



DEPARTMENT OF HEALTH AND HUMAN SERVICES

OFFICE OF INSPECTOR GENERAL

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FROM: /S/ Stuart Wright
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SUBJECT: Memorandum Report: *Coverage and Payment for Genetic Laboratory Tests*, OEI-07-11-00011

This memorandum report provides the results of surveys sent to State Medicaid and Federal Employee Health Benefit (FEHB) programs and interviews with Veterans Health Administration (VHA) staff regarding coverage and payment for genetic laboratory tests. Centers for Medicare & Medicaid Services (CMS) officials requested this information at the start of our study entitled *Payments for Laboratory Tests: Comparing Medicare, State Medicaid, and Federal Employees Health Benefits Programs* (OEI-07-11-00010). This information is provided to assist CMS in its efforts to establish payment rates for genetic tests. CMS has scheduled its annual laboratory public meeting for July 16, 2012. At this meeting, 101 new genetic test codes for which no Medicare payment rates exist will be discussed.

SUMMARY

The Office of Inspector General (OIG) is currently conducting an evaluation entitled *Payments for Laboratory Tests: Comparing Medicare, State Medicaid, and Federal Employees Health Benefits Programs* (OEI-07-11-00010). The objectives of that evaluation are to determine (1) how the methods for establishing Medicare laboratory test payment rates vary from State Medicaid and FEHB programs, and (2) the extent to which 2011 Medicare payment rates for 20 high-volume and/or high-expenditure laboratory tests vary from State Medicaid and FEHB plans. During a meeting on June 29, 2011, CMS officials informed us that, in addition to high-volume and high-expenditure laboratory tests, a collection of pricing data for genetic tests from other health care insurers would assist CMS in establishing payment rates for the 101 new genetic test codes in 2012.

To answer the objectives of the earlier evaluation, we surveyed State Medicaid and FEHB plan staff to determine payment rates for each State and FEHB plan and to determine how their laboratory test payment rates were established. To respond to CMS officials' requests for similar information for genetic tests, we (1) surveyed State Medicaid and FEHB plan staff and interviewed VHA staff about their coverage policy and establishment of payment rates, and (2) obtained 2011 payment rates for selected genetic tests by name and by Common Procedural Terminology (CPT) code from each of the health care insurers we surveyed. The payment rate information for genetic tests by CPT code is important because these codes are the basis underlying 101 new genetic test CPT codes. We are providing the results of the surveys and interviews in this memorandum for CMS's use in informing Medicare coverage and payment policies for genetic tests.

BACKGROUND

Clinical diagnostic laboratory tests (lab tests) are performed on specimens taken from the human body. Lab tests provide information integral to preventing, diagnosing, and treating disease. Most lab tests are performed in hospitals, physicians' offices, or independent laboratories. Genetic testing is the use of a lab test to look for genetic variations associated with a disease.¹ Genetic tests can be used to predict, prevent, and inform the treatment of diseases.

As with any new medical technology, genetic tests face challenges as they are integrated into the health care system, such as health care insurers' decisions to provide coverage and establish payment rates for these services. Although genetic testing has been performed for more than 20 years, these decisions are still evolving.

Medicare Coverage of Genetic Tests

The Social Security Act provides that no Medicare payment may be made for expenses incurred for items or services that are not reasonable and necessary for the diagnosis or treatment of illness or injury or to improve the functioning of a malformed body member.² Consistent with this, Medicare does not pay for preventive screening tests except for those specifically authorized by statute (e.g., prostate-specific antigen test). Since CMS considers predictive tests to be screening tests, genetic tests for this purpose are not covered by Medicare. However, genetic tests used to diagnose or determine treatment in the presence of signs and symptoms of disease can be covered by Medicare.³ A common use of genetic tests in the Medicare population is to assist in determining

¹ National Human Genome Research Institute, National Institutes of Health. Accessed at <http://www.genome.gov> on January 25, 2012.

² Social Security Act § 1862(a)(1)(A).

³ Secretary's Advisory Committee on Genetics, Health, and Society, *Coverage and Reimbursement of Genetic Tests and Services*, February 2006, p. 30. Accessed at http://oba.od.nih.gov/oba/sacghs/reports/CR_report.pdf on January 25, 2012.

cancer treatment. Genetic tests can be used to predict optimal chemotherapy regimens and avoid exposing patients to ineffective or overly toxic regimens.⁴

Medicare uses a combination of national and local coverage determinations for making coverage decisions for genetic tests. National coverage determinations (NCD) are made at the Federal level and apply to all Medicare beneficiaries and Medicare administrative contractors (MAC). Currently, only two NCDs related to genetic tests have been established: (1) testing to predict patient responsiveness to the drug warfarin sodium, and (2) cytogenetic studies.⁵ MACs make local coverage determinations (LCD), which apply only to beneficiaries in the contractor's jurisdiction. Of the nearly 9,000 LCDs, only 11 are related to genetic tests. For example, one MAC covers BRCA1 and BRCA2 genetic testing for beneficiaries who meet certain criteria.⁶

Medicare Payment for Genetic Tests

The Clinical Laboratory Fee Schedule. The Deficit Reduction Act of 1984 (DRA) mandated that payment rates be established for lab tests on a regional, statewide, or carrier basis.⁷ The DRA also mandated that the Consumer Price Index for All Urban Consumers be used annually to adjust rates for inflation. Beginning July 1, 1984, each carrier (i.e., Medicare Part B claims payment contractor) established its own payment rates based on the prevailing charges for lab tests in its locality. These payment rates are collectively known as the Clinical Laboratory Fee Schedule (CLFS).

CMS publishes an updated CLFS at least annually containing payment rates based on the 57 jurisdictions of the former Medicare Part B claims payment carriers. Although 15 MACs have largely replaced the Medicare Part B claims payment carriers, MACs continue to administer the same payment policies created by the 57 carriers. The 2011 CLFS contains each carrier's rate for 1,140 unique lab tests identified by CPT code, including some genetic tests.^{8,9}

Annual Laboratory Meeting. In accordance with section 1833(h)(8)(B) of the Social Security Act, CMS conducts an annual public meeting on payment rate recommendations for new lab test codes developed by the AMA's CPT Editorial Panel. The meeting is intended to provide input on the nature of the new test codes and receive recommendations concerning the determination of payment rates. In 2011, CMS

⁴ National Human Genome Research Institute, National Institutes of Health. Accessed at <http://www.genome.gov> on January 25, 2012.

⁵ CMS, *Medicare National Coverage Determinations Manual* [Internet-Only Manual], Pub.100-03, ch. 1, §§ 90.1 and 190.3. Accessed at <http://www.cms.gov/Manuals/IOM/list.asp> on January 25, 2012.

⁶ Noridian Administrative Services, LCD ID Number L24308. Accessed at <http://www.cms.gov/medicare-coverage-database/license/> on April 25, 2012.

⁷ Deficit Reduction Act of 1984, P.L. 98-369, § 2303(d), Social Security Act, § 1833(h).

⁸ CPT, a numeric coding system maintained by the American Medical Association (AMA), is a uniform coding system consisting of descriptive terms and identifying codes that are used primarily to identify medical services and procedures furnished by physicians and other health care professionals. CPTs make up one part of the Healthcare Common Procedure Coding System (HCPCS) code set.

⁹ CMS, 2011 Clinical Laboratory Fee Schedule. Accessed at <https://www.cms.gov/ClinicalLabFeeSched> on January 13, 2012.

followed the public meeting with an information session on 101 new CPT codes for genetic tests that CMS plans to assign payment rates to in 2012. The 2012 meeting is scheduled to be held on July 16.

Payment Methods for Genetic Tests

In 1992, AMA added a new section of CPT codes for genetic tests. These codes focused on the laboratory procedure(s) used for a test rather than the substance or chemical analyzed. This coding system was developed to accommodate rapidly developing technologies. However, as stated in a pathology journal article, some health insurers expressed concern with this method because it led to a lack of standardization and a lack of specificity as to the test performed, which is discussed in greater detail below.¹⁰

Stacking. Until 2012, Medicare did not use single CPT codes for genetic tests as it does for other lab tests (e.g., 81003-urinalysis automated without microscopy, 85610-prothrombin time). For nearly a decade, Medicare contractors, as well as other health care insurers, have used a reimbursement method referred to as “stacking.” Stacking is the use of multiple generic molecular diagnostic CPT codes (83890–83914) to form the basis of reimbursement for a single genetic test.¹¹ Payment rates for many of these individual CPT codes are listed on the CLFS. Different laboratories may use differing procedures to perform the same lab test; therefore, they use differing quantities of CPT codes to file claims for the tests. As shown in Table 1, a cystic fibrosis profile at one laboratory might be coded with a total of 29 units of 5 different CPT codes, while the same test from another laboratory might be coded with a total of 89 units of 6 different CPT codes.¹²

¹⁰ Anne Paxton, *Molecular CPT Codes Topple Old “Stacking” Codes*, CAP Today, April 2011. Accessed at <http://www.cap.org> on January 13, 2012.

¹¹ Ibid.

¹² L. Joan Logue, *Genetic Testing Coverage and Reimbursement: A Provider’s Dilemma*, Clinical Leadership & Management Review, November/December 2003, pp. 346–350.

Table 1: Example of a Cystic Fibrosis Profile Offered by Two Laboratories

Lab A Cystic Fibrosis 32 Mutations		
Code	Number of Units	Medicare CLFS Rate
83890	1	\$5.60
83894	1	\$5.60
83896	25	\$140.00
83901	1	\$23.42
83912	1	\$5.60
Total	29	\$180.22
Lab B Cystic Fibrosis 32 Mutations		
Code	Number of Units	Medicare CLFS Rate
83890	1	\$5.60
83892	1	\$5.60
83894	1	\$5.60
83896	84	\$470.40
83901	1	\$23.42
83912	1	\$5.60
Total	89	\$516.22

Note: The source of this example erroneously listed the Medicare CLFS rate as \$54.60 for 83912 for Lab B.

Source: L. Joan Logue, *Genetic Testing Coverage and Reimbursement: A Provider's Dilemma*, *Clinical Leadership & Management Review*, November/December 2003, pp. 346–350.

Medicare rules do not address the quantity or configuration of stacking codes for genetic tests. The lack of standardization results in wide variation in payment amounts for the same genetic test. Another shortcoming of this reimbursement method is that it does not provide specificity to the payer as to what was tested because the same set of codes is used in a variety of genetic test types.

Effective January 1, 2012, CMS instructed MACs to include in claims for genetic tests 1 of the 101 new single CPT codes representing a genetic test as well as the underlying stacked codes.¹³ The new, single CPT codes do not yet have a payment amount assigned to them. For now, claims will be paid according to the payment rates assigned to the underlying stacked codes. This new claim payment procedure may provide more information to CMS on the quantities of stacked codes underlying a single genetic test and the quantities and types of genetic tests provided to Medicare beneficiaries. However, it does not resolve the issue of variation in payment amounts.

S Codes. Although most State Medicaid program and commercial health insurers (e.g., FEHB plans) use the stacking method of reimbursement, some alternatively use Healthcare Common Procedure Coding System (HCPCS) “S” codes. S codes are assigned by the HCPCS Workgroup at the request of commercial insurers. They are not reportable to Medicare. In contrast to stacking, a single S code captures all of the

¹³ CMS, Recurring Update Notification, Pub. No. 100-04, Transmittal 2365, Change Request 7654, dated December 9, 2011.

components of the genetic test. One example of an S code is “S3818-complete gene sequence analysis of the BRCA1 gene.”¹⁴

Medicare’s Role in Establishing the Payment Rates of Other Health Care Insurers

As the largest health insurer in the United States, Medicare has great influence on the actions of other health care insurers. In fact, section 1903(i)(7) of the Social Security Act prohibits State Medicaid program payments for lab tests that exceed the Medicare payment amount. In addition, private health insurance plans closely monitor Medicare’s coverage and reimbursement decisions.¹⁵ Therefore, it is important that CMS accurately formulate the reimbursement rates for genetic tests.

VHA

Unlike other Federal health insurance programs (e.g., Medicare), VHA operates its own medical centers and community-based outpatient clinics and permits more than 53,000 independent licensed health care practitioners to work within those facilities. VHA is the largest integrated health care system in the United States, providing health care to approximately 8.3 million veterans.¹⁶ In 2006, the Department of Veterans Affairs launched the Genomic Medicine Program. The goals of the program are: (1) to examine the potential of emerging genomic technologies, (2) to optimize medical care for veterans, and (3) to enhance the development of tests and treatments for relevant diseases.

METHODOLOGY

Surveys

From August through October 2011, we conducted an electronic survey of 50 State Medicaid programs and 3 FEHB plans that pay for lab tests on a fee-for-service basis.¹⁷ We asked questions about their coverage policy for genetic laboratory tests; the methods established for payment of claims for genetic laboratory tests; and the payment rates in effect for the period January 1 through March 31, 2011, for 16 genetic tests by CPT stacking code and 16 selected genetic tests by name. The 16 genetic tests by stacking codes were selected because they are included in the set of stacking codes underlying the 101 new single genetic test codes. Appendix A contains lists of tests reviewed.

We received completed surveys from all 50 State Medicaid programs and 3 FEHB plans. The three fee-for-service FEHB plans provide coverage to 90 percent of fee-for-service enrollees in the FEHB program. Each of these national plans provides services through local plans and networks. Within a single national plan, local plans and networks may

¹⁴ AMA, *HCPCS Level II Professional Edition*, 2011, p. 313.

