



1565 McGaw Ave Ste B  
Irvine CA 92614  
Phone (800) 820-8803

# Client Fee Schedule

Price Acknowledgement

Client Name: Molecular Testing Name: \_\_\_\_\_  
 Account Number: \_\_\_\_\_ Type: Non-EMR Signature: \_\_\_\_\_  
 Location Number: \_\_\_\_\_ Date: 04/13/2024 Date: \_\_\_\_\_

Sexual Health Testing								
Panel Code	<input type="checkbox"/>	Tube	Panel Description	Loc	CPT	Client Price	Patient TOS	Medicare
4187	<input type="checkbox"/>	As	BV + Yeast Panel (AssureSwab)	IHD	MULTIPLE	\$221.07	\$238.02	\$350.90
4194	<input type="checkbox"/>	Es / TP	Vaginitis Panel, Basic (AssureSwab)	IHD	MULTIPLE	\$184.23	\$198.35	\$385.99
4199	<input type="checkbox"/>	Es / TP	Vaginitis Panel, Basic + CT/NG (AssureSwab)	IHD	MULTIPLE	\$236.87	\$255.02	\$456.17
4195	<input type="checkbox"/>	Es / TP	Vaginitis Panel, Comprehensive (AssureSwab)	IHD	MULTIPLE	\$342.14	\$368.37	\$596.53
4193	<input type="checkbox"/>	Es / TP	Vaginitis Panel, Comprehensive Plus (AssureSwab)	IHD	MULTIPLE	\$773.75	\$833.07	\$1,228.15
4196	<input type="checkbox"/>	Es / TP	Aerobic Vaginitis Panel (AssureSwab)	IHD	MULTIPLE	\$105.27	\$113.34	\$140.36
4197	<input type="checkbox"/>	Es / TP	Leukorrhea/STI Panel (AssureSwab)	IHD	MULTIPLE	\$78.95	\$85.01	\$105.27
4198	<input type="checkbox"/>	Es / TP	Genital Ulcer Panel (AssureSwab)	IHD	MULTIPLE	\$105.27	\$113.34	\$140.36
4402	<input type="checkbox"/>	A / As / Es	CT/NG (NAT)	IHD	87491, 87591	\$96.28	\$114.33	\$70.18
4255	<input type="checkbox"/>	Es	Group B Streptococcus (GBS), PCR	IHD	87653	\$48.14	\$57.17	\$35.09
4277	<input type="checkbox"/>	Es	Group B Streptococcus (GBS), PCR w/ reflex to Sensitivity	IHD	87653	\$48.14	\$57.17	\$35.09
4263	<input type="checkbox"/>	As / A / U	Mycoplasma genitalium	IHD	87563	\$35.09	\$41.67	\$35.09
4258	<input type="checkbox"/>	Es / TP	Mycoplasma/Ureaplasma, PCR	IHD	MULTIPLE	\$105.27	\$113.34	\$140.36
4266	<input type="checkbox"/>	TP / As / A / U	Trichomonas vaginalis, NAT	IHD	87661	\$48.14	\$57.17	\$35.09

Panel components and respective CPT codes listed below.

Molecular UTI Testing								
Panel Code	<input type="checkbox"/>	Tube	Panel Description	Loc	CPT	Client Price	Patient TOS	Medicare
4191	<input type="checkbox"/>	U/Gy	Molecular UTI, Basic (AssureCup)	IHD	MULTIPLE	\$657.94	\$125.00	\$877.25
4192	<input type="checkbox"/>	U/Gy	Molecular UTI, Comprehensive (AssureCup)	IHD	MULTIPLE	\$731.63	\$150.00	\$1,087.79

Panel components and respective CPT codes listed below.

Respiratory Testing								
Panel Code	<input type="checkbox"/>	Tube	Panel Description	Loc	CPT	Client Price	Patient TOS	Medicare
4190	<input type="checkbox"/>	Sw	Respiratory Pathogen Panel, Comprehensive	IHD	MULTIPLE	\$400.40	\$431.10	\$533.87

Panel components and respective CPT codes listed below.

