGY EXAMINATION); GROUP II, ALL OTHER,		\$12.51	7/1/2021	12/31/2382
88313	SPECIAL STAINS (LIST SEPARATELY IN ADDITION TO CODE FOR SURGICAL PATHOLOGY EXAMINATION); GROUP II, ALL OTHER,	26	\$6.16	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
88313	SPECIAL STAINS (LIST SEPARATELY IN ADDITION TO CODE FOR SURGICAL PATHOLOGY EXAMINATION); GROUP II, ALL OTHER,	59	\$12.51	7/1/2021	12/31/2382
88313	SPECIAL STAINS (LIST SEPARATELY IN ADDITION TO CODE FOR SURGICAL PATHOLOGY EXAMINATION); GROUP II, ALL OTHER,	91	\$12.51	7/1/2021	12/31/2382
88313	SPECIAL STAINS (LIST SEPARATELY IN ADDITION TO CODE FOR SURGICAL PATHOLOGY EXAMINATION); GROUP II, ALL OTHER,	L1	\$12.51	7/1/2021	12/31/2382
88313	SPECIAL STAINS (LIST SEPARATELY IN ADDITION TO CODE FOR SURGICAL PATHOLOGY EXAMINATION); GROUP II, ALL OTHER,	TC	\$3.51	7/1/2021	12/31/2382
88314	SPECIAL STAINS (LIST SEPARATELY IN ADDITION TO CODE FOR SURGICAL PATHOLOGY EXAMINATION); HISTOCHEMICAL STAININ		\$32.76	7/1/2021	12/31/2382
88314	SPECIAL STAINS (LIST SEPARATELY IN ADDITION TO CODE FOR SURGICAL PATHOLOGY EXAMINATION); HISTOCHEMICAL STAININ	26	\$29.50	7/1/2021	12/31/2382
88314	SPECIAL STAINS (LIST SEPARATELY IN ADDITION TO CODE FOR SURGICAL PATHOLOGY EXAMINATION); HISTOCHEMICAL STAININ	91	\$32.76	7/1/2021	12/31/2382
88314	SPECIAL STAINS (LIST SEPARATELY IN ADDITION TO CODE FOR SURGICAL PATHOLOGY EXAMINATION); HISTOCHEMICAL STAININ	L1	\$32.76	7/1/2021	12/31/2382
88314	SPECIAL STAINS (LIST SEPARATELY IN ADDITION TO CODE FOR SURGICAL PATHOLOGY EXAMINATION); HISTOCHEMICAL STAININ	TC	\$10.00	7/1/2021	12/31/2382
88318	DETERMINATIVE HISTOCHEMISTRY TO IDENTIFY CHEMICAL COMPONENTS (EG, COPPER, ZINC)		\$23.95	7/1/2021	12/31/2382
88318	DETERMINATIVE HISTOCHEMISTRY TO IDENTIFY CHEMICAL COMPONENTS (EG, COPPER, ZINC)	26	\$19.74	7/1/2021	12/31/2382
88318	DETERMINATIVE HISTOCHEMISTRY TO IDENTIFY CHEMICAL COMPONENTS (EG, COPPER, ZINC)	TC	\$4.21	7/1/2021	12/31/2382
88319	DETERMINATIVE HISTOCHEMISTRY OR CYTOCHEMISTRY TO IDENTIFY ENZYME CONSTITUENTS, EACH		\$37.77	7/1/2021	12/31/2382
88319	DETERMINATIVE HISTOCHEMISTRY OR CYTOCHEMISTRY TO IDENTIFY ENZYME CONSTITUENTS, EACH	26	\$29.18	7/1/2021	12/31/2382
88319	DETERMINATIVE HISTOCHEMISTRY OR CYTOCHEMISTRY TO IDENTIFY ENZYME CONSTITUENTS, EACH	L1	\$37.77	7/1/2021	12/31/2382