¹⁵ Secretary’s Advisory Committee on Genetics, Health, and Society, *Coverage and Reimbursement of Genetic Tests and Services*, February 2006, p. 25. Accessed at http://oba.od.nih.gov/oba/sacghs/reports/CR_report.pdf on January 25, 2012.

¹⁶ Accessed at <http://www.va.gov/health/aboutVHA.asp> on March 20, 2012.

¹⁷ Staff from the Tennessee Medicaid program stated that 100 percent of recipients are enrolled in managed care plans; therefore, Tennessee does not pay for any lab tests on a fee-for-service basis. We did not include the Tennessee Medicaid program in our data collection. We included the District of Columbia, for a total of 50 State Medicaid programs.

have differing coverage policies and payment rates. While FEHB plans provided payment rates representing all of their local plans and networks, they did not provide coverage policy and payment methods for each individual plan or network. In total, we received surveys from 29 of 58 FEHB local plans and/or networks.

Structured Interviews

We conducted structured interviews with both national and local VHA staff. We asked questions regarding coverage policy and payment for genetic tests. We accessed VHA lab test payment rates on publicly available Web sites. As previously stated, unlike Medicare, Medicaid, and FEHB, VHA operates its own medical centers and privileges and credentials its own providers to serve its members. Therefore, we used a different data collection method with VHA than with the other health care insurers.

Standards

This study was conducted in accordance with the *Quality Standards for Inspection and Evaluation* issued by the Council of the Inspectors General on Integrity and Efficiency.

RESULTS

Below, we present information provided to us through surveys and interviews in the areas of coverage policies, payment methods, and payment rates.

Coverage Policies for Genetic Tests

We asked officials from each State Medicaid program, each FEHB plan, and VHA to describe their organizations' coverage policy for genetic tests.

State Medicaid Programs. Officials from all but one State Medicaid program described some level of coverage for genetic tests. Officials from New Mexico stated that genetic tests are generally not covered. Officials from 17 States stated that although genetic tests are covered, their States have no specific policy addressing them. Officials from the remainder of States described a variety of factors that influenced coverage decisions, including performing genetic tests for the purpose of either diagnosis of a disease or treatment (nine States), requiring prior authorization for either all or certain types of genetic tests (eight States), and considering coverage on a case-by-case basis (six States). The Alabama Medicaid program volunteered that it is working with a consultant to develop a coverage policy.

FEHB Plans. Officials from each of the three national FEHB plans described some level of coverage for genetic tests. At the time of our data collection, officials from one national plan reported that, in the past, coverage for specific genetic tests was evaluated for medical necessity on an individual basis. However, the plan had recently experienced increased demand for genetic tests, so plan officials were working on a more robust policy. Of the 29 local and network plans, 4 reported that coverage policies are test-specific and 3 required preauthorization for genetic tests.

VHA. VHA places a strong emphasis on medical coverage decisionmaking by a patient’s clinician(s). According to regulations found at 38 CFR 17.38(b), care referred to in the “medical benefits package”¹⁸ will be provided to individuals only if it is determined by appropriate health care professionals that the care is needed to promote, preserve, or restore the health of the individual and is in accord with generally accepted standards of medical practice. VHA officials reported to us that tests used to make a primary diagnosis or to modify treatment are easily justified. A medical center’s pathologist serves as a gatekeeper to evaluate the test ordered by a clinician against clinical requirements.

Payment Methods

State Medicaid Programs. Thirty-nine State Medicaid programs reported that they paid for genetic tests using only the stacking method. Two States reported that they paid for genetic tests only by test name (e.g., by S code). Eight States reported using a combination of these methods. One State reported that it did not cover genetic tests, and therefore did not report a payment method.

Of the 47 State Medicaid programs that reported paying for genetic tests using the stacking method, only Iowa determined a maximum quantity and combination of stacked codes that it would reimburse for a given test. Iowa reported the maximum number and combination of stacked codes for 6 of the 16 genetic tests on our survey. These combinations are shown in Appendix B. Minnesota reported the set of stacked codes it allowed for certain tests, but did not specify a maximum quantity for each of these codes. These combinations are shown in Appendix C.

FEHB Plans. One national FEHB plan reported that it did not approve many genetic tests. This plan noted that some tests do not have CPT codes associated with them; the plan prices these tests based on available fee data. The plan is in the process of developing a pricing strategy for an expected increase in usage of genetic tests. Another national FEHB plan responded that payment for a genetic test is based on claim information and contractual rates. The remaining national FEHB plan noted that responses varied among the local plans, with some plans using stacked CPT codes and some plans paying by test name.

VHA. Some VHA medical center laboratories can perform certain genetic tests onsite, but the majority of genetic test specimens are sent to reference laboratories for processing. VHA has national contracts with four reference laboratories. The contracts contain a list price for each lab test offered. In addition, VHA’s regionally based service networks, or individual medical centers within those networks, may negotiate prices lower than contract list prices based on volume. Because genetic test volume has been low, staff from one medical center reported that in most cases, the volume has not been large enough to justify negotiating prices lower than list prices.

¹⁸ The definition of “medical benefits package” can be found in 38 CFR § 17.38. It includes services such as outpatient, hospital, and extended care.

Payment Rates

We asked officials from each State Medicaid program and FEHB plan to provide us with the payment rates in effect for January 1 through March 31, 2011, for 16 genetic tests by CPT stacking code and 16 selected genetic tests by name. State Medicaid programs provided their fee schedules for lab tests, representing the maximum payment rate allowed for each test. (For actual claims, providers could have billed for less than the fee schedule amount.) FEHB plans provided us with median claim payment amounts for lab tests performed during the period of our review.

State Medicaid Programs. Appendix D compares State Medicaid program fee schedule rates for 16 genetic tests by CPT stacking codes with Medicare CLFS payment rates. Eight State Medicaid programs provided payment rates by test name. These prices are shown in Appendix E. We note great variation in test prices; for example, the payment rate for a BRCA1 gene analysis ranged from \$1,000 in Pennsylvania to nearly \$4,500 in Iowa.

FEHB Plans. Appendix D compares FEHB plan median payment rates for 16 genetic tests by CPT stacking code with Medicare CLFS payment rates. One national FEHB plan provided prices for genetic tests by name. These prices are shown in Appendix F. If the FEHB plan did not pay a lab test claim for a particular test, no price is listed. Similar to State Medicaid programs, FEHB plans reported variation in tests prices. For example, the AlloMap ranged from \$2 to \$3,658. Other tests had less price variation, such as the Pathwork Tissue of Origin, which ranged from \$5 to \$38. One FEHB plan official noted that the variation in payment rates is likely due to low test volume and services provided by nonpreferred provider organizations. The plan is reviewing instances in which its payment rates are higher than other insurers.’

VHA. VHA has national contracts with four laboratories: ARUP Laboratories, Laboratory Corporation of America, Quest Diagnostics Nichols Institute, and Sonora Quest Laboratories, LLC. Only one contractor lists prices by CPT code. We have not included contract list prices in this memorandum because this information can be located on the General Services Administration Web site.¹⁹

CONCLUSION

We have provided this information for CMS’s use in setting Medicare coverage and payment policies for genetic tests. Because State Medicaid programs and private health insurance plans closely monitor Medicare’s coverage and reimbursement decisions, CMS’s formulation of reimbursement rates for genetic tests may be useful to them. As one official from a State Medicaid program remarked, “Additional guidance from CMS on genetic testing would be very helpful. We have struggled with payment of such tests for the last couple of years.”

¹⁹ General Services Administration, Medical Laboratory Testing and Analysis Services, Schedule 621 II. Accessed at <http://www.gsaelibrary.gsa.gov> on February 24, 2012.

This report is being issued directly in final form because it contains no recommendations. If you have comments or questions about this report, please provide them within 60 days. Please refer to report number OEI-07-11-00011 in all correspondence.

APPENDIX A

Genetic Tests Included in Review

Genetic Tests by Current Procedural Terminology Stacking Code Included in Review

Code	Description
83890	Molecular diagnostics; molecular isolation or extraction, each nucleic acid type
83891	Molecular diagnostics; isolation or extraction of highly purified nucleic acid, each nucleic acid type
83892	Molecular diagnostics; enzymatic digestion, each enzyme treatment
83894	Molecular diagnostics; separation by gel electrophoresis, each nucleic acid preparation
83896	Molecular diagnostics; each nucleic acid probe
83897	Molecular diagnostics; nucleic acid transfer, each nucleic acid preparation
83898	Molecular diagnostics; amplification, target, each nucleic acid sequence
83900	Molecular diagnostics; amplification, target, multiplex, first two nucleic acid sequences
83901	Molecular diagnostics; amplification, target multiplex, each additional nucleic acid sequence beyond the first two
83902	Molecular diagnostics; reverse transcription
83904	Molecular diagnostics; mutation identification by sequencing, single segment, each segment
83907	Molecular diagnostics; lysis of cells prior to nucleic acid extraction
83909	Molecular diagnostics; separation and identification by high resolution technique
83912	Molecular diagnostics; interpretation and report
83914	Mutation identification by enzymatic ligation or primer extension, single segment, each segment
88271	Molecular cytogenetics; each DNA probe

Source: American Medical Association, *Current Procedural Terminology 2009 Standard Edition*, pp. 276–292.

Genetic Tests by Name Included in Review

AlloMap
 OncoTypeDX
 PathFinderTG
 Pathwork Tissue of Origin
 VeriStrat
 ChemoFx
 Oncotech EDR
 MSH2 Gene Analysis
 MLH1 Gene Analysis
 KRAS Gene Analysis
 HFE Gene Analysis
 F2 Gene Analysis
 CFTR Gene Analysis
 BRCA1 Gene Analysis
 BRCA2 Gene Analysis
 BCR/ABL1 Translocation Analysis

APPENDIX B

Table B-1: Iowa Medicaid Program Quantities of Stacked Codes Allowed in Reimbursement for Selected Genetic Tests

Current Procedural Terminology Code	Genetic Test					
	Pathwork Tissue of Origin	VeriStrat	ChemoFX	KRAS Gene Analysis	F2 Gene Analysis	BCR/ABL1 Translocation Analysis
83890	1			1		
83891	1				1	1
83892	1			3		
83893	1					
83894	1				1	1
83896	1					
83897	1					
83898	1			1	2	9
83900	1					
83901	1					
83902	1					1
83903	1					
83904	1				2	
83905	1					
83906	1					
83907	1			1		
83908	1					
83909	1	1		2		
83912	1			1	1	1
83913	1					
83914				4		
84999	1					
87230			1			
88104			1			
88230			1			
88233			1			
88235			1			
88237			1			
88239			1			
88305			1			
88313			1			
88358			1			
88381				1		
88384	1					
88385	1					
88386	1					
89050			1			

Source: Office of Inspector General analysis of Iowa Medicaid program survey response, 2011.

APPENDIX C

Table C-1: Minnesota Medicaid Program Stacked Codes Allowed in Reimbursement for Selected Genetic Tests

Current Procedural Terminology Code	Genetic Test			
	CFTR Gene Analysis	HFE Gene Analysis	MLH1 Gene Analysis	MSH2 Gene Analysis
83890	X	X		
83891	X		X	X
83892	X		X	X
83893	X			
83894	X			
83896	X			
83897	X			
83898	X	X	X	X
83900	X			
83901	X			
83902	X			
83903	X			
83904	X		X	X
83905	X			
83906	X			
83909			X	X
83912		X	X	X

Source: Office of Inspector General analysis of Minnesota Medicaid program survey response, 2011.

APPENDIX D

Table D-1: Medicare Clinical Laboratory Fee Schedule, State Medicaid Program, and Federal Employee Health Benefit* Payment Rates for Selected Genetic Test Codes

Current Procedural Terminology Code	Insurer	State				
		AK	AL	AR	AZ	CA
83890	Medicare	\$5.64	\$5.55	\$5.64	\$5.64	\$5.64
	Medicaid	\$5.74	\$5.55	\$5.72	\$5.45	\$4.39
	FEHB 1	N/A	\$5.94	N/A	N/A	N/A
	FEHB 2	N/A	N/A	N/A	\$107.50	\$25.20
	FEHB 3	\$5.00	\$5.36	\$6.72	\$3.35	\$4.86
83891	Medicare	\$5.64	\$5.55	\$5.64	\$5.64	\$5.64
	Medicaid	\$5.74	\$4.00	\$5.72	\$5.45	\$4.39
	FEHB 1	N/A	\$3.98	\$6.45	\$5.94	\$5.94
	FEHB 2	\$4.45	\$6.19	\$8.40	\$5.88	\$5.88
	FEHB 3	\$31.00	\$4.95	\$4.89	\$4.86	\$4.86
83892	Medicare	\$5.64	\$5.55	\$5.64	\$5.64	\$5.64
	Medicaid	\$5.74	\$5.55	\$5.72	\$5.45	\$4.39
	FEHB 1	N/A	N/A	\$31.61	N/A	\$5.94
	FEHB 2	\$5.60	\$15.10	\$9.20	\$6.19	\$5.88
	FEHB 3	\$79.11	\$9.90	\$7.46	\$6.68	\$9.90
83894	Medicare	\$5.64	\$5.55	\$5.64	\$5.64	\$5.64
	Medicaid	\$5.74	\$5.00	\$5.72	\$5.45	\$4.39
	FEHB 1	N/A	N/A	\$5.46	N/A	\$5.94
	FEHB 2	N/A	\$24.00	\$19.00	\$45.38	\$11.31
	FEHB 3	\$11.28	\$12.44	\$5.04	\$5.09	\$9.86
83896	Medicare	\$5.64	\$5.55	\$5.64	\$5.64	\$5.64
	Medicaid	\$5.74	\$5.55	\$5.72	\$5.45	\$4.39
	FEHB 1	N/A	\$5.49	\$43.07	\$5.46	\$5.40
	FEHB 2	\$5.60	\$6.19	\$28.00	\$5.88	\$5.88
	FEHB 3	\$35.56	\$9.90	\$7.46	\$13.15	\$30.00
83897	Medicare	\$5.64	\$5.55	\$5.64	\$5.64	\$5.64
	Medicaid	\$5.74	\$4.00	\$5.72	\$5.45	\$4.39
	FEHB 1	N/A	N/A	N/A	N/A	N/A
	FEHB 2	N/A	N/A	\$55.00	N/A	N/A
	FEHB 3	N/A	N/A	N/A	N/A	\$6.26
83898	Medicare	\$23.58	\$9.52	\$23.58	\$23.58	\$23.58
	Medicaid	\$24.01	\$9.52	\$23.94	\$22.81	\$18.35
	FEHB 1	N/A	\$24.85	N/A	N/A	\$23.53
	FEHB 2	\$14.00	\$36.00	\$55.00	\$35.01	\$35.01
	FEHB 3	\$30.00	\$19.38	\$20.69	\$22.45	\$35.16
83900	Medicare	\$47.18	\$19.03	\$47.18	\$47.18	\$47.18
	Medicaid	N/A	\$13.00	\$48.40	\$45.62	\$37.10
	FEHB 1	N/A	\$79.65	\$48.94	\$49.69	\$30.99
	FEHB 2	N/A	\$26.18	\$46.84	\$38.00	\$40.36
	FEHB 3	\$116.68	\$16.94	\$40.90	\$23.68	\$40.68

continued on next page

Note: N/A indicates that no price was reported for the test.
*FEHB.

