

Commonly Ordered Tests and Panels

Self-Pay Pricing*

Patients who do not have insurance or prefer to use our self-pay option are eligible to receive a discounted prompt payment self-pay price. Payment must be made within 15 days of invoice or individual must contact BioReference Billing for payment options. Below is a listing of commonly ordered tests and panels included within the program.

Commonly Ordered Panels			
Test Code	Test Name	Self-Pay Price*	List Price*
9893	Anemia Profile	\$165.00	\$556.60
9892	Arthritis Profile	\$239.00	\$871.00
2555	Basic Metabolic Panel (BMP)	\$11.00	\$19.80
0165	ChemProfile 29	\$37.00	\$69.00
0992	Comprehensive Hepatitis Panel	\$91.00	\$301.00
3427	Comprehensive Metabolic Panel (CMP)	\$14.00	\$36.00
0867	Comprehensive Thyroid Panel	\$73.00	\$243.00
0628	Drug Screen 8 Profile	\$125.00	\$200.00
0572	EBV Profile	\$80.00	\$190.30
9149	General Health Panel	\$47.00	\$155.90
3422	Hepatic Function Panel	\$11.00	\$32.00
0009	Lipid Panel	\$17.00	\$51.80
0010	Obstetric Panel	\$63.00	\$152.20

Custom Diagnostic Profiles			
Test Code	Test Name	Self-Pay Price*	List Price*
F100	Chronic Fatigue Profile	\$319.00	\$1061.70
F307	Comprehensive Heart Health Monitoring	\$176.00	\$586.50
F306	Comprehensive Heart Health Baseline	\$197.00	\$654.00
Q471	Heart Health Baseline	\$175.00	\$589.00
Q472	Heart Health Monitoring	\$151.00	\$521.50
F101	Gastric Distress Profile	\$198.00	\$761.60
8431	Perimenopausal Hormonal Profile	\$70.00	\$231.90
P244	Perimenopause/Menopause Risk Management Profile	\$139.00	\$462.20
F238	Sexual Health (Female) Profile	\$274.00	\$912.10
F239	Sexual Health (Male) Profile	\$274.00	\$912.10

*Prices subject to change without notice

Individual Tests Listed on Reverse Side

Alphabetical Listings, Individual Tests

Prices included are for patients only, and cannot be used for client bills and/or other third party payers.

Test Code	Test Name	Self-Pay Price*	List Price*
0025	AFP, Tumor Marker	\$31.00	\$105.00
0036	Amylase, Serum	\$11.00	\$35.00
0038	ANA Screen	\$22.00	\$75.00
0039	Antibody Screen	\$10.00	\$30.00
0156	Blood Group, Rh Type	\$5.00	\$27.10
0049	BUN	\$7.00	\$29.00
0536	CA 125	\$26.00	\$82.20
0823	CA 27.29	\$34.00	\$110.20
0053	CBC w/Diff	\$10.00	\$30.00
0034	CBC w/o Diff	\$10.00	\$28.00
0055	CEA	\$35.00	\$116.60
0058	Cholesterol	\$8.00	\$29.00
0068	CK	\$9.00	\$30.00
0069	CRP	\$10.00	\$40.00
1005	CT/GC, rRNA, TMA	\$114.00	\$380.00
0516	Estradiol	\$38.00	\$124.90
0088	Ferritin	\$24.00	\$80.00
0090	Folic Acid	\$27.00	\$88.80
0092	FSH	\$33.00	\$107.00
0093	Gamma-glutamyl transpeptidase (GGTP)	\$9.00	\$29.00
0095	Glucose, Fasting	\$10.00	\$29.00
0953	H. Pylori Antibody Profile	\$55.00	\$180.40
0327	HCG., Quant	\$26.00	\$85.00
0059	HDL Chol., Direct	\$11.00	\$35.00
0102	Hemoglobin A1C	\$30.00	\$102.00
0216	Hemoglobin Fractionation (HPLC)	\$134.00	\$210.00
0538	Hep A Ab, IgM	\$20.00	\$66.10
0105	Hep A Totab Ab w/Reflex	\$22.00	\$83.00
0108	Hep B Core Antibody	\$22.00	\$78.10
0106	Hep B Surface Ag	\$16.00	\$52.50
0107	Hep B Surface Antibody	\$19.00	\$70.00
0812	Hep C Antibody	\$24.00	\$78.00
0109	Herpes I/II Ab IgG	\$58.00	\$192.00
B688	HIV AG/AB 4th Gen	\$30.00	\$100.00
3320	HS-CRP	\$23.00	\$135.00
0250	Iron + TIBC	\$28.00	\$103.40

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Test Code	Test Name	Self-Pay Price*	List Price*
0117	Lactate Dehydrogenase (LDH)	\$11.00	\$46.00
2194	LDL Direct	\$17.00	\$55.00
0398	Lead, Blood (Child)	\$20.00	\$65.70
0342	LH	\$33.00	\$110.00
1639	Lp(a)	\$21.00	\$67.50
0120	Magnesium	\$11.00	\$35.60
0228	Microalb., Urine, Random	\$20.00	\$95.00
0127	Phosphorus	\$8.00	\$29.00
0335	Progesterone	\$29.00	\$95.90
0134	Prolactin, Serum	\$35.00	\$135.00
0085	Protein Electrophoresis	\$98.00	\$159.30
2088	PSA Free/Total	\$46.00	\$134.00
0190	PSA Total	\$29.00	\$94.00
0137	PT w/INR	\$7.00	\$22.60
0139	PTT	\$11.00	\$36.20
0141	Retic Count	\$7.00	\$24.20
0796	RF, Quant	\$8.00	\$24.80
0142	RPR	\$7.00	\$31.70
0973	Rubella, IgG	\$18.00	\$37.80
0086	Sedimentation Rate (ESR)	\$6.00	\$25.00
0366	Sickle Cell Screen	\$7.00	\$21.40
0271	T3, Free	\$31.00	\$163.10
0150	T3, Total	\$26.00	\$88.00
0152	T3, Uptake	\$11.00	\$40.00
0091	T4, Free	\$16.00	\$66.70
0151	T4, Total	\$12.00	\$40.00
A322	TB Screen Quantiferon	\$77.00	\$230.00
7301	Testosterone Free + Total	\$72.00	\$238.50
0078	Throat Culture	\$16.00	\$62.40
0153	TSH	\$30.00	\$98.50
A518	TSH w/Reflex to Free T4	\$30.00	\$98.50
0157	Uric Acid	\$8.00	\$29.00
0159	Urinalysis Routine w/Micro	\$5.00	\$25.00
0080	Urine Culture	\$14.00	\$45.00
0597	Varicella Zos. (IgG)	\$20.00	\$65.40
0287	Vit B12/Folate	\$44.00	\$144.90
0160	Vitamin B12	\$27.00	\$89.00
0286	Vitamin D 25-hydroxy	\$54.00	\$190.00