88319	DETERMINATIVE HISTOCHEMISTRY OR CYTOCHEMISTRY TO IDENTIFY ENZYME CONSTITUENTS, EACH	TC	\$8.59	7/1/2021	12/31/2382
88321	CONSULTATION AND REPORT ON REFERRED SLIDES PREPARED ELSEWHERE		\$62.75	7/1/2021	12/31/2382
88321	CONSULTATION AND REPORT ON REFERRED SLIDES PREPARED ELSEWHERE	L1	\$62.75	7/1/2021	12/31/2382
88323	CONSULTATION AND REPORT ON REFERRED MATERIAL REQUIRING PREPARATION OF SLIDES		\$76.30	7/1/2021	12/31/2382
88323	CONSULTATION AND REPORT ON REFERRED MATERIAL REQUIRING PREPARATION OF SLIDES	26	\$64.18	7/1/2021	12/31/2382
88323	CONSULTATION AND REPORT ON REFERRED MATERIAL REQUIRING PREPARATION OF SLIDES	L1	\$76.30	7/1/2021	12/31/2382
88323	CONSULTATION AND REPORT ON REFERRED MATERIAL REQUIRING PREPARATION OF SLIDES	TC	\$12.10	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
88325	CONSULTATION, COMPREHENSIVE, WITH REVIEW OF RECORDS AND SPECIMENS, WITH REPORT ON REFERRED MATERIAL		\$98.86	7/1/2021	12/31/2382
88325	CONSULTATION, COMPREHENSIVE, WITH REVIEW OF RECORDS AND SPECIMENS, WITH REPORT ON REFERRED MATERIAL	L1	\$98.86	7/1/2021	12/31/2382
88329	PATHOLOGY CONSULTATION DURING SURGERY;		\$38.28	7/1/2021	12/31/2382
88329	PATHOLOGY CONSULTATION DURING SURGERY;	91	\$38.28	7/1/2021	12/31/2382
88329	PATHOLOGY CONSULTATION DURING SURGERY;	L1	\$38.28	7/1/2021	12/31/2382
88331	PATHOLOGY CONSULTATION DURING SURGERY; WITH FROZEN SECTION(S), SINGLE SPECIMEN		\$59.70	7/1/2021	12/31/2382
88331	PATHOLOGY CONSULTATION DURING SURGERY; WITH FROZEN SECTION(S), SINGLE SPECIMEN	26	\$32.69	7/1/2021	12/31/2382
88331	PATHOLOGY CONSULTATION DURING SURGERY; WITH FROZEN SECTION(S), SINGLE SPECIMEN	59	\$59.70	7/1/2021	12/31/2382
88331	PATHOLOGY CONSULTATION DURING SURGERY; WITH FROZEN SECTION(S), SINGLE SPECIMEN	91	\$59.70	7/1/2021	12/31/2382
88331	PATHOLOGY CONSULTATION DURING SURGERY; WITH FROZEN SECTION(S), SINGLE SPECIMEN	L1	\$59.70	7/1/2021	12/31/2382
88331	PATHOLOGY CONSULTATION DURING SURGERY; WITH FROZEN SECTION(S), SINGLE SPECIMEN	TC	\$20.70	7/1/2021	12/31/2382
88332	PATHOLOGY CONSULTATION DURING SURGERY; EACH ADDITIONAL TISSUE BLOCK WITH FROZEN SECTION(S)		\$42.37	7/1/2021	12/31/2382
88332	PATHOLOGY CONSULTATION DURING SURGERY; EACH ADDITIONAL TISSUE BLOCK WITH FROZEN SECTION(S)	26	\$14.81	7/1/2021	12/31/2382