Table D-1: Medicare Clinical Laboratory Fee Schedule, State Medicaid Program, and Federal Employee Health Benefit Payment Rates for Selected Genetic Test Codes (Continued)

Current Procedural Terminology Code	Insurer	State				
		AK	AL	AR	AZ	CA
83901	Medicare	\$23.58	\$9.52	\$23.58	\$23.58	\$23.58
	Medicaid	\$24.01	\$6.00	\$23.94	\$22.81	\$18.35
	FEHB 1	N/A	\$16.68	\$21.08	\$6.39	\$18.55
	FEHB 2	N/A	\$7.32	\$42.67	\$15.93	\$12.27
	FEHB 3	\$156.26	\$136.64	\$204.33	\$20.80	\$159.97
83902	Medicare	\$12.09	\$5.55	\$19.97	\$19.97	\$19.97
	Medicaid	\$12.31	\$4.00	\$20.26	\$19.31	\$15.53
	FEHB 1	N/A	N/A	\$5.47	\$5.47	\$17.15
	FEHB 2	N/A	N/A	N/A	N/A	N/A
	FEHB 3	\$31.00	\$9.90	\$8.79	\$19.00	\$9.90
83904	Medicare	\$23.58	\$9.52	\$23.58	\$23.58	\$23.58
	Medicaid	\$24.01	\$7.00	\$23.94	\$22.81	\$18.35
	FEHB 1	N/A	N/A	\$23.54	N/A	\$23.54
	FEHB 2	\$37.86	N/A	N/A	\$35.01	\$35.01
	FEHB 3	\$47.16	\$83.38	\$56.73	\$89.79	\$141.00
83907	Medicare	\$18.80	\$18.80	\$18.80	\$18.80	\$18.80
	Medicaid	\$19.13	\$13.00	\$19.28	\$18.17	\$14.78
	FEHB 1	N/A	\$58.80	\$58.80	N/A	N/A
	FEHB 2	N/A	N/A	N/A	N/A	N/A
	FEHB 3	\$16.92	\$16.21	\$24.87	\$17.88	\$16.21
83909	Medicare	\$23.58	\$9.52	\$23.58	\$23.58	\$23.58
	Medicaid	\$24.01	\$7.00	\$24.20	\$22.81	\$18.55
	FEHB 1	N/A	\$6.13	\$20.27	\$14.03	\$15.49
	FEHB 2	\$13.00	\$13.49	\$23.42	\$6.39	\$13.49
	FEHB 3	\$49.75	\$9.69	\$20.56	\$14.59	\$20.34
83912	Medicare	\$5.64	\$5.55	\$5.64	\$5.64	\$5.64
	Medicaid	\$5.74	\$5.55	\$5.72	\$5.45	\$4.39
	FEHB 1	N/A	\$4.43	\$6.89	\$5.46	\$5.94
	FEHB 2	\$4.23	\$37.60	\$19.20	\$25.80	\$5.88
	FEHB 3	\$11.28	\$4.95	\$8.40	\$5.66	\$4.95
83914	Medicare	\$23.58	\$9.52	\$23.58	\$23.58	\$23.58
	Medicaid	\$24.01	\$7.00	\$24.20	\$22.81	\$18.55
	FEHB 1	N/A	\$39.97	\$73.80	\$3.20	\$15.49
	FEHB 2	N/A	N/A	\$21.99	\$13.11	\$15.51
	FEHB 3	\$127.32	\$103.78	\$271.04	\$50.58	\$165.78
88271	Medicare	\$30.14	\$23.42	\$30.14	\$30.14	\$30.14
	Medicaid	\$30.68	\$21.00	\$30.59	\$29.15	\$23.44
	FEHB 1	N/A	N/A	\$30.66	N/A	N/A
	FEHB 2	N/A	N/A	N/A	N/A	N/A
	FEHB 3	\$120.56	\$100.00	\$82.92	\$92.32	\$93.56

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Table D-1: Medicare Clinical Laboratory Fee Schedule, State Medicaid Program, and Federal Employee Health Benefit Payment Rates for Selected Genetic Test Codes (Continued)

Current Procedural Terminology Code	Insurer	State				
		CO	CT	DC	DE	FL
83890	Medicare	\$5.64	\$5.64	\$5.64	\$5.64	\$3.59
	Medicaid	\$4.97	\$5.32	\$3.00	\$5.53	\$2.00
	FEHB 1	N/A	N/A	N/A	N/A	\$8.97
	FEHB 2	\$5.36	N/A	\$4.76	N/A	\$20.76
	FEHB 3	\$2.54	\$5.54	\$5.00	\$4.78	\$4.00
83891	Medicare	\$5.64	\$5.64	\$5.64	\$5.64	\$3.59
	Medicaid	\$4.97	\$5.32	\$88.00	\$5.53	\$2.00
	FEHB 1	\$5.78	\$5.78	\$5.94	N/A	\$5.78
	FEHB 2	\$4.51	\$5.06	\$5.88	N/A	\$5.88
	FEHB 3	\$4.95	\$3.44	\$5.00	\$7.62	\$4.95
83892	Medicare	\$5.64	\$5.64	\$5.64	\$5.64	\$3.59
	Medicaid	\$4.97	\$5.32	\$3.00	\$5.53	\$2.00
	FEHB 1	\$5.60	\$5.25	\$5.94	N/A	\$5.25
	FEHB 2	\$5.20	\$5.88	\$6.19	\$2.35	\$6.04
	FEHB 3	\$9.90	\$6.88	\$9.35	\$9.28	\$9.90
83894	Medicare	\$5.64	\$5.64	\$5.64	\$5.64	\$3.59
	Medicaid	\$4.97	\$5.32	\$3.00	\$5.53	\$2.00
	FEHB 1	\$5.94	N/A	\$5.94	N/A	\$5.94
	FEHB 2	\$5.36	N/A	\$4.76	\$2.35	\$24.00
	FEHB 3	\$7.63	\$7.25	\$5.00	\$10.00	\$8.31
83896	Medicare	\$5.64	\$5.64	\$5.64	\$5.64	\$3.59
	Medicaid	\$4.97	\$5.32	\$3.00	\$5.53	\$2.49
	FEHB 1	\$5.25	\$5.25	\$5.70	N/A	\$5.25
	FEHB 2	\$4.09	\$5.88	\$5.32	N/A	\$5.88
	FEHB 3	\$9.90	\$13.76	\$15.00	\$11.14	\$9.90
83897	Medicare	\$5.64	\$5.64	\$5.64	\$5.64	\$3.59
	Medicaid	\$4.97	\$5.32	\$10.00	\$5.53	\$2.00
	FEHB 1	N/A	N/A	N/A	N/A	N/A
	FEHB 2	N/A	N/A	N/A	N/A	N/A
	FEHB 3	\$5.60	N/A	N/A	N/A	\$8.31
83898	Medicare	\$23.58	\$23.58	\$23.58	\$23.58	\$23.58
	Medicaid	\$20.83	\$22.25	\$11.00	\$23.11	\$2.00
	FEHB 1	\$23.53	\$22.65	\$24.85	N/A	\$24.85
	FEHB 2	\$15.33	\$24.02	\$19.91	N/A	\$35.01
	FEHB 3	\$20.69	\$42.20	\$10.00	\$27.28	\$35.00
83900	Medicare	\$47.18	\$47.18	\$47.18	\$47.18	\$47.18
	Medicaid	\$44.31	\$44.03	\$24.36	\$46.24	\$32.79
	FEHB 1	\$34.42	\$104.41	\$30.99	N/A	\$60.18
	FEHB 2	\$25.16	N/A	\$40.36	N/A	\$23.98
	FEHB 3	\$20.86	\$28.81	\$5.18	\$39.99	\$27.17

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Table D-1: Medicare Clinical Laboratory Fee Schedule, State Medicaid Program, and Federal Employee Health Benefit Payment Rates for Selected Genetic Test Codes (Continued)

Current Procedural Terminology Code	Insurer	State				
		CO	CT	DC	DE	FL
83901	Medicare	\$23.58	\$23.58	\$23.58	\$23.58	\$23.58
	Medicaid	\$20.83	\$22.25	\$10.00	\$23.11	\$16.00
	FEHB 1	\$16.68	N/A	\$18.56	N/A	\$22.32
	FEHB 2	\$15.57	N/A	\$19.91	N/A	\$11.99
	FEHB 3	\$144.84	\$160.01	\$70.00	\$159.38	\$160.11
83902	Medicare	\$19.97	\$19.97	\$19.97	\$19.97	\$15.28
	Medicaid	\$17.63	\$18.84	\$9.00	\$19.57	\$10.50
	FEHB 1	\$21.04	N/A	N/A	N/A	\$16.86
	FEHB 2	N/A	N/A	N/A	N/A	N/A
	FEHB 3	\$9.90	\$27.70	\$19.00	\$31.00	\$19.68
83904	Medicare	\$23.58	\$23.58	\$23.58	\$23.58	\$23.58
	Medicaid	\$20.83	\$22.25	\$32.00	\$23.11	\$16.00
	FEHB 1	N/A	N/A	N/A	N/A	\$20.98
	FEHB 2	\$35.01	\$13.02	N/A	N/A	\$35.01
	FEHB 3	\$93.68	\$59.15	\$54.42	\$122.07	\$89.79
83907	Medicare	\$18.80	\$18.80	\$17.28	\$18.80	\$18.80
	Medicaid	\$12.54	\$17.54	\$8.92	\$18.42	\$13.06
	FEHB 1	\$58.80	N/A	N/A	N/A	\$15.87
	FEHB 2	N/A	N/A	N/A	N/A	N/A
	FEHB 3	\$13.00	\$33.63	\$25.20	\$25.05	\$13.00
83909	Medicare	\$23.58	\$23.58	\$23.58	\$23.58	\$23.58
	Medicaid	\$15.74	\$22.01	\$12.18	\$23.11	\$16.39
	FEHB 1	\$18.75	\$52.19	\$24.85	N/A	\$30.26
	FEHB 2	\$22.40	\$13.26	\$14.83	N/A	\$11.96
	FEHB 3	\$10.35	\$14.41	\$2.59	\$19.99	\$13.58
83912	Medicare	\$5.64	\$5.64	\$5.64	\$5.64	\$3.59
	Medicaid	\$5.25	\$2.66	\$3.00	\$5.53	\$10.18
	FEHB 1	\$5.25	\$5.25	\$5.94	N/A	\$5.94
	FEHB 2	\$4.09	\$4.85	\$5.88	\$2.35	\$5.88
	FEHB 3	\$4.95	\$5.54	\$5.00	\$5.57	\$4.95
83914	Medicare	\$23.58	\$23.58	\$23.58	\$23.58	\$23.58
	Medicaid	\$15.74	\$22.01	\$12.18	\$23.11	\$16.39
	FEHB 1	\$33.02	N/A	\$15.49	N/A	\$18.20
	FEHB 2	\$11.86	\$19.17	\$19.17	N/A	\$11.99
	FEHB 3	\$287.90	\$392.32	\$82.88	\$383.12	\$394.19
88271	Medicare	\$30.14	\$30.14	\$30.14	\$30.14	\$20.37
	Medicaid	\$26.61	\$28.43	\$84.00	\$29.54	\$14.00
	FEHB 1	\$48.00	N/A	N/A	N/A	\$31.75
	FEHB 2	N/A	N/A	\$68.93	N/A	\$76.00
	FEHB 3	\$179.58	\$232.56	\$91.00	\$23.39	\$78.86

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Table D-1: Medicare Clinical Laboratory Fee Schedule, State Medicaid Program, and Federal Employee Health Benefit Payment Rates for Selected Genetic Test Codes (Continued)