Reflex Testing								
Panel Code	<input type="checkbox"/>	Tube	Panel Description	Loc	CPT	Client Price	Patient TOS	Medicare
3547	<input type="checkbox"/>	U	mecA	IHD	87641	\$26.32	\$28.34	\$35.09
10008	<input type="checkbox"/>	U/Gy	Sensitivity (AST), AssureCup	IHD	87184	\$9.46	\$11.23	\$7.48
4334	<input type="checkbox"/>	U	VanA1, VanA2, VanB	IHD	87500	\$26.32	\$28.34	\$35.09

Panel components and respective CPT codes listed below.

**Note: Reflex testing is performed at an additional cost**

Panel Code:	Tests Included in Women's Health, Molecular UTI and AST Testing Panels:	CPT Codes included in Panel:
4187	Atopobium Vaginae, BVAB2, Candida Albicans, Candida Glabrata, Candida Krusei, Candida Parapsilosis, Candida Tropicalis, Gardnerella Vaginalis, Megasphaera 1, Megasphaera 2	87481 (x2), 87511, 87798 (x7)
4193	Atopobium Vaginae, Bacteroides Fragilis, BVAB2, Candida Albicans, Candida Dubliniensis, Candida Glabrata, Candida Krusei, Candida Lusitanae, Candida Parapsilosis, Candida Tropicalis, Chlamydia Trachomatis, Enterococcus Faecalis, Escherichia coli, Gardnerella Vaginalis, Haemophilus Ducreyi, HSV-1, HSV-2, Lactobacillus Crispatus, Lactobacillus Gasseri, Lactobacillus Iners, Lactobacillus Jensenii, Megasphaera 1, Megasphaera 2, Mobiluncus Curtisi, Mobiluncus Mulleris, Mycoplasma genitalium, Mycoplasma Hominis, Neisseria Gonorrhoeae, Prevotella Bivia, Staphylococcus Aureus, Streptococcus agalactiae (GBS), Treponema Pallidum, Trichomoniasis Vaginalis, Ureaplasma Parvum, Ureaplasma Urealyticum	87491, 87591, 87661, 87481 (x7), 87511, 87529 (x2), 87653 (x2), 87798 (x20)
4194	Atopobium Vaginae, BVAB2, Candida Albicans, Candida Glabrata, Candida Krusei, Candida Parapsilosis, Candida Tropicalis, Gardnerella Vaginalis, Megasphaera 1, Megasphaera 2, Trichomoniasis Vaginalis	87798 (x4), 87481 (x5), 87661, 87511
4195	Atopobium Vaginae, BVAB2, Candida Albicans, Candida Glabrata, Candida Krusei, Candida Parapsilosis, Candida Tropicalis, Chlamydia Trachomatis, Gardnerella Vaginalis, Megasphaera 1, Megasphaera 2, Mycoplasma genitalium, Mycoplasma Hominis, Neisseria Gonorrhoeae, Trichomoniasis Vaginalis, Ureaplasma Urealyticum, Ureaplasma Parvum	87798 (x8), 87481 (x5), 87491, 87591, 87511, 87661
4196	Enterococcus Faecalis, Escherichia coli, Staphylococcus Aureus, Streptococcus agalactiae (GBS)	87653 (x2), 87798 (x2)
4197	Chlamydia Trachomatis, Neisseria Gonorrhoeae, Trichomoniasis Vaginalis	87661, 87491, 87591
4198	Haemophilus Ducreyi, Treponema Pallidum, HSV-1, HSV-2	87798 (x2), 87529 (x2)
4199	Atopobium Vaginae, BVAB2, Gardnerella Vaginalis, Megasphaera 1, Megasphaera 2, Candida Albicans, Candida Glabrata, Candida Krusei, Candida Parapsilosis, Candida Tropicalis, Trichomoniasis Vaginalis, Chlamydia Trachomatis, Neisseria Gonorrhoeae	87798 (x4), 87481 (x5), 87511, 87661, 87491, 87591