88332	PATHOLOGY CONSULTATION DURING SURGERY; EACH ADDITIONAL TISSUE BLOCK WITH FROZEN SECTION(S)	L1	\$42.37	7/1/2021	12/31/2382
88332	PATHOLOGY CONSULTATION DURING SURGERY; EACH ADDITIONAL TISSUE BLOCK WITH FROZEN SECTION(S)	TC	\$10.00	7/1/2021	12/31/2382
88333	PATHOLOGY CONSULTATION DURING SURGERY; CYTOLOGIC EXAMINATION (EG, TOUCH PREP, SQUASH PREP), INITIAL SITE		\$25.34	7/1/2021	12/31/2382
88333	PATHOLOGY CONSULTATION DURING SURGERY; CYTOLOGIC EXAMINATION (EG, TOUCH PREP, SQUASH PREP), INITIAL SITE	91	\$25.34	7/1/2021	12/31/2382
88333	PATHOLOGY CONSULTATION DURING SURGERY; CYTOLOGIC EXAMINATION (EG, TOUCH PREP, SQUASH PREP), INITIAL SITE	L1	\$25.34	7/1/2021	12/31/2382
88334	PATHOLOGY CONSULTATION DURING SURGERY; CYTOLOGIC EXAMINATION, EACH ADDITIONAL SITE		\$28.60	7/1/2021	12/31/2382
88334	PATHOLOGY CONSULTATION DURING SURGERY; CYTOLOGIC EXAMINATION, EACH ADDITIONAL SITE	L1	\$28.60	7/1/2021	12/31/2382
88341	IMMUNOHISTOCHEMISTRY OR IMMUNOCYTOCHEMISTRY, PER SPECIMEN; EACH ADDITIONAL SINGLE ANTIBODY STAIN		\$0.00	7/1/2021	12/31/2382
88342	IMMUNOCYTOCHEMISTRY (INCLUDING TISSUE IMMUNOPEROXIDASE), EACH ANTIBODY		\$54.42	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
88342	IMMUNOCYTOCHEMISTRY (INCLUDING TISSUE IMMUNOPEROXIDASE), EACH ANTIBODY	26	\$24.36	7/1/2021	12/31/2382
88342	IMMUNOCYTOCHEMISTRY (INCLUDING TISSUE IMMUNOPEROXIDASE), EACH ANTIBODY	59	\$54.42	7/1/2021	12/31/2382
88342	IMMUNOCYTOCHEMISTRY (INCLUDING TISSUE IMMUNOPEROXIDASE), EACH ANTIBODY	91	\$54.42	7/1/2021	12/31/2382
88342	IMMUNOCYTOCHEMISTRY (INCLUDING TISSUE IMMUNOPEROXIDASE), EACH ANTIBODY	TC	\$11.41	7/1/2021	12/31/2382
88346	IMMUNOFLUORESCENT STUDY, EACH ANTIBODY; DIRECT METHOD		\$52.65	7/1/2021	12/31/2382
88346	IMMUNOFLUORESCENT STUDY, EACH ANTIBODY; DIRECT METHOD	26	\$42.66	7/1/2021	12/31/2382
88346	IMMUNOFLUORESCENT STUDY, EACH ANTIBODY; DIRECT METHOD	91	\$52.65	7/1/2021	12/31/2382
88346	IMMUNOFLUORESCENT STUDY, EACH ANTIBODY; DIRECT METHOD	L1	\$52.65	7/1/2021	12/31/2382
88346	IMMUNOFLUORESCENT STUDY, EACH ANTIBODY; DIRECT METHOD	TC	\$10.00	7/1/2021	12/31/2382
88347	IMMUNOFLUORESCENT STUDY, EACH ANTIBODY; INDIRECT METHOD		\$47.03	7/1/2021	12/31/2382
88347	IMMUNOFLUORESCENT STUDY, EACH ANTIBODY; INDIRECT METHOD	26	\$37.04	7/1/2021	12/31/2382
88347	IMMUNOFLUORESCENT STUDY, EACH ANTIBODY; INDIRECT METHOD	L1	\$47.03	7/1/2021	12/31/2382