Current Procedural Terminology Code	Insurer	State				
		GA	HI	IA	ID	IL
83890	Medicare	\$5.55	\$5.64	\$5.64	\$5.64	\$5.64
	Medicaid	\$4.96	\$5.54	\$5.36	\$5.60	\$5.25
	FEHB 1	\$7.35	N/A	\$56.32	N/A	\$7.64
	FEHB 2	\$7.30	N/A	N/A	N/A	N/A
	FEHB 3	\$4.34	N/A	\$7.00	\$6.66	\$7.00
83891	Medicare	\$5.55	\$5.64	\$5.64	\$5.64	\$5.64
	Medicaid	\$4.96	\$5.54	\$5.36	\$5.60	\$5.25
	FEHB 1	\$5.94	N/A	N/A	\$5.78	\$2.92
	FEHB 2	\$5.88	N/A	N/A	N/A	\$7.81
	FEHB 3	\$4.95	\$7.42	\$6.52	\$4.45	\$4.95
83892	Medicare	\$5.55	\$5.64	\$5.64	\$5.64	\$5.64
	Medicaid	\$4.96	\$5.54	\$5.36	\$5.60	\$5.05
	FEHB 1	\$5.46	N/A	N/A	N/A	N/A
	FEHB 2	\$5.94	N/A	N/A	N/A	\$7.00
	FEHB 3	\$9.90	\$15.20	\$21.00	N/A	\$9.90
83894	Medicare	\$5.55	\$5.64	\$5.64	\$5.64	\$5.64
	Medicaid	\$4.96	\$5.54	\$5.36	\$5.60	\$5.05
	FEHB 1	\$5.26	N/A	N/A	N/A	N/A
	FEHB 2	\$14.94	N/A	N/A	N/A	\$14.94
	FEHB 3	\$5.46	\$19.00	\$12.00	\$3.94	\$5.85
83896	Medicare	\$5.55	\$5.64	\$5.64	\$5.64	\$5.64
	Medicaid	\$4.96	\$5.54	\$5.36	\$5.60	\$5.25
	FEHB 1	\$5.46	N/A	\$45.07	N/A	\$9.26
	FEHB 2	\$5.88	N/A	N/A	N/A	\$10.64
	FEHB 3	\$9.90	\$7.23	\$14.00	\$30.00	\$9.90
83897	Medicare	\$5.55	\$5.64	\$5.64	\$5.64	\$5.64
	Medicaid	\$4.96	\$5.54	\$5.36	\$5.60	\$5.25
	FEHB 1	N/A	N/A	N/A	N/A	N/A
	FEHB 2	N/A	N/A	N/A	N/A	N/A
	FEHB 3	\$4.41	\$7.23	N/A	N/A	\$7.42
83898	Medicare	\$5.40	\$23.58	\$23.58	\$5.80	\$23.58
	Medicaid	\$4.83	\$23.17	\$22.40	\$5.75	\$21.90
	FEHB 1	\$24.19	N/A	\$218.52	\$22.66	\$36.54
	FEHB 2	\$35.01	N/A	N/A	N/A	\$36.00
	FEHB 3	\$10.00	\$168.02	\$34.00	\$32.94	\$20.34
83900	Medicare	\$10.82	\$47.18	\$47.18	\$11.58	\$47.18
	Medicaid	\$9.67	\$28.10	\$44.82	\$11.50	\$28.10
	FEHB 1	\$65.42	N/A	N/A	N/A	\$44.85
	FEHB 2	\$37.47	N/A	N/A	N/A	\$32.47
	FEHB 3	\$10.56	\$60.52	\$78.27	\$47.78	\$34.00

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Table D-1: Medicare Clinical Laboratory Fee Schedule, State Medicaid Program, and Federal Employee Health Benefit Payment Rates for Selected Genetic Test Codes (Continued)

Current Procedural Terminology Code	Insurer	State				
		GA	HI	IA	ID	IL
83901	Medicare	\$5.40	\$23.58	\$23.58	\$5.80	\$23.58
	Medicaid	\$4.83	\$23.17	\$22.40	\$5.75	\$21.90
	FEHB 1	\$24.85	N/A	N/A	N/A	\$12.26
	FEHB 2	\$15.00	N/A	N/A	N/A	\$22.88
	FEHB 3	\$73.92	\$665.72	\$5.22	\$93.91	\$221.00
83902	Medicare	\$17.82	\$19.97	\$19.97	\$5.80	\$19.97
	Medicaid	\$15.92	\$19.61	\$18.97	\$5.75	\$18.50
	FEHB 1	\$5.26	N/A	N/A	N/A	\$40.80
	FEHB 2	\$36.60	N/A	N/A	N/A	N/A
	FEHB 3	\$19.00	N/A	\$23.00	\$14.01	\$23.00
83904	Medicare	\$5.40	\$23.58	\$23.58	\$5.80	\$23.58
	Medicaid	\$4.83	\$23.17	\$22.40	\$5.75	\$21.90
	FEHB 1	\$35.98	N/A	N/A	N/A	N/A
	FEHB 2	\$35.01	N/A	N/A	N/A	N/A
	FEHB 3	\$32.07	\$272.34	\$90.00	\$0.00	\$371.01
83907	Medicare	\$18.80	\$18.80	\$18.80	\$18.80	\$18.80
	Medicaid	\$16.79	\$13.06	\$17.86	\$18.66	\$11.19
	FEHB 1	\$33.02	N/A	N/A	N/A	N/A
	FEHB 2	N/A	N/A	N/A	N/A	N/A
	FEHB 3	\$17.88	N/A	\$22.00	\$13.12	\$17.88
83909	Medicare	\$5.40	\$23.58	\$23.58	\$5.80	\$23.58
	Medicaid	\$4.83	\$16.39	\$22.40	\$5.75	\$14.05
	FEHB 1	\$30.27	N/A	N/A	\$30.00	\$102.33
	FEHB 2	\$13.49	N/A	N/A	N/A	\$12.26
	FEHB 3	\$12.29	\$40.75	\$48.00	\$345.60	\$17.25
83912	Medicare	\$5.55	\$5.64	\$5.64	\$5.64	\$5.64
	Medicaid	\$4.96	\$5.60	N/A	\$5.60	\$5.25
	FEHB 1	\$5.46	N/A	\$54.95	\$5.25	\$9.26
	FEHB 2	\$5.88	N/A	N/A	N/A	\$10.69
	FEHB 3	\$4.95	\$8.40	\$7.00	\$5.36	\$22.33
83914	Medicare	\$5.40	\$23.58	\$23.58	\$5.80	\$23.58
	Medicaid	\$4.83	\$16.39	\$22.40	\$5.75	\$14.05
	FEHB 1	\$24.85	N/A	N/A	\$38.82	\$6.14
	FEHB 2	\$18.74	N/A	N/A	N/A	\$12.69
	FEHB 3	\$215.51	\$394.19	\$82.88	\$229.04	\$340.00
88271	Medicare	\$30.14	\$30.14	\$30.14	\$20.37	\$20.37
	Medicaid	\$26.94	\$29.60	\$28.63	\$20.22	\$18.90
	FEHB 1	\$30.00	N/A	N/A	N/A	N/A
	FEHB 2	\$88.95	N/A	N/A	N/A	N/A
	FEHB 3	\$86.04	N/A	\$442.00	\$51.98	\$109.50

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Table D-1: Medicare Clinical Laboratory Fee Schedule, State Medicaid Program, and Federal Employee Health Benefit Payment Rates for Selected Genetic Test Codes (Continued)

Current Procedural Terminology Code	Insurer	State				
		IN	KS*	KY	LA	MA
83890	Medicare	\$5.64	\$3.29/\$5.64*	\$5.55	\$5.64	\$5.64
	Medicaid	\$5.54	\$5.54	\$5.55	\$4.15	\$4.18
	FEHB 1	\$8.77	N/A	N/A	N/A	\$9.36
	FEHB 2	N/A	N/A	\$5.65	\$10.83	N/A
	FEHB 3	\$7.18	\$5.55	\$4.55	\$7.24	\$6.26
83891	Medicare	\$5.64	\$3.29/\$5.64*	\$5.55	\$5.64	\$5.64
	Medicaid	\$5.54	\$5.54	\$5.55	\$4.56	\$4.18
	FEHB 1	\$4.26	\$6.01	\$9.64	\$5.04	\$9.36
	FEHB 2	\$5.06	N/A	\$5.88	\$5.88	\$5.88
	FEHB 3	\$3.51	\$4.95	\$2.92	\$4.95	\$6.26
83892	Medicare	\$5.64	\$3.29/\$5.64*	\$5.55	\$5.64	\$5.64
	Medicaid	\$5.54	\$5.54	\$5.55	\$4.15	\$4.18
	FEHB 1	N/A	\$5.94	\$5.25	\$16.52	N/A
	FEHB 2	\$14.94	N/A	\$14.94	\$7.05	\$5.88
	FEHB 3	\$7.90	\$9.90	\$10.66	\$9.90	\$6.26
83894	Medicare	\$5.64	\$3.29/\$5.64*	\$5.55	\$5.64	\$5.64
	Medicaid	\$5.54	\$5.54	\$5.55	\$4.15	\$4.18
	FEHB 1	N/A	\$5.94	N/A	\$28.00	N/A
	FEHB 2	\$24.00	N/A	\$24.00	\$24.00	N/A
	FEHB 3	\$7.63	\$5.00	\$16.53	\$8.88	\$16.20
83896	Medicare	\$5.64	\$3.29/\$5.64*	\$5.55	\$5.64	\$5.64
	Medicaid	\$5.54	\$5.54	\$5.55	\$4.15	\$4.18
	FEHB 1	\$5.60	\$5.46	\$5.25	\$16.52	\$9.36
	FEHB 2	\$5.88	N/A	\$5.77	\$5.88	\$5.88
	FEHB 3	\$23.69	\$9.90	\$19.52	\$9.90	\$12.52
83897	Medicare	\$5.64	\$3.29/\$5.64*	\$5.55	\$5.64	\$5.64
	Medicaid	\$5.54	\$5.54	\$5.55	\$4.56	\$4.18
	FEHB 1	N/A	N/A	N/A	\$23.80	N/A
	FEHB 2	N/A	N/A	N/A	N/A	N/A
	FEHB 3	N/A	N/A	N/A	\$15.52	\$111.32
83898	Medicare	\$23.58	\$23.58	\$23.58	\$23.58	\$6.14
	Medicaid	\$23.17	\$21.60	\$23.58	\$17.32	\$4.55
	FEHB 1	\$23.42	\$23.75	N/A	\$21.08	\$16.42
	FEHB 2	\$35.01	N/A	\$30.01	\$35.51	N/A
	FEHB 3	\$26.94	\$43.89	\$20.11	\$20.34	\$29.15
83900	Medicare	\$47.18	\$47.18	\$47.18	\$47.18	\$12.29
	Medicaid	\$46.84	\$39.81	\$47.18	\$19.60	\$9.11
	FEHB 1	\$63.24	\$92.46	N/A	\$106.02	N/A
	FEHB 2	\$24.57	N/A	\$24.57	\$40.36	N/A
	FEHB 3	\$29.37	\$41.12	\$31.77	\$36.02	\$46.50

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* Four States (CA, KS, MO, and NY) are divided into multiple Medicare carrier jurisdictions. Each jurisdiction may have a different price for some Current Procedural Terminology codes. In jurisdictions where prices differ, differences are signified using “/” between each jurisdiction’s price.

Table D-1: Medicare Clinical Laboratory Fee Schedule, State Medicaid Program, and Federal Employee Health Benefit Payment Rates for Selected Genetic Test Codes (Continued)

Current Procedural Terminology Code	Insurer	State				
		IN	KS*	KY	LA	MA
83901	Medicare	\$23.58	\$23.58	\$23.58	\$23.58	\$6.14
	Medicaid	\$23.17	\$5.54	\$23.58	\$19.04	\$4.55
	FEHB 1	\$30.15	N/A	N/A	\$12.26	N/A
	FEHB 2	\$12.26	N/A	\$12.26	\$37.13	N/A
	FEHB 3	\$87.08	\$960.00	\$157.82	\$159.38	\$116.05
83902	Medicare	\$19.97	\$19.97	\$19.97	\$19.97	\$5.80
	Medicaid	\$19.61	N/A	\$19.97	\$16.11	\$4.29
	FEHB 1	N/A	\$5.47	\$41.40	N/A	\$5.26
	FEHB 2	N/A	N/A	N/A	N/A	N/A
	FEHB 3	\$12.43	\$17.67	\$5.00	\$40.66	\$13.09
83904	Medicare	\$23.58	\$23.58	\$23.58	\$23.58	\$6.14
	Medicaid	\$23.17	\$21.60	\$23.58	\$19.04	\$4.55
	FEHB 1	\$16.25	N/A	N/A	N/A	\$22.66
	FEHB 2	\$13.02	N/A	N/A	N/A	N/A
	FEHB 3	\$44.04	\$347.74	\$43.22	\$1,087.05	\$71.88
83907	Medicare	\$18.80	\$18.80	\$12.65	\$18.80	\$18.80
	Medicaid	\$18.66	\$15.86	\$12.65	\$15.34	\$13.93
	FEHB 1	\$30.00	N/A	N/A	N/A	N/A
	FEHB 2	N/A	N/A	N/A	N/A	N/A
	FEHB 3	\$20.64	\$16.21	\$13.00	\$20.56	\$13.00
83909	Medicare	\$23.58	\$23.58	\$23.58	\$23.58	\$6.14
	Medicaid	\$23.42	\$19.91	\$23.58	\$19.25	\$4.55
	FEHB 1	\$24.21	\$30.27	N/A	\$6.13	N/A
	FEHB 2	\$13.02	N/A	\$12.26	\$12.26	N/A
	FEHB 3	\$21.62	\$21.91	\$11.65	\$24.01	\$23.25
83912	Medicare	\$5.64	\$3.29/\$5.64*	\$5.55	\$5.64	\$5.64
	Medicaid	\$5.54	\$5.54	\$5.55	\$4.15	\$4.18
	FEHB 1	\$5.60	\$5.46	\$5.25	\$17.96	\$7.31
	FEHB 2	\$4.85	N/A	\$5.65	\$8.17	\$31.86
	FEHB 3	\$4.15	\$4.95	\$14.72	\$5.74	\$6.26
83914	Medicare	\$23.58	\$23.58	\$23.58	\$23.58	\$6.14
	Medicaid	\$23.42	\$19.91	\$23.58	\$19.25	\$8.75
	FEHB 1	\$14.78	\$34.30	N/A	\$39.97	N/A
	FEHB 2	\$19.17	N/A	\$12.28	\$12.28	N/A
	FEHB 3	\$94.32	\$232.50	\$327.04	\$51.03	\$232.50
88271	Medicare	\$20.37	\$30.14	\$20.37	\$30.14	\$30.14
	Medicaid	\$20.00	\$25.44	\$20.37	\$24.32	\$22.35
	FEHB 1	\$69.27	N/A	N/A	\$31.75	N/A
	FEHB 2	N/A	N/A	N/A	N/A	N/A
	FEHB 3	\$76.08	\$168.86	\$71.75	\$40.04	\$66.88