4258	Mycoplasma genitalium, Mycoplasma Hominis, Ureaplasma Urealyticum, Ureaplasma Parvum	87798 (x4)
4191	Acinetobacter baumannii, Actinobaculum schaalii, Aerococcus urinae, Alloscardovia omnicolens, Citrobacter freundii, Citrobacter koseri, Coagulase-negative staph, Corynebacterium riegellii, Enterobacter aerogenes, Enterobacter cloacae, Enterococcus faecalis, Enterococcus faecium, Escherichia coli, Klebsiella oxytoca, Klebsiella pneumoniae, Morganella morganii, Pantoea agglomerans, Proteus mirabilis, Proteus vulgaris, Providencia stuartii, Pseudomonas aeruginosa, Serratia marcescens, Staphylococcus aureus, Streptococcus agalactiae (GBS), Viridans group strep	87640, 87653, 87798 (x23)
4192	Acinetobacter baumannii, Actinobaculum schaalii, Aerococcus urinae, Alloscardovia omnicolens, Candida albicans, Candida Auris, Candida glabrata, Candida parapsilosis, Citrobacter freundii, Citrobacter koseri, Coagulase-negative staph, Corynebacterium riegellii, Enterobacter aerogenes, Enterobacter cloacae, Enterococcus faecalis, Enterococcus faecium, Escherichia coli, Klebsiella oxytoca, Klebsiella pneumoniae, Morganella morganii, Mycoplasma hominis, Pantoea agglomerans, Proteus mirabilis, Proteus vulgaris, Providencia stuartii, Pseudomonas aeruginosa, Serratia marcescens, Staphylococcus aureus, Streptococcus agalactiae (GBS), Ureaplasma urealyticum, Viridans group strep	87481 (x4), 87640, 87653, 87798 (x25)
4190	Adenovirus, Bordetella pertussis, Bordetella spp., Chlamydia pneumoniae, Haemophilus influenzae, HHV4 (Epstein-Barr Virus), HHV5 (Cytomegalovirus), HHV6 (Human Herpesvirus 6), Human Coronavirus 229E, Human Coronavirus HKU1, Human Coronavirus NL63, Human Coronavirus OC43, Human Enterovirus (pan assay), Human Enterovirus D68, Human Metapneumovirus (hMPV), Human Parainfluenza Virus 1, Human Parainfluenza Virus 2, Human Parainfluenza Virus 3, Human Parainfluenza Virus 4, Influenza A (Pan), Influenza A/H1-2009, Influenza A/H3, Influenza B, Klebsiella pneumoniae, Legionella pneumophila, Mycoplasma pneumoniae, Respiratory Syncytial Virus A (RSV A), Respiratory Syncytial Virus B (RSV B), Rhinovirus, SARS-CoV-2, Staphylococcus aureus, Streptococcus pneumoniae	87632, 87486, 87581, 87640, 87651, 87541, 87798 (x4)
10008	Amoxicillin/Clav, Ampicillin, Bactrim/Septa, Carbenicillin, Cefoxitin, Cefazidime, Cephalothin, Ciprofloxacin, Clindamycin, Erythromycin, Levofloxacin, Nalidixic Acid, Nitrofurantoin, Penicillin, Tetracycline	87184

The referring provider has requested the creation of the custom profile that includes the tests listed above. The referring provider has been informed of the reimbursement amount that Medicare (and where appropriate, Medi-Cal/Medicaid) will pay for each customized profile.

The referring provider understands that when ordering test for which Medicare/Medi-Cal/Medicaid reimbursement will be sought, the referring provider should only order those tests which are medically necessary for each patient.

The referring provider understands that using a customized profile may result in the ordering of tests which Medicare or other federally funded health care programs may deny payment.

The referring provider will order individual tests or a less inclusive profile when not all of the tests included in the customized profile are medically necessary for an individual patient. The referring provider has been informed that the OIG takes the position that a physician who orders medically unnecessary tests may be subject to civil penalties; and if appropriate, the physician is aware that the laboratory makes available the services of a clinical consultant to assist the physician in ensuring that appropriate tests are ordered.

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Physician Name / Signature / Date