88347	IMMUNOFLUORESCENT STUDY, EACH ANTIBODY; INDIRECT METHOD	TC	\$10.00	7/1/2021	12/31/2382
88348	ELECTRON MICROSCOPY; DIAGNOSTIC		\$141.03	7/1/2021	12/31/2382
88348	ELECTRON MICROSCOPY; DIAGNOSTIC	26	\$81.12	7/1/2021	12/31/2382
88348	ELECTRON MICROSCOPY; DIAGNOSTIC	L1	\$141.03	7/1/2021	12/31/2382
88348	ELECTRON MICROSCOPY; DIAGNOSTIC	TC	\$41.05	7/1/2021	12/31/2382
88349	ELECTRON MICROSCOPY; SCANNING		\$86.64	7/1/2021	12/31/2382
88349	ELECTRON MICROSCOPY; SCANNING	26	\$124.46	7/1/2021	12/31/2382
88349	ELECTRON MICROSCOPY; SCANNING	L1	\$86.64	7/1/2021	12/31/2382
88349	ELECTRON MICROSCOPY; SCANNING	TC	\$28.95	7/1/2021	12/31/2382
88355	MORPHOMETRIC ANALYSIS; SKELETAL MUSCLE		\$133.00	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
88355	MORPHOMETRIC ANALYSIS; SKELETAL MUSCLE	26	\$101.94	7/1/2021	12/31/2382
88355	MORPHOMETRIC ANALYSIS; SKELETAL MUSCLE	L1	\$133.00	7/1/2021	12/31/2382
88355	MORPHOMETRIC ANALYSIS; SKELETAL MUSCLE	TC	\$31.06	7/1/2021	12/31/2382
88356	MORPHOMETRIC ANALYSIS; NERVE		\$210.27	7/1/2021	12/31/2382
88356	MORPHOMETRIC ANALYSIS; NERVE	26	\$162.54	7/1/2021	12/31/2382
88356	MORPHOMETRIC ANALYSIS; NERVE	L1	\$210.27	7/1/2021	12/31/2382
88356	MORPHOMETRIC ANALYSIS; NERVE	TC	\$47.73	7/1/2021	12/31/2382
88358	MORPHOMETRIC ANALYSIS; TUMOR		\$190.36	7/1/2021	12/31/2382
88358	MORPHOMETRIC ANALYSIS; TUMOR	26	\$146.50	7/1/2021	12/31/2382
88358	MORPHOMETRIC ANALYSIS; TUMOR	L1	\$190.36	7/1/2021	12/31/2382
88358	MORPHOMETRIC ANALYSIS; TUMOR	TC	\$43.87	7/1/2021	12/31/2382
88360	MORPHOMETRIC ANALYSIS, TUMOR IMMUNOHISTOCHEMISTRY, QUANTITATIVE OR SEMIQUANTITATIVE. EACH ANTIBODY; MANUAL		\$127.34	7/1/2021	12/31/2382
88360	MORPHOMETRIC ANALYSIS, TUMOR IMMUNOHISTOCHEMISTRY, QUANTITATIVE OR SEMIQUANTITATIVE. EACH ANTIBODY; MANUAL	26	\$127.34	7/1/2021	12/31/2382
88360	MORPHOMETRIC ANALYSIS, TUMOR IMMUNOHISTOCHEMISTRY, QUANTITATIVE OR SEMIQUANTITATIVE. EACH ANTIBODY; MANUAL	59	\$127.34	7/1/2021	12/31/2382
88360	MORPHOMETRIC ANALYSIS, TUMOR IMMUNOHISTOCHEMISTRY, QUANTITATIVE OR SEMIQUANTITATIVE. EACH ANTIBODY; MANUAL	91	\$127.34	7/1/2021	12/31/2382
88360	MORPHOMETRIC ANALYSIS, TUMOR IMMUNOHISTOCHEMISTRY, QUANTITATIVE OR SEMIQUANTITATIVE. EACH ANTIBODY; MANUAL	L1	\$127.34	7/1/2021	12/31/2382