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Table D-1: Medicare Clinical Laboratory Fee Schedule, State Medicaid Program, and Federal Employee Health Benefit Payment Rates for Selected Genetic Test Codes (Continued)

Current Procedural Terminology Code	Insurer	State				
		MD	ME	MI	MN	MO*
83890	Medicare	\$5.64	\$5.64	\$5.64	\$5.64	\$3.29/\$5.64*
	Medicaid	\$4.27	\$5.67	\$4.41	\$5.64	\$3.07
	FEHB 1	\$5.94	N/A	N/A	N/A	N/A
	FEHB 2	\$4.76	N/A	N/A	N/A	\$51.82
	FEHB 3	\$5.00	\$6.18	\$5.89	\$8.09	\$4.71
83891	Medicare	\$5.64	\$5.64	\$5.64	\$5.64	\$3.29/\$5.64*
	Medicaid	\$4.27	\$5.54	\$4.41	\$5.64	\$3.07
	FEHB 1	\$5.79	\$5.04	N/A	\$81.18	\$5.78
	FEHB 2	\$4.76	\$4.56	\$4.23	N/A	\$5.88
	FEHB 3	\$4.95	\$5.54	\$6.16	\$8.09	\$4.95
83892	Medicare	\$5.64	\$5.64	\$5.64	\$5.64	\$3.29/\$5.64*
	Medicaid	\$4.27	\$5.67	\$4.42	\$5.64	\$3.07
	FEHB 1	\$5.25	N/A	N/A	\$13.60	\$5.25
	FEHB 2	\$5.88	N/A	\$5.88	N/A	\$5.88
	FEHB 3	\$9.90	\$6.26	\$9.72	\$8.09	\$9.90
83894	Medicare	\$5.64	\$5.64	\$5.64	\$5.64	\$3.29/\$5.64*
	Medicaid	\$4.27	\$5.67	\$4.41	\$5.64	\$3.07
	FEHB 1	\$5.36	N/A	N/A	\$16.15	N/A
	FEHB 2	\$4.76	N/A	N/A	N/A	\$8.26
	FEHB 3	\$5.00	\$15.45	\$5.60	\$8.09	\$5.26
83896	Medicare	\$5.64	\$5.64	\$5.64	\$5.64	\$3.29/\$5.64*
	Medicaid	\$4.27	\$5.67	\$4.41	\$5.64	\$3.07
	FEHB 1	\$5.46	\$5.04	N/A	N/A	\$5.25
	FEHB 2	\$4.76	N/A	N/A	N/A	\$9.02
	FEHB 3	\$9.90	\$20.28	\$43.91	\$8.87	\$11.02
83897	Medicare	\$5.64	\$5.64	\$5.64	\$5.64	\$3.29/\$5.64*
	Medicaid	\$4.27	\$5.54	\$4.41	\$5.64	\$3.07
	FEHB 1	N/A	N/A	N/A	N/A	N/A
	FEHB 2	N/A	N/A	N/A	N/A	N/A
	FEHB 3	N/A	\$9.02	N/A	\$41.61	N/A
83898	Medicare	\$14.32	\$6.14	\$23.58	\$23.58	\$23.58
	Medicaid	\$10.84	\$6.03	\$15.90	\$23.58	\$18.07
	FEHB 1	\$22.65	N/A	N/A	N/A	N/A
	FEHB 2	\$19.91	N/A	\$35.97	N/A	\$16.22
	FEHB 3	\$15.00	\$27.28	\$31.63	\$33.85	\$46.00
83900	Medicare	\$28.65	\$12.29	\$47.18	\$47.18	\$47.18
	Medicaid	\$21.66	\$12.20	\$36.84	\$47.18	\$44.06
	FEHB 1	\$29.89	\$147.00	N/A	\$104.55	\$104.41
	FEHB 2	\$40.36	\$24.57	\$32.47	N/A	\$40.36
	FEHB 3	\$12.00	\$13.23	\$51.52	\$42.60	\$28.33

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* Four States (CA, KS, MO, and NY) are divided into multiple Medicare carrier jurisdictions. Each jurisdiction may have a different price for some Current Procedural Terminology codes. In jurisdictions where prices differ, differences are signified using "/" between each jurisdiction's price.

Table D-1: Medicare Clinical Laboratory Fee Schedule, State Medicaid Program, and Federal Employee Health Benefit Payment Rates for Selected Genetic Test Codes (Continued)

Current Procedural Terminology Code	Insurer	State				
		MD	ME	MI	MN	MO*
83901	Medicare	\$14.32	\$6.14	\$23.58	\$23.58	\$23.58
	Medicaid	\$10.84	\$6.03	\$18.42	\$23.58	\$22.02
	FEHB 1	\$24.76	\$21.08	N/A	N/A	N/A
	FEHB 2	\$22.88	\$12.31	\$12.26	N/A	\$12.28
	FEHB 3	\$95.00	\$88.40	\$467.82	\$0.90	\$114.73
83902	Medicare	\$14.32	\$5.80	\$19.97	\$16.56	\$19.97
	Medicaid	\$10.39	\$5.69	\$15.58	\$16.56	\$18.65
	FEHB 1	\$5.26	N/A	N/A	N/A	\$5.26
	FEHB 2	N/A	N/A	N/A	N/A	N/A
	FEHB 3	\$13.10	\$46.30	\$31.00	\$37.08	\$20.00
83904	Medicare	\$14.32	\$6.14	\$23.58	\$23.58	\$23.58
	Medicaid	\$10.84	\$6.03	\$18.42	\$23.58	\$22.02
	FEHB 1	\$22.66	N/A	N/A	N/A	N/A
	FEHB 2	\$12.18	N/A	\$35.97	N/A	\$44.38
	FEHB 3	\$89.79	\$186.00	\$447.48	\$24.61	\$31.19
83907	Medicare	\$18.80	\$18.80	\$6.81	\$18.80	\$18.80
	Medicaid	\$14.21	\$18.66	\$5.08	\$18.80	\$17.55
	FEHB 1	N/A	\$58.80	N/A	N/A	N/A
	FEHB 2	N/A	N/A	N/A	N/A	N/A
	FEHB 3	\$16.21	\$20.85	\$18.53	\$26.97	\$19.00
83909	Medicare	\$14.32	\$6.14	\$23.58	\$23.58	\$23.58
	Medicaid	\$10.84	\$6.10	\$18.42	\$23.58	\$22.02
	FEHB 1	\$32.17	N/A	N/A	N/A	\$52.19
	FEHB 2	\$13.49	\$12.26	\$12.88	N/A	\$13.49
	FEHB 3	\$14.88	\$23.25	\$25.76	\$17.25	\$20.34
83912	Medicare	\$5.64	\$5.64	\$5.64	\$5.64	\$3.29/\$5.64*
	Medicaid	\$5.60	\$5.67	\$4.14	\$5.64	\$3.07
	FEHB 1	\$5.25	N/A	N/A	\$46.75	\$5.25
	FEHB 2	\$5.60	\$8.09	\$5.06	N/A	\$6.94
	FEHB 3	\$5.00	\$5.69	\$26.70	\$30.98	\$4.95
83914	Medicare	\$14.32	\$6.14	\$23.58	\$23.58	\$23.58
	Medicaid	\$10.84	\$6.10	\$18.42	\$23.58	\$22.02
	FEHB 1	N/A	\$73.80	N/A	N/A	N/A
	FEHB 2	\$19.17	\$12.26	\$12.28	N/A	\$12.27
	FEHB 3	\$181.30	\$232.50	\$51.52	\$0.90	\$142.38
88271	Medicare	\$30.14	\$30.14	\$20.37	\$30.14	\$30.14
	Medicaid	\$22.80	\$31.27	\$16.07	\$30.14	\$28.14
	FEHB 1	N/A	\$28.45	N/A	N/A	N/A
	FEHB 2	\$41.90	N/A	N/A	N/A	N/A
	FEHB 3	\$91.00	\$241.66	\$93.56	\$26.52	\$126.12

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Table D-1: Medicare Clinical Laboratory Fee Schedule, State Medicaid Program, and Federal Employee Health Benefit Payment Rates for Selected Genetic Test Codes (Continued)

Current Procedural Terminology Code	Insurer	State				
		MS	MT	NC	ND	NE
83890	Medicare	\$5.64	\$5.64	\$5.64	\$5.64	\$5.64
	Medicaid	\$5.17	\$5.64	\$5.10	\$5.74	\$5.64
	FEHB 1	N/A	N/A	N/A	N/A	N/A
	FEHB 2	N/A	N/A	\$36.00	N/A	\$28.00
	FEHB 3	\$23.00	\$5.00	\$3.02	\$7.00	\$10.06
83891	Medicare	\$5.64	\$5.64	\$5.64	\$5.64	\$5.64
	Medicaid	\$5.17	\$5.64	\$5.10	\$5.74	\$5.64
	FEHB 1	\$5.94	N/A	\$5.94	N/A	\$5.04
	FEHB 2	\$15.96	\$11.76	\$5.88	N/A	\$10.92
	FEHB 3	\$4.95	\$2.54	\$4.95	\$12.61	\$9.76
83892	Medicare	\$5.64	\$5.64	\$5.64	\$5.64	\$5.64
	Medicaid	\$5.17	\$5.64	\$5.10	\$5.74	\$5.64
	FEHB 1	\$5.94	N/A	\$5.46	N/A	\$8.04
	FEHB 2	N/A	N/A	\$23.50	N/A	\$22.50
	FEHB 3	\$9.90	\$18.64	\$9.90	\$9.13	\$9.76
83894	Medicare	\$5.64	\$5.64	\$5.64	\$5.64	\$5.64
	Medicaid	\$5.17	\$5.64	\$5.10	\$5.74	\$5.64
	FEHB 1	N/A	N/A	\$5.94	N/A	N/A
	FEHB 2	\$15.96	N/A	\$24.00	N/A	\$39.00
	FEHB 3	\$15.00	N/A	\$10.00	N/A	\$9.76
83896	Medicare	\$5.64	\$5.64	\$5.64	\$5.64	\$5.64
	Medicaid	\$5.17	\$5.64	\$5.10	\$5.74	\$5.64
	FEHB 1	N/A	N/A	N/A	N/A	\$6.54
	FEHB 2	N/A	N/A	\$22.00	N/A	\$39.00
	FEHB 3	\$9.90	\$183.17	\$9.90	\$38.96	\$10.28
83897	Medicare	\$5.64	\$5.64	\$5.64	\$5.64	\$5.64
	Medicaid	\$5.17	\$5.64	\$5.10	\$5.74	\$5.64
	FEHB 1	N/A	N/A	N/A	N/A	N/A
	FEHB 2	N/A	N/A	N/A	N/A	\$10.92
	FEHB 3	N/A	N/A	N/A	N/A	N/A
83898	Medicare	\$23.58	\$23.58	\$5.80	\$23.58	\$23.58
	Medicaid	\$21.61	\$23.58	\$5.23	\$24.01	\$23.58
	FEHB 1	N/A	N/A	N/A	N/A	\$22.65
	FEHB 2	\$20.00	\$83.00	\$35.01	N/A	N/A
	FEHB 3	\$35.00	\$20.51	\$10.00	\$52.25	\$71.50
83900	Medicare	\$47.18	\$47.18	\$11.58	\$47.18	\$47.18
	Medicaid	\$43.22	\$47.17	N/A	\$48.02	\$47.18
	FEHB 1	\$49.69	N/A	\$49.69	N/A	N/A
	FEHB 2	N/A	N/A	\$12.02	N/A	\$55.00
	FEHB 3	\$26.24	\$20.86	\$5.18	\$98.45	\$60.82

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Table D-1: Medicare Clinical Laboratory Fee Schedule, State Medicaid Program, and Federal Employee Health Benefit Payment Rates for Selected Genetic Test Codes (Continued)