88361	MORPHOMETRIC ANALYSIS; TUMOR IMMUNOHISTOCHEMISTRY, QUANTITATIVE OR SEMIQUANTITATIVE		\$163.35	7/1/2021	12/31/2382
88361	MORPHOMETRIC ANALYSIS; TUMOR IMMUNOHISTOCHEMISTRY, QUANTITATIVE OR SEMIQUANTITATIVE	91	\$163.35	7/1/2021	12/31/2382
88361	MORPHOMETRIC ANALYSIS; TUMOR IMMUNOHISTOCHEMISTRY, QUANTITATIVE OR SEMIQUANTITATIVE	L1	\$163.35	7/1/2021	12/31/2382
88362	NERVE TEASING PREPARATIONS		\$152.79	7/1/2021	12/31/2382
88362	NERVE TEASING PREPARATIONS	26	\$116.47	7/1/2021	12/31/2382
88362	NERVE TEASING PREPARATIONS	L1	\$152.79	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
88362	NERVE TEASING PREPARATIONS	TC	\$36.32	7/1/2021	12/31/2382
88363	EXAMINATION AND SELECTION OF RETRIEVED ARCHIVAL (IE, PREVIOUSLY DIAGNOSED) TISSUE(S) FOR MOLECULAR	L1	\$0.00	7/1/2021	12/31/2382
88365	TISSUE IN SITU HYBRIDIZATION, INTERPRETATION AND REPORT		\$61.73	7/1/2021	12/31/2382
88365	TISSUE IN SITU HYBRIDIZATION, INTERPRETATION AND REPORT	26	\$48.20	7/1/2021	12/31/2382
88365	TISSUE IN SITU HYBRIDIZATION, INTERPRETATION AND REPORT	91	\$61.73	7/1/2021	12/31/2382
88365	TISSUE IN SITU HYBRIDIZATION, INTERPRETATION AND REPORT	L1	\$61.73	7/1/2021	12/31/2382
88365	TISSUE IN SITU HYBRIDIZATION, INTERPRETATION AND REPORT	TC	\$13.51	7/1/2021	12/31/2382
88368	MORPHOMETRIC ANALYSIS, IN SITU HYBRIDIZATION, (QUANTITATIVE OR SEMI-QUANTITATIVE), EACH PROBE; MANUAL		\$248.35	7/1/2021	12/31/2382
88368	MORPHOMETRIC ANALYSIS, IN SITU HYBRIDIZATION, (QUANTITATIVE OR SEMI-QUANTITATIVE), EACH PROBE; MANUAL	26	\$1.94	7/1/2021	12/31/2382
88368	MORPHOMETRIC ANALYSIS, IN SITU HYBRIDIZATION, (QUANTITATIVE OR SEMI-QUANTITATIVE), EACH PROBE; MANUAL	L1	\$248.35	7/1/2021	12/31/2382
88368	MORPHOMETRIC ANALYSIS, IN SITU HYBRIDIZATION, (QUANTITATIVE OR SEMI-QUANTITATIVE), EACH PROBE; MANUAL	TC	\$5.28	7/1/2021	12/31/2382
88371	PROTEIN ANALYSIS OF TISSUE BY WESTERN BLOT, WITH INTERPRETATION AND REPORT;	L1	\$34.98	7/1/2021	12/31/2382
88372	PROTEIN ANALYSIS OF TISSUE BY WESTERN BLOT, WITH INTERPRETATION AND REPORT; IMMUNOLOGICAL PROBE FOR BAND IDENT	L1	\$35.81	7/1/2021	12/31/2382
88381	MICRODISSECTION (IE,SAMPLE PREPARATION OF MICROSCOPICALLY IDENTIFIED TARGET); MANUAL		\$222.01	7/1/2021	12/31/2382
88381	MICRODISSECTION (IE,SAMPLE PREPARATION OF MICROSCOPICALLY IDENTIFIED TARGET); MANUAL	L1	\$222.01	7/1/2021	12/31/2382
88385	ARRAY-BASED EVALUATION OF MULTIPLE MOLCULAR PROBES; 51 THROUGH 250 PROBES		\$399.14	7/1/2021	12/31/2382
88386	ARRAY-BASED EVALUATION OF MULTIPLE MOLCULAR PROBES; 251 THROUGH 500 PROBES		\$149.01	7/1/2021	12/31/2382
88399	UNLISTED SURGICAL PATHOLOGY PROCEDURE		\$0.00	7/1/2021	12/31/2382
88399	UNLISTED SURGICAL PATHOLOGY PROCEDURE	L1	\$0.00	7/1/2021	12/31/2382
88400	BILIRUBIN, TOTAL, TRANSCUTANEOUS		\$7.92	7/1/2021	12/31/2382
88720	BILIRUBIN, TOTAL, TRANSCUTANEOUS		\$8.25	7/1/2021	12/31/2382
88720	BILIRUBIN, TOTAL, TRANSCUTANEOUS	L1	\$8.25	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
88738	HEMOGLOBIN (HGB), QUANTITATIVE, TRANSCUTANEOS		\$8.10	7/1/2021	12/31/2382
88738	HEMOGLOBIN (HGB), QUANTITATIVE, TRANSCUTANEOS	L1	\$8.10	7/1/2021	12/31/2382
88740	HEMOGLOBIN, QUANTITATIVE, TRANSCUTANEOUS, PER DAY; CARBOXYHEMOGLOBIN		\$8.25	7/1/2021	12/31/2382
88740	HEMOGLOBIN, QUANTITATIVE, TRANSCUTANEOUS, PER DAY; CARBOXYHEMOGLOBIN	L1	\$8.25	7/1/2021	12/31/2382
88741	HEMOGLOBIN, QUANTITATIVE, TRANSCUTANEOUS, PER DAY; METHEMOGLOBIN		\$8.25	7/1/2021	12/31/2382
88741	HEMOGLOBIN, QUANTITATIVE, TRANSCUTANEOUS, PER DAY; METHEMOGLOBIN	L1	\$8.25	7/1/2021	12/31/2382
88749	UNLISTED IN VIVO (EG, TRANSCUTANEOUS) LABORATORY SERVICE	L1	\$0.00	7/1/2021	12/31/2382
89049	CAFFEINE HALOTHANE CONTRACTURE TEST (CHCT) FOR MALIGNANT HYPERTHERMIA SUSCEPTIBILITY, INCLUDING INTERPRETATION		\$116.70	7/1/2021	12/31/2382
89049	CAFFEINE HALOTHANE CONTRACTURE TEST (CHCT) FOR MALIGNANT HYPERTHERMIA SUSCEPTIBILITY, INCLUDING INTERPRETATION	L1	\$116.70	7/1/2021	12/31/2382
89050	CELL COUNT, MISCELLANEOUS BODY FLUIDS (EG, CSF, JOINT FLUID), EXCEPT BLOOD;	59	\$7.44	7/1/2021	12/31/2382
89050	CELL COUNT, MISCELLANEOUS BODY FLUIDS (EG, CSF, JOINT FLUID), EXCEPT BLOOD;	91	\$7.44	7/1/2021	12/31/2382
89050	CELL COUNT, MISCELLANEOUS BODY FLUIDS (EG, CSF, JOINT FLUID), EXCEPT BLOOD;	L1	\$7.44	7/1/2021	12/31/2382
89050	CELL COUNT, MISCELLANEOUS BODY FLUIDS (EG, CSF, JOINT FLUID), EXCEPT BLOOD;	XU	\$7.44	7/1/2021	12/31/2382
89051	CELL COUNT, MISCELLANEOUS BODY FLUIDS (EG, CSF, JOINT FLUID), EXCEPT BLOOD; WITH DIFFERENTIAL COUNT	59	\$8.66	7/1/2021	12/31/2382
89051	CELL COUNT, MISCELLANEOUS BODY FLUIDS (EG, CSF, JOINT FLUID), EXCEPT BLOOD; WITH DIFFERENTIAL COUNT	91	\$8.66	7/1/2021	12/31/2382