Current Procedural Terminology Code	Insurer	State				
		MS	MT	NC	ND	NE
83901	Medicare	\$23.58	\$23.58	\$5.80	\$23.58	\$23.58
	Medicaid	\$21.61	\$23.58	\$5.23	\$24.01	\$23.58
	FEHB 1	\$24.85	N/A	\$24.85	N/A	N/A
	FEHB 2	N/A	N/A	N/A	N/A	N/A
	FEHB 3	\$82.50	\$82.76	\$52.36	N/A	\$167.40
83902	Medicare	\$5.80	\$19.97	\$5.80	\$19.97	\$19.97
	Medicaid	\$5.31	\$19.96	\$5.23	\$20.33	\$19.97
	FEHB 1	N/A	N/A	N/A	N/A	\$28.46
	FEHB 2	N/A	N/A	N/A	N/A	N/A
	FEHB 3	N/A	\$30.50	\$10.00	\$43.00	\$7.67
83904	Medicare	\$23.58	\$23.58	\$5.80	\$23.58	\$23.58
	Medicaid	\$21.61	\$23.58	\$5.23	\$24.01	\$23.58
	FEHB 1	N/A	N/A	N/A	N/A	N/A
	FEHB 2	N/A	N/A	\$13.02	N/A	N/A
	FEHB 3	\$16.52	N/A	\$193.05	\$78.00	\$100.00
83907	Medicare	\$9.83	\$18.80	\$18.80	\$18.80	\$18.80
	Medicaid	\$9.01	\$18.79	\$16.98	N/A	\$18.80
	FEHB 1	N/A	N/A	N/A	N/A	\$58.80
	FEHB 2	N/A	N/A	N/A	N/A	N/A
	FEHB 3	\$16.21	N/A	\$10.00	\$20.85	\$28.70
83909	Medicare	\$23.58	\$23.58	\$5.80	\$23.58	\$23.58
	Medicaid	\$21.61	\$23.58	\$5.23	\$24.01	\$23.58
	FEHB 1	\$24.85	N/A	\$31.07	N/A	\$3.73
	FEHB 2	N/A	N/A	\$13.26	N/A	N/A
	FEHB 3	\$23.25	N/A	\$2.59	\$86.00	\$25.41
83912	Medicare	\$5.64	\$5.64	\$5.64	\$5.64	\$5.64
	Medicaid	\$5.17	\$5.64	\$5.10	\$5.74	\$5.64
	FEHB 1	\$5.94	N/A	\$5.94	N/A	\$5.25
	FEHB 2	\$15.96	\$37.00	\$26.30	N/A	\$37.00
	FEHB 3	\$4.95	\$2.54	\$4.95	\$12.50	\$9.76
83914	Medicare	\$23.58	\$23.58	\$5.80	\$23.58	\$23.58
	Medicaid	\$21.61	\$23.58	\$5.23	\$24.01	\$23.58
	FEHB 1	\$24.80	N/A	N/A	N/A	\$59.79
	FEHB 2	N/A	N/A	\$12.59	N/A	\$23.00
	FEHB 3	\$167.70	\$268.63	\$82.88	\$81.50	\$210.00
88271	Medicare	\$30.14	\$20.37	\$20.37	\$30.14	\$30.14
	Medicaid	\$27.61	\$20.37	\$18.40	\$30.68	\$30.14
	FEHB 1	N/A	N/A	N/A	N/A	N/A
	FEHB 2	\$30.00	N/A	N/A	N/A	N/A
	FEHB 3	N/A	\$182.00	\$136.29	\$81.44	\$520.00

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Table D-1: Medicare Clinical Laboratory Fee Schedule, State Medicaid Program, and Federal Employee Health Benefit Payment Rates for Selected Genetic Test Codes (Continued)

Current Procedural Terminology Code	Insurer	State				
		NH	NJ	NM	NV	NY
83890	Medicare	\$5.64	\$5.64	\$5.64	\$5.64	\$5.64
	Medicaid	\$3.44	\$4.51	\$5.64	\$2.80	\$5.54
	FEHB 1	N/A	N/A	N/A	N/A	N/A
	FEHB 2	N/A	N/A	N/A	N/A	N/A
	FEHB 3	\$5.81	\$5.00	\$38.01	\$4.93	\$6.26
83891	Medicare	\$5.64	\$5.64	\$5.64	\$5.64	\$5.64
	Medicaid	\$3.32	\$4.51	\$5.64	\$2.80	\$5.54
	FEHB 1	N/A	\$5.78	\$5.78	\$6.72	\$10.97
	FEHB 2	N/A	\$5.88	\$11.91	\$5.88	\$5.88
	FEHB 3	\$6.26	\$4.95	\$3.94	\$5.00	\$4.82
83892	Medicare	\$5.64	\$5.64	\$5.64	\$5.64	\$5.64
	Medicaid	\$3.44	\$4.51	\$5.64	\$2.80	\$5.54
	FEHB 1	N/A	\$5.25	N/A	\$5.40	\$16.00
	FEHB 2	N/A	\$24.00	\$5.04	\$5.88	\$10.94
	FEHB 3	\$16.20	\$9.90	\$7.46	\$7.46	\$7.84
83894	Medicare	\$5.64	\$5.64	\$5.64	\$5.64	\$5.64
	Medicaid	\$3.44	\$4.51	\$5.64	\$2.80	\$5.54
	FEHB 1	N/A	\$4.44	N/A	N/A	\$16.00
	FEHB 2	N/A	\$6.19	\$11.91	\$24.00	\$20.00
	FEHB 3	\$6.26	\$9.64	\$3.94	\$10.00	\$6.26
83896	Medicare	\$5.64	\$5.64	\$5.64	\$5.64	\$5.64
	Medicaid	\$3.44	\$4.51	\$5.64	\$2.80	\$5.54
	FEHB 1	N/A	\$5.25	N/A	\$5.40	\$16.00
	FEHB 2	N/A	\$3.94	\$8.90	\$5.88	\$5.88
	FEHB 3	\$314.50	\$9.90	\$7.88	\$8.68	\$14.04
83897	Medicare	\$5.64	\$5.64	\$5.64	\$5.64	\$5.64
	Medicaid	\$3.32	\$4.51	\$5.64	\$2.80	\$5.54
	FEHB 1	N/A	N/A	N/A	N/A	\$22.00
	FEHB 2	N/A	\$3.00	N/A	N/A	\$22.00
	FEHB 3	N/A	\$21.13	N/A	\$15.00	\$8.86
83898	Medicare	\$6.14	\$23.58	\$23.58	\$23.58	\$23.58
	Medicaid	\$3.75	\$18.86	\$23.58	\$11.72	\$15.89
	FEHB 1	N/A	\$22.65	\$22.65	\$22.32	N/A
	FEHB 2	N/A	\$35.51	\$49.82	\$35.01	\$35.01
	FEHB 3	\$223.74	\$35.00	\$32.94	\$26.53	\$41.86
83900	Medicare	\$12.29	\$47.18	\$47.18	\$47.18	\$47.18
	Medicaid	\$9.76	\$37.74	\$47.18	\$23.42	\$31.78
	FEHB 1	N/A	\$37.47	\$46.03	\$67.23	\$57.29
	FEHB 2	N/A	\$40.36	\$40.36	\$40.36	\$28.46
	FEHB 3	\$46.50	\$32.08	\$32.94	\$23.42	\$33.61

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Table D-1: Medicare Clinical Laboratory Fee Schedule, State Medicaid Program, and Federal Employee Health Benefit Payment Rates for Selected Genetic Test Codes (Continued)

Current Procedural Terminology Code	Insurer	State				
		NH	NJ	NM	NV	NY*
83901	Medicare	\$6.14	\$23.58	\$23.58	\$23.58	\$23.58
	Medicaid	\$3.62	\$18.86	\$10.70	\$11.72	\$15.89
	FEHB 1	N/A	\$9.93	N/A	\$33.61	\$25.42
	FEHB 2	N/A	\$22.88	\$26.22	\$12.27	\$12.05
	FEHB 3	\$116.25	\$121.75	\$297.08	\$99.12	\$129.42
83902	Medicare	\$5.80	\$19.97	\$10.70	\$19.97	\$19.97
	Medicaid	\$4.55	\$15.98	\$23.58	\$9.92	\$13.45
	FEHB 1	N/A	N/A	N/A	\$17.15	N/A
	FEHB 2	N/A	N/A	N/A	N/A	N/A
	FEHB 3	N/A	\$16.93	\$7.57	\$8.79	\$13.98
83904	Medicare	\$6.14	\$23.58	\$23.58	\$23.58	\$23.58
	Medicaid	\$3.62	\$18.86	\$23.58	\$11.72	\$23.42
	FEHB 1	N/A	N/A	N/A	N/A	N/A
	FEHB 2	N/A	N/A	N/A	N/A	\$35.01
	FEHB 3	\$268.64	\$46.50	\$1,367.08	\$89.79	\$58.72
83907	Medicare	\$18.80	\$18.80	\$18.80	\$18.80	\$18.80/\$4.95/\$18.80*
	Medicaid	\$11.48	\$15.04	\$18.80	\$9.33	\$5.54
	FEHB 1	N/A	N/A	N/A	N/A	N/A
	FEHB 2	N/A	N/A	\$47.60	N/A	N/A
	FEHB 3	\$17.88	\$16.79	\$13.12	\$24.87	\$20.85
83909	Medicare	\$6.14	\$23.58	\$23.58	\$23.58	\$23.58
	Medicaid	\$3.75	\$18.86	\$23.58	\$11.71	\$23.42
	FEHB 1	N/A	\$54.12	\$18.75	\$33.61	\$30.27
	FEHB 2	N/A	\$13.38	\$13.49	\$13.49	\$13.49
	FEHB 3	\$23.25	\$19.81	\$15.61	\$16.24	\$23.25
83912	Medicare	\$5.64	\$5.64	\$5.64	\$5.64	\$5.64
	Medicaid	\$4.43	\$4.51	\$5.64	\$2.80	\$20.00
	FEHB 1	N/A	\$5.25	\$5.25	\$17.15	\$9.47
	FEHB 2	N/A	\$15.84	\$13.18	\$5.88	\$5.88
	FEHB 3	\$36.47	\$5.00	\$11.46	\$5.00	\$5.57
83914	Medicare	\$6.14	\$23.58	\$23.58	\$23.58	\$23.58
	Medicaid	\$3.75	\$18.86	\$23.58	\$11.71	\$23.42
	FEHB 1	N/A	\$23.94	\$33.02	N/A	\$18.20
	FEHB 2	N/A	\$13.27	\$19.17	\$13.68	\$13.27
	FEHB 3	\$232.50	\$383.12	\$271.04	\$157.95	\$232.50
88271	Medicare	\$30.14	\$25.47	\$30.14	\$30.14	\$25.47/\$20.37/\$20.37*
	Medicaid	\$18.41	\$20.38	\$30.14	\$14.97	\$29.60
	FEHB 1	N/A	N/A	N/A	\$30.00	N/A
	FEHB 2	N/A	N/A	N/A	N/A	N/A
	FEHB 3	N/A	\$109.20	\$289.02	\$155.94	\$150.00

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* Four States (CA, KS, MO, and NY) are divided into multiple Medicare carrier jurisdictions. Each jurisdiction may have a different price for some Current Procedural Terminology codes. In jurisdictions where prices differ, differences are signified using "/" between each jurisdiction's price.

Table D-1: Medicare Clinical Laboratory Fee Schedule, State Medicaid Program, and Federal Employee Health Benefit Payment Rates for Selected Genetic Test Codes (Continued)

Current Procedural Terminology Code	Insurer	State				
		OH	OK	OR	PA	RI
83890	Medicare	\$5.64	\$5.64	\$5.64	\$5.64	\$5.64
	Medicaid	\$5.37	\$5.18	\$4.25	\$5.54	\$3.36
	FEHB 1	N/A	N/A	N/A	N/A	N/A
	FEHB 2	\$28.38	N/A	\$9.51	\$5.88	N/A
	FEHB 3	\$5.60	\$6.60	\$4.86	\$4.09	\$10.09
83891	Medicare	\$5.64	\$5.64	\$5.64	\$5.64	\$5.64
	Medicaid	\$5.37	\$5.18	\$4.25	\$4.43	\$3.36
	FEHB 1	\$5.78	\$4.76	\$5.90	\$4.47	N/A
	FEHB 2	\$5.88	\$2.69	\$5.85	\$5.88	N/A
	FEHB 3	\$2.60	\$7.50	\$5.71	\$4.02	\$4.45
83892	Medicare	\$5.64	\$5.64	\$5.64	\$5.64	\$5.64
	Medicaid	\$5.37	\$5.18	\$4.25	\$5.00	\$3.36
	FEHB 1	N/A	N/A	\$5.35	N/A	N/A
	FEHB 2	\$6.19	\$2.46	N/A	\$5.88	N/A
	FEHB 3	\$8.46	\$12.00	\$9.90	\$9.90	\$16.20
83894	Medicare	\$5.64	\$5.64	\$5.64	\$5.64	\$5.64
	Medicaid	\$5.37	\$5.18	\$4.25	\$5.00	\$3.36
	FEHB 1	N/A	N/A	N/A	N/A	N/A
	FEHB 2	\$14.94	\$10.64	\$17.00	\$28.00	N/A
	FEHB 3	\$5.60	\$7.84	\$16.92	\$12.06	\$16.20
83896	Medicare	\$5.64	\$5.64	\$5.64	\$5.64	\$5.64
	Medicaid	\$5.37	\$5.18	\$4.25	\$5.54	\$3.36
	FEHB 1	\$5.25	N/A	N/A	\$5.46	N/A
	FEHB 2	\$5.88	\$2.35	\$9.01	\$5.88	N/A
	FEHB 3	\$28.00	\$13.55	\$9.90	\$9.90	\$15.65
83897	Medicare	\$5.64	\$5.64	\$5.64	\$5.64	\$5.64
	Medicaid	\$5.37	\$5.18	\$4.25	\$4.43	\$3.36
	FEHB 1	N/A	N/A	N/A	N/A	N/A
	FEHB 2	N/A	N/A	N/A	N/A	N/A
	FEHB 3	\$66.27	N/A	N/A	\$6.26	N/A
83898	Medicare	\$23.58	\$23.58	\$23.58	\$23.58	\$23.58
	Medicaid	\$22.47	\$21.67	\$17.77	\$22.50	\$14.05
	FEHB 1	\$22.65	\$22.66	\$22.31	\$23.53	N/A
	FEHB 2	\$35.01	\$9.84	\$29.85	\$35.01	N/A
	FEHB 3	\$49.04	\$64.86	\$28.81	\$41.86	\$345.60
83900	Medicare	\$47.18	\$47.18	\$47.18	\$47.18	\$47.18
	Medicaid	\$45.43	\$43.36	\$35.53	\$37.47	\$28.10
	FEHB 1	\$12.07	\$31.07	\$38.25	\$12.29	N/A
	FEHB 2	\$40.36	\$24.57	\$61.82	\$40.36	N/A
	FEHB 3	\$16.82	\$30.45	\$48.02	\$23.92	\$13.63