89051	CELL COUNT, MISCELLANEOUS BODY FLUIDS (EG, CSF, JOINT FLUID), EXCEPT BLOOD; WITH DIFFERENTIAL COUNT	L1	\$8.66	7/1/2021	12/31/2382
89051	CELL COUNT, MISCELLANEOUS BODY FLUIDS (EG, CSF, JOINT FLUID), EXCEPT BLOOD; WITH DIFFERENTIAL COUNT	XU	\$7.70	1/1/2020	12/31/2382
89055	LEUKOCYTE COUNT, FECAL	L1	\$6.72	7/1/2021	12/31/2382
89060	CRYSTAL IDENTIFICATION BY LIGHT MICROSCOPY WITH OR WITHOUT POLARIZING LENS ANALYSIS, ANY BODY FLUID (EXCEPT UR	25	\$11.25	7/1/2021	12/31/2382
89060	CRYSTAL IDENTIFICATION BY LIGHT MICROSCOPY WITH OR WITHOUT POLARIZING LENS ANALYSIS, ANY BODY FLUID (EXCEPT UR	26	\$20.43	7/1/2021	12/31/2382
89060	CRYSTAL IDENTIFICATION BY LIGHT MICROSCOPY WITH OR WITHOUT POLARIZING LENS ANALYSIS, ANY BODY FLUID (EXCEPT UR	59	\$11.25	7/1/2021	12/31/2382
89060	CRYSTAL IDENTIFICATION BY LIGHT MICROSCOPY WITH OR WITHOUT POLARIZING LENS ANALYSIS, ANY BODY FLUID (EXCEPT UR	91	\$11.25	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
89060	CRYSTAL IDENTIFICATION BY LIGHT MICROSCOPY WITH OR WITHOUT POLARIZING LENS ANALYSIS, ANY BODY FLUID (EXCEPT UR	L1	\$11.25	7/1/2021	12/31/2382
89100	DUODENAL INTUBATION AND ASPIRATION; SINGLE SPECIMEN (EG, SIMPLE BILE STUDY OR AFFERENT LOOP CULTURE) PLUS APPR		\$37.90	7/1/2021	12/31/2382
89100	DUODENAL INTUBATION AND ASPIRATION; SINGLE SPECIMEN (EG, SIMPLE BILE STUDY OR AFFERENT LOOP CULTURE) PLUS APPR	L1	\$37.90	7/1/2021	12/31/2382
89105	DUODENAL INTUBATION AND ASPIRATION; COLLECTION OF MULTIPLE FRACTIONAL SPECIMENS WITH PANCREATIC OR GALLBLADDER		\$33.29	7/1/2021	12/31/2382
89105	DUODENAL INTUBATION AND ASPIRATION; COLLECTION OF MULTIPLE FRACTIONAL SPECIMENS WITH PANCREATIC OR GALLBLADDER	L1	\$33.29	7/1/2021	12/31/2382
89125	FAT STAIN, FECES, URINE, OR SPUTUM	L1	\$6.79	7/1/2021	12/31/2382
89130	GASTRIC INTUBATION AND ASPIRATION, DIAGNOSTIC, EACH SPECIMEN, FOR CHEMICAL ANALYSES OR CYTOPATHOLOGY;	L1	\$31.87	7/1/2021	12/31/2382
89132	GASTRIC INTUBATION AND ASPIRATION, DIAGNOSTIC, EACH SPECIMEN, FOR CHEMICAL ANALYSES OR CYTOPATHOLOGY; AFTER ST		\$13.93	7/1/2021	12/31/2382
89132	GASTRIC INTUBATION AND ASPIRATION, DIAGNOSTIC, EACH SPECIMEN, FOR CHEMICAL ANALYSES OR CYTOPATHOLOGY; AFTER ST	L1	\$13.93	7/1/2021	12/31/2382