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Table D-1: Medicare Clinical Laboratory Fee Schedule, State Medicaid Program, and Federal Employee Health Benefit Payment Rates for Selected Genetic Test Codes (Continued)

Current Procedural Terminology Code	Insurer	State				
		OH	OK	OR	PA	RI
83901	Medicare	\$23.58	\$23.58	\$23.58	\$23.58	\$23.58
	Medicaid	\$22.47	\$21.67	\$17.77	\$18.54	\$14.05
	FEHB 1	\$11.83	\$15.65	N/A	\$12.28	N/A
	FEHB 2	\$28.07	\$11.27	\$22.32	\$30.10	N/A
	FEHB 3	\$170.51	\$119.00	\$24.01	\$155.65	N/A
83902	Medicare	\$19.97	\$10.70	\$12.09	\$19.97	\$7.62
	Medicaid	\$19.02	\$9.83	\$9.11	N/A	\$4.54
	FEHB 1	N/A	N/A	N/A	N/A	N/A
	FEHB 2	N/A	\$8.33	N/A	\$36.60	N/A
	FEHB 3	\$4.44	\$17.52	\$9.90	\$19.00	\$6.42
83904	Medicare	\$23.58	\$23.58	\$23.58	\$23.58	\$23.58
	Medicaid	\$22.47	\$21.67	\$17.77	\$18.54	\$14.05
	FEHB 1	N/A	N/A	N/A	\$23.54	N/A
	FEHB 2	N/A	N/A	\$18.50	\$35.01	N/A
	FEHB 3	\$293.40	\$38.64	N/A	\$89.79	N/A
83907	Medicare	\$16.24	\$18.35	\$18.80	\$18.80	\$18.80
	Medicaid	\$15.64	\$16.87	\$14.16	\$14.93	\$11.20
	FEHB 1	N/A	N/A	\$58.80	N/A	N/A
	FEHB 2	N/A	N/A	N/A	N/A	N/A
	FEHB 3	\$9.18	\$15.44	\$16.21	\$17.88	\$33.63
83909	Medicare	\$23.58	\$23.58	\$23.58	\$23.58	\$23.58
	Medicaid	\$22.72	\$21.67	\$17.77	\$18.74	\$14.05
	FEHB 1	\$6.03	\$30.26	\$29.51	\$6.13	N/A
	FEHB 2	\$12.26	\$12.26	\$16.70	\$9.51	N/A
	FEHB 3	\$11.65	\$23.25	\$40.68	\$11.96	\$345.60
83912	Medicare	\$5.64	\$5.64	\$5.64	\$5.64	\$5.64
	Medicaid	\$5.37	\$5.18	\$4.25	\$5.54	\$3.36
	FEHB 1	\$5.25	\$10.73	\$5.46	\$4.19	N/A
	FEHB 2	\$5.88	\$2.92	\$33.32	\$5.88	N/A
	FEHB 3	\$6.10	\$7.84	\$34.17	\$20.78	\$5.50
83914	Medicare	\$23.58	\$23.58	\$23.58	\$23.58	\$23.58
	Medicaid	\$22.72	\$21.67	\$17.77	N/A	\$14.05
	FEHB 1	\$6.03	\$27.09	\$26.71	\$6.14	N/A
	FEHB 2	\$12.69	\$12.28	\$24.14	\$12.26	N/A
	FEHB 3	\$210.25	\$232.50	\$117.38	\$383.12	\$5.88
88271	Medicare	\$30.14	\$30.14	\$30.14	\$16.97	\$30.14
	Medicaid	\$28.71	\$27.70	\$22.70	N/A	\$17.96
	FEHB 1	\$28.46	N/A	N/A	N/A	N/A
	FEHB 2	N/A	N/A	N/A	N/A	N/A
	FEHB 3	\$18.62	\$191.72	\$26.52	\$150.36	N/A

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Table D-1: Medicare Clinical Laboratory Fee Schedule, State Medicaid Program, and Federal Employee Health Benefit Payment Rates for Selected Genetic Test Codes (Continued)

Current Procedural Terminology Code	Insurer	State				
		SC	SD	TN	TX	UT
83890	Medicare	\$5.64	\$5.64	\$5.64	\$5.64	\$4.48
	Medicaid	\$5.03	\$5.54	N/A	\$5.51	\$3.85
	FEHB 1	\$3.36	\$51.82	N/A	\$9.82	\$5.94
	FEHB 2	N/A	N/A	N/A	\$36.00	\$19.23
	FEHB 3	\$5.00	\$8.25	\$4.93	\$5.00	\$5.00
83891	Medicare	\$5.64	\$5.64	\$5.64	\$5.64	\$4.48
	Medicaid	\$5.03	\$5.54	N/A	\$5.51	\$4.33
	FEHB 1	\$5.94	\$34.52	\$5.86	\$5.86	\$5.94
	FEHB 2	\$4.64	N/A	\$24.00	\$5.88	\$5.88
	FEHB 3	\$4.95	\$4.95	\$4.95	\$4.86	\$5.00
83892	Medicare	\$5.64	\$5.64	\$5.64	\$5.64	\$4.48
	Medicaid	\$5.03	\$5.54	N/A	\$5.51	\$3.85
	FEHB 1	\$5.18	\$33.02	\$5.60	\$5.94	\$5.19
	FEHB 2	N/A	N/A	\$5.88	\$12.75	\$5.88
	FEHB 3	\$9.90	\$9.90	\$9.90	\$9.90	\$7.63
83894	Medicare	\$5.64	\$5.64	\$5.64	\$5.64	\$4.48
	Medicaid	\$5.03	\$5.54	N/A	\$5.51	\$3.85
	FEHB 1	N/A	\$58.20	\$5.94	\$5.19	\$5.94
	FEHB 2	N/A	N/A	N/A	\$24.00	\$24.00
	FEHB 3	\$9.00	\$15.00	\$5.00	\$6.88	\$5.00
83896	Medicare	\$5.64	\$5.64	\$5.64	\$5.64	\$4.48
	Medicaid	\$5.03	\$5.54	N/A	\$5.51	\$4.22
	FEHB 1	\$5.46	\$20.26	\$5.25	\$11.77	\$11.75
	FEHB 2	\$5.04	N/A	N/A	\$6.02	\$17.46
	FEHB 3	\$9.90	\$8.25	\$13.49	\$19.80	\$9.12
83897	Medicare	\$5.64	\$5.64	\$5.64	\$5.64	\$4.48
	Medicaid	\$5.03	\$5.54	N/A	\$5.51	\$4.33
	FEHB 1	N/A	N/A	N/A	N/A	N/A
	FEHB 2	N/A	N/A	N/A	N/A	N/A
	FEHB 3	N/A	N/A	\$7.03	\$7.33	N/A
83898	Medicare	\$23.58	\$23.58	\$5.80	\$14.32	\$20.95
	Medicaid	\$21.04	\$23.17	N/A	\$14.00	\$18.56
	FEHB 1	\$25.96	\$58.20	\$24.85	\$24.85	\$24.85
	FEHB 2	\$17.05	N/A	\$317.89	\$35.01	\$35.51
	FEHB 3	\$47.10	\$34.53	\$7.08	\$20.69	\$23.17
83900	Medicare	\$47.18	\$47.18	\$11.58	\$28.65	\$41.87
	Medicaid	\$42.10	\$46.84	N/A	\$27.99	N/A
	FEHB 1	\$38.91	N/A	\$70.35	\$49.69	\$108.00
	FEHB 2	\$147.00	N/A	\$38.92	\$29.89	\$40.36
	FEHB 3	\$20.83	\$28.68	\$8.25	\$16.94	\$41.49

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Table D-1: Medicare Clinical Laboratory Fee Schedule, State Medicaid Program, and Federal Employee Health Benefit Payment Rates for Selected Genetic Test Codes (Continued)

Current Procedural Terminology Code	Insurer	State				
		SC	SD	TN	TX	UT
83901	Medicare	\$23.58	\$23.58	\$5.80	\$14.32	\$20.95
	Medicaid	\$21.04	\$23.17	N/A	\$14.00	\$20.29
	FEHB 1	\$24.80	N/A	N/A	\$18.54	\$22.32
	FEHB 2	\$21.08	N/A	\$34.01	\$12.26	N/A
	FEHB 3	\$100.49	\$18.25	\$59.59	\$110.11	\$125.58
83902	Medicare	\$19.97	\$19.97	\$5.80	\$14.32	\$19.97
	Medicaid	\$17.82	\$19.61	N/A	\$14.00	\$46.89
	FEHB 1	N/A	N/A	\$5.26	\$29.65	\$23.54
	FEHB 2	N/A	N/A	N/A	N/A	N/A
	FEHB 3	\$31.00	\$9.90	\$4.57	\$16.94	\$25.00
83904	Medicare	\$23.58	\$23.58	\$5.80	\$14.32	\$20.95
	Medicaid	\$21.04	\$23.17	N/A	\$14.00	\$20.29
	FEHB 1	\$14.05	N/A	N/A	\$22.66	\$20.60
	FEHB 2	\$13.02	N/A	N/A	\$35.01	N/A
	FEHB 3	\$54.42	N/A	\$15.34	\$64.14	\$134.69
83907	Medicare	\$18.80	\$18.80	\$18.80	\$18.80	\$18.80
	Medicaid	\$16.77	\$18.66	N/A	\$18.36	N/A
	FEHB 1	N/A	N/A	N/A	N/A	N/A
	FEHB 2	N/A	N/A	N/A	N/A	N/A
	FEHB 3	\$17.55	N/A	\$18.53	\$16.21	\$17.88
83909	Medicare	\$23.58	\$23.58	\$5.80	\$14.32	\$20.95
	Medicaid	\$21.04	\$23.42	N/A	\$14.00	N/A
	FEHB 1	\$22.95	\$168.89	\$35.18	\$24.85	\$18.75
	FEHB 2	\$13.02	N/A	\$18.74	\$12.26	\$13.49
	FEHB 3	\$13.32	\$21.50	\$5.90	\$8.47	\$20.45
83912	Medicare	\$5.64	\$5.64	\$5.64	\$5.64	\$4.48
	Medicaid	\$5.03	\$5.54	N/A	\$5.51	\$4.33
	FEHB 1	\$5.36	\$56.58	\$5.36	\$5.36	\$5.94
	FEHB 2	\$11.09	N/A	\$17.64	\$5.88	\$5.88
	FEHB 3	\$4.95	\$7.00	\$5.00	\$4.95	\$5.00
83914	Medicare	\$23.58	\$23.58	\$5.80	\$14.32	\$20.95
	Medicaid	\$21.04	\$23.42	N/A	\$14.00	N/A
	FEHB 1	\$24.85	N/A	N/A	\$24.85	\$34.17
	FEHB 2	\$73.80	N/A	\$18.74	\$12.28	\$19.17
	FEHB 3	\$234.20	\$219.00	\$132.16	\$271.04	\$82.88
88271	Medicare	\$30.14	\$30.14	\$20.37	\$30.14	\$20.37
	Medicaid	\$26.89	\$3.50	N/A	\$29.45	\$19.73
	FEHB 1	N/A	N/A	N/A	N/A	\$30.00
	FEHB 2	N/A	N/A	N/A	N/A	N/A
	FEHB 3	\$179.60	\$37.00	\$63.23	\$107.67	\$127.32

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Table D-1: Medicare Clinical Laboratory Fee Schedule, State Medicaid Program, and Federal Employee Health Benefit Payment Rates for Selected Genetic Test Codes (Continued)

Current Procedural Terminology Code	Insurer	State					
		VA	VT	WA	WI	WV	WY
83890	Medicare	\$5.51	\$5.64	\$5.64	\$5.64	\$5.64	\$5.64
	Medicaid	\$5.14	\$5.40	\$5.74	\$5.60	\$5.08	\$5.04
	FEHB 1	N/A	N/A	\$5.25	N/A	N/A	N/A
	FEHB 2	\$1.98	N/A	\$4.40	\$45.00	N/A	N/A
	FEHB 3	\$4.95	\$5.45	\$5.00	\$8.36	\$7.20	N/A
83891	Medicare	\$5.51	\$5.64	\$5.64	\$5.64	\$5.64	\$5.64
	Medicaid	\$5.14	\$5.40	\$5.74	\$5.60	\$5.08	N/A
	FEHB 1	\$5.79	N/A	\$5.78	N/A	\$5.78	N/A
	FEHB 2	\$5.88	N/A	\$5.88	\$26.95	\$24.00	N/A
	FEHB 3	\$5.00	\$16.08	\$5.17	\$6.31	\$7.20	\$5.91
83892	Medicare	\$5.51	\$5.64	\$5.64	\$5.64	\$5.64	\$5.64
	Medicaid	\$5.14	\$5.40	\$5.74	\$5.60	\$5.08	\$5.04
	FEHB 1	\$5.25	N/A	\$5.25	N/A	N/A	N/A
	FEHB 2	\$5.88	N/A	\$13.02	\$14.64	N/A	N/A
	FEHB 3	\$9.90	\$16.62	\$14.85	\$5.74	\$14.40	\$9.72
83894	Medicare	\$5.51	\$5.64	\$5.64	\$5.64	\$5.64	\$5.64
	Medicaid	\$5.14	\$5.40	\$5.74	\$5.60	\$5.08	\$5.04
	FEHB 1	\$5.70	N/A	N/A	N/A	\$5.26	N/A
	FEHB 2	\$5.45	N/A	\$24.00	\$52.37	N/A	N/A
	FEHB 3	\$5.09	\$16.62	\$16.92	\$5.74	\$14.40	\$13.90
83896	Medicare	\$5.51	\$5.64	\$5.64	\$5.64	\$5.64	\$5.64
	Medicaid	\$5.14	\$5.40	\$5.74	\$5.60	\$5.08	\$5.04
	FEHB 1	\$5.25	N/A	\$5.25	N/A	N/A	N/A
	FEHB 2	\$5.88	N/A	\$8.27	\$25.20	N/A	N/A
	FEHB 3	\$19.80	\$337.94	\$10.03	\$11.01	\$43.20	\$11.14
83897	Medicare	\$5.51	\$5.64	\$5.64	\$5.64	\$5.64	\$5.64
	Medicaid	\$5.14	\$5.40	\$5.74	\$5.60	\$5.08	\$5.04
	FEHB 1	N/A	N/A	N/A	N/A	N/A	N/A
	FEHB 2	\$10.14	N/A	N/A	N/A	N/A	N/A
	FEHB 3	\$4.95	N/A	N/A	N/A	N/A	N/A
83898	Medicare	\$23.58	\$6.14	\$23.58	\$23.58	\$23.58	\$23.58
	Medicaid	\$18.53	\$5.93	\$24.01	\$3.73	\$21.22	\$21.08
	FEHB 1	\$23.53	N/A	N/A	N/A	N/A	N/A
	FEHB 2	\$19.91	N/A	\$35.01	\$102.06	\$35.01	N/A
	FEHB 3	\$18.14	\$44.90	\$39.53	\$24.01	\$29.25	\$345.60
83900	Medicare	\$47.18	\$12.29	\$47.18	\$47.18	\$47.18	\$47.18
	Medicaid	\$44.50	\$34.86	\$36.50	\$42.58	\$42.46	\$42.16
	FEHB 1	\$28.25	N/A	\$101.83	N/A	\$46.55	N/A
	FEHB 2	\$40.36	N/A	\$46.84	\$202.75	\$37.47	N/A
	FEHB 3	\$5.18	\$46.50	\$44.82	\$46.50	\$58.50	\$47.34

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Table D-1: Medicare Clinical Laboratory Fee Schedule, State Medicaid Program, and Federal Employee Health Benefit Payment Rates for Selected Genetic Test Codes (Continued)

Current Procedural Terminology Code	Insurer	State					
		VA	VT	WA	WI	WV	WY
83901	Medicare	\$23.58	\$6.14	\$23.58	\$23.58	\$23.58	\$23.58
	Medicaid	\$13.37	\$5.93	\$24.01	\$23.40	\$21.22	\$21.08
	FEHB 1	\$15.06	N/A	N/A	N/A	\$24.76	N/A
	FEHB 2	\$21.40	N/A	\$4.00	\$51.82	\$34.01	N/A
	FEHB 3	\$70.00	N/A	\$93.91	\$26.41	\$351.00	\$162.72
83902	Medicare	\$5.51	\$5.80	\$12.09	\$14.53	\$19.97	\$19.97
	Medicaid	\$5.14	\$5.57	\$12.31	\$14.41	\$17.97	\$17.85
	FEHB 1	\$13.63	N/A	\$5.26	N/A	\$5.26	N/A
	FEHB 2	N/A	N/A	N/A	N/A	N/A	N/A
	FEHB 3	\$8.58	\$19.00	\$9.90	\$31.00	\$9.90	\$31.00
83904	Medicare	\$23.58	\$6.14	\$23.58	\$23.58	\$23.58	\$23.58
	Medicaid	\$13.37	\$5.93	\$24.01	\$23.40	\$21.22	\$21.08
	FEHB 1	\$22.66	N/A	N/A	N/A	\$22.66	N/A
	FEHB 2	\$29.00	N/A	\$24.02	N/A	N/A	N/A
	FEHB 3	\$54.42	\$67.35	\$134.69	\$34.41	\$81.36	N/A
83907	Medicare	\$16.36	\$18.80	\$18.80	\$10.51	\$18.80	\$12.27
	Medicaid	\$15.43	\$34.86	\$14.54	\$9.49	\$16.92	\$10.96
	FEHB 1	N/A	N/A	N/A	N/A	N/A	N/A
	FEHB 2	N/A	N/A	N/A	N/A	N/A	N/A
	FEHB 3	\$16.21	\$17.88	\$17.88	N/A	N/A	\$24.32
83909	Medicare	\$23.58	\$6.14	\$23.58	\$23.58	\$23.58	\$23.58
	Medicaid	\$22.25	\$5.93	\$18.25	\$21.29	\$21.22	\$21.08
	FEHB 1	\$18.74	N/A	N/A	N/A	\$23.25	N/A
	FEHB 2	\$13.49	N/A	\$16.75	\$17.12	\$18.74	N/A
	FEHB 3	\$2.59	\$34.08	\$33.17	\$34.95	\$29.25	\$345.60
83912	Medicare	\$5.51	\$5.64	\$5.64	\$5.64	\$5.64	\$5.64
	Medicaid	\$5.20	N/A	\$5.74	\$5.60	\$5.08	\$5.04
	FEHB 1	\$5.25	N/A	\$5.25	N/A	\$5.25	N/A
	FEHB 2	\$5.88	N/A	\$5.88	\$54.95	\$40.00	N/A
	FEHB 3	\$5.00	\$42.82	\$5.64	\$6.31	\$29.25	\$5.57
83914	Medicare	\$23.58	\$6.14	\$23.58	\$23.58	\$23.58	\$23.58
	Medicaid	\$22.25	\$34.86	\$18.25	\$21.29	\$21.22	\$21.08
	FEHB 1	\$15.13	N/A	N/A	N/A	N/A	N/A
	FEHB 2	\$19.17	N/A	\$6.00	N/A	\$18.74	N/A
	FEHB 3	\$82.88	\$479.26	\$229.04	\$102.35	\$294.03	\$99.37
88271	Medicare	\$30.14	\$30.14	\$30.14	\$20.37	\$30.14	\$30.14
	Medicaid	\$28.12	\$38.34	\$23.32	\$20.22	\$27.13	\$26.94
	FEHB 1	\$28.45	N/A	N/A	N/A	\$28.45	N/A
	FEHB 2	N/A	N/A	N/A	N/A	N/A	N/A
	FEHB 3	\$69.03	N/A	\$116.95	\$25.00	\$138.88	\$239.44

Source: Office of Inspector General analysis of Medicare Clinical Laboratory Fee Schedule, State Medicaid Program, and FEHB Payment Rates, 2011.

APPENDIX E**Table E-1: State Medicaid Program Payment Rates for Selected Genetic Tests by Test Name**

Test	State							
	CA	DE	IL	IA	MA	MN	PA	VA
BCR/ABL1 Translocation Analysis				\$867				
BRCA1 Gene Analysis	\$3,340	\$3,120	\$3,030	\$4,498	\$2,731		\$1,000	\$3,120
BRCA2 Gene Analysis	\$3,340	\$3,120	\$2,770	\$4,947			\$1,000	
CFTR Gene Analysis	\$180							
ChemoFx				\$1,408				
F2 Gene Analysis				\$132				
KRAS Gene Analysis				\$421				
MLH1 Gene Analysis								
MSH2 Gene Analysis								
OncoTypeDX			\$2,050			\$3,416		
PathFinderTG	\$2,732							
Pathwork Tissue of Origin				\$927				
VeriStrat				\$25				

Note: Payment rates rounded to the nearest whole dollar.

Source: Office of Inspector General analysis of State Medicaid program survey responses, 2011.

APPENDIX F

Table F-1: Federal Employee Health Benefits Plan Median Payment Rates for Selected Genetic Tests by Test Name

State	Test					
	AlloMap	BCR/ABL1 Translocation Analysis	CFTR Gene Analysis	ChemoFx	F2 Gene Analysis	HFE Gene Analysis
Alabama	\$13			\$95		
Alaska				\$187		
Arizona	\$20		\$18	\$75		
Arkansas				\$150		
California	\$50		\$18	\$105		
Colorado	\$11			\$93		
Connecticut			\$38	\$114	\$38	
Delaware	\$13			\$92		
District of Columbia	\$6		\$18	\$73		
Florida	\$117		\$7	\$98		
Georgia	\$177			\$95		
Hawaii				\$109		
Idaho				\$130		
Illinois	\$80	\$93	\$12	\$99		
Indiana	\$455			\$72		
Iowa	\$227			\$150		
Kansas	\$270			\$124		
Kentucky	\$18		\$35	\$57		
Louisiana	\$171			\$126		
Maine	\$42			\$65		
Maryland	\$8		\$12	\$73		
Massachusetts				\$98		
Michigan	\$102			\$60		
Minnesota	\$16		\$1	\$125		
Mississippi				\$131		
Missouri	\$130			\$105		
Montana				\$88		
Nebraska				\$132		
Nevada	\$2		\$12	\$116		
New Hampshire				\$125		
New Jersey	\$90	\$13		\$101		
New Mexico	\$207			\$88		
New York	\$10			\$86		
North Carolina	\$10		\$30	\$95		
North Dakota	\$115	\$93		\$168	\$7	
Ohio	\$35		\$35	\$83	\$14	
Oklahoma	\$8		\$10	\$131		
Oregon	\$40		\$27	\$121	\$9	\$6
Pennsylvania	\$90			\$54		
Rhode Island	\$3,658			\$106		
South Carolina	\$9			\$123		
South Dakota	\$788			\$187		
Tennessee				\$131	\$26	
Texas	\$9		\$6	\$115		
Utah				\$53	\$9	
Vermont				\$182		
Virginia	\$428		\$18	\$88	\$9	
Washington			\$47	\$124	\$8	
West Virginia	\$8		\$7	\$93		
Wisconsin	\$758		\$6	\$143		\$51
Wyoming				\$130		

continued on next page

Note: Payment rates rounded to the nearest whole dollar.

APPENDIX F

Table F-1: Federal Employee Health Benefits Plan Median Payment Rates for Selected Genetic Tests by Test Name (Continued)

State	Test				
	MSH2 Gene Analysis	Oncotech EDR	PathFinderTG	Pathwork Tissue of Origin	VeriStrat
Alabama		\$276	\$240	\$10	\$8
Alaska				\$38	
Arizona		\$5,640	\$5,640	\$10	\$20
Arkansas		\$3,760	\$3,760	\$8	
California		\$70	\$70	\$18	\$50
Colorado		\$3,760	\$1,885	\$10	\$11
Connecticut				\$14	
Delaware			\$13	\$17	\$13
District of Columbia		\$25	\$15	\$5	\$6
Florida		\$3,760	\$3,760	\$19	\$48
Georgia		\$232	\$5,640	\$10	
Hawaii		\$44	\$44	\$14	
Idaho				\$18	
Illinois		\$360	\$60	\$17	\$29
Indiana		\$5,170	\$4,935	\$15	\$455
Iowa	\$65	\$1,880	\$422	\$14	\$227
Kansas		\$198	\$422	\$18	\$422
Kentucky		\$138	\$18	\$12	\$18
Louisiana		\$9	\$9	\$16	\$171
Maine		\$42		\$6	
Maryland		\$470	\$66	\$10	\$8
Massachusetts				\$16	
Michigan			\$102	\$27	\$102
Minnesota		\$313	\$286	\$15	\$16
Mississippi		\$5,640	\$5,640	\$20	
Missouri		\$130	\$422	\$18	\$422
Montana				\$19	
Nebraska		\$8	\$8	\$10	
Nevada	\$1,207	\$8	\$5	\$10	\$2
New Hampshire				\$27	
New Jersey		\$3,029	\$418	\$17	\$90
New Mexico		\$207		\$11	
New York		\$3,760	\$62	\$15	\$10
North Carolina			\$10	\$10	\$10
North Dakota		\$113	\$115	\$27	\$115
Ohio		\$767	\$35	\$17	\$35
Oklahoma		\$13	\$8	\$17	\$8
Oregon			\$40	\$21	\$40
Pennsylvania		\$1,880	\$93	\$18	\$90
Rhode Island		\$2,350	\$3,004	\$14	\$3,658
South Carolina		\$5,640	\$9	\$11	\$9
South Dakota		\$774	\$760	\$10	
Tennessee		\$3,055	\$3,055	\$10	
Texas		\$940	\$940	\$10	\$9
Utah				\$10	
Vermont				\$28	
Virginia		\$686	\$2,820	\$8	\$1,869
Washington		\$5,640	\$5,640	\$15	
West Virginia			\$8	\$29	\$8
Wisconsin		\$462	\$758	\$11	\$758
Wyoming		\$1,443	\$1,443	\$15	

Source: Office of Inspector General analysis of Federal Employee Health Benefits plan payment rates, 2011.