89135	GASTRIC INTUBATION, ASPIRATION, AND FRACTIONAL COLLECTIONS (EG, GASTRIC SECRETORY STUDY); ONE HOUR		\$50.87	7/1/2021	12/31/2382
89135	GASTRIC INTUBATION, ASPIRATION, AND FRACTIONAL COLLECTIONS (EG, GASTRIC SECRETORY STUDY); ONE HOUR	L1	\$50.87	7/1/2021	12/31/2382
89136	GASTRIC INTUBATION, ASPIRATION, AND FRACTIONAL COLLECTIONS (EG, GASTRIC SECRETORY STUDY); TWO HOURS		\$15.70	7/1/2021	12/31/2382
89136	GASTRIC INTUBATION, ASPIRATION, AND FRACTIONAL COLLECTIONS (EG, GASTRIC SECRETORY STUDY); TWO HOURS	L1	\$15.70	7/1/2021	12/31/2382
89140	GASTRIC INTUBATION, ASPIRATION, AND FRACTIONAL COLLECTIONS (EG, GASTRIC SECRETORY STUDY); TWO HOURS INCLUDING		\$65.05	7/1/2021	12/31/2382
89140	GASTRIC INTUBATION, ASPIRATION, AND FRACTIONAL COLLECTIONS (EG, GASTRIC SECRETORY STUDY); TWO HOURS INCLUDING	L1	\$65.05	7/1/2021	12/31/2382
89141	GASTRIC INTUBATION, ASPIRATION, AND FRACTIONAL COLLECTIONS (EG, GASTRIC SECRETORY STUDY); THREE HOURS, INCLUDI		\$58.79	7/1/2021	12/31/2382
89141	GASTRIC INTUBATION, ASPIRATION, AND FRACTIONAL COLLECTIONS (EG, GASTRIC SECRETORY STUDY); THREE HOURS, INCLUDI	L1	\$58.79	7/1/2021	12/31/2382
89160	MEAT FIBERS, FECES	L1	\$5.80	7/1/2021	12/31/2382
89190	NASAL SMEAR FOR EOSINOPHILS	L1	\$7.49	7/1/2021	12/31/2382
89205	OCCULT BLOOD, ANY SOURCE EXCEPT FECES		\$5.02	7/1/2021	12/31/2382
89230	SWEAT COLLECTION BY IONTOPHORESIS		\$5.60	7/1/2021	12/31/2382
89230	SWEAT COLLECTION BY IONTOPHORESIS	L1	\$5.60	7/1/2021	12/31/2382

Procedure Code	Procedure Description	Modifier	Allowed Amount	Effective Date	End Date
89235	WATER LOAD TEST		\$8.65	7/1/2021	12/31/2382
89235	WATER LOAD TEST	L1	\$8.65	7/1/2021	12/31/2382
89240	UNLISTED MISCELLANEOUS PATHOLOGY TEST		\$0.00	7/1/2021	12/31/2382
89240	UNLISTED MISCELLANEOUS PATHOLOGY TEST	L1	\$0.00	7/1/2021	12/31/2382
89251	CULTURE AND FERTILIZATION OF OOCYTE(S); WITH CO-CULTURE OF EMBRYOS	L1	\$0.00	7/1/2021	12/31/2382
89325	SPERM ANTIBODIES	L1	\$15.59	7/1/2021	12/31/2382
89329	SPERM EVALUATION; HAMSTER PENETRATION TEST	L1	\$33.00	7/1/2021	12/31/2382
89330	SPERM EVALUATION; CERVICAL MUCUS PENETRATION TEST, WITH OR WITHOUT SPINNBARKEIT TEST	L1	\$15.59	7/1/2021	12/31/2382
89350	SPUTUM, OBTAINING SPECIMEN, AEROSOL INDUCED TECHNIQUE (SEPARATE PROCEDURE)		\$14.83	7/1/2021	12/31/2382
89360	SWEAT COLLECTION BY IONTOPHORESIS		\$16.23	7/1/2021	12/31/2382