



## Obstetric Pricing Guide

The information provided below is an estimate of costs related to various recommended or elective testing that may be related to your care. These estimates are for most common testing types. Costs are subject to change at any time. If you are looking for more specific estimates, please reach out to our billing office or your insurance provider.

### Laboratory Testing

| <u>CPT Code</u>                | <u>Test Name</u>         | <u>Price*</u> | <u>Rendering Lab</u> |
|--------------------------------|--------------------------|---------------|----------------------|
| <b>Prenatal Testing</b>        |                          |               |                      |
| 84702                          | Beta HCG                 | \$ 50.00      | InterMed             |
| 85025                          | CBC                      | \$ 26.00      | InterMed             |
| 87340                          | HepBsAg                  | \$ 35.00      | InterMed             |
| 87806                          | HIV 1/2 Ag/Ab            | \$ 75.00      | InterMed             |
| 86762                          | Rubella ( Immunity )     | \$ 48.00      | InterMed             |
| 86780                          | Syphillis Screen         | \$ 44.00      | InterMed             |
| 84443                          | TSH                      | \$ 56.00      | InterMed             |
| 81001                          | UA with Micro            | \$ 11.00      | InterMed             |
| 87086                          | Urine CX                 | \$ 27.00      | InterMed             |
| 86803                          | Hep C                    | \$ 391.00     | InterMed             |
| CP300074                       | Blood Type & Screen      | \$ 157.15     | QUEST                |
| 81220                          | CF Screen                | \$ 520.00     | QUEST                |
|                                | CF Screen Expanded Panel | \$ 616.00     | QUEST                |
| 81329                          | SMA                      | \$ 522.50     | QUEST                |
| 81420                          | QNatal                   | \$ 3,038.20   | QUEST                |
| <b>2nd Trimester Screening</b> |                          |               |                      |
| 84163                          | Sequential Screen Part 1 | \$ 234.15     | Integrated           |
| 84702                          |                          |               |                      |
| 82105                          | Sequential Screen Part 2 | \$ 495.60     | Integrated           |
| 82677                          |                          |               |                      |
| 84702                          |                          |               |                      |
| 86336                          |                          |               |                      |
| 82105                          | AFP 4                    | \$ 496.65     | Integrated           |
| 82677                          |                          |               |                      |
| 84702                          |                          |               |                      |
| 86336                          |                          |               |                      |
| 82105                          | AFP only                 | \$ 118.65     | Integrated           |

Updated 10/03/23

\*Prices Subject to Change



**INTERMED**  
Obstetrics & Gynecology

| 3rd Trimester Screening |  |                |          |
|-------------------------|--|----------------|----------|
| 85025                   | CBC                                    | \$ 26.00       | InterMed |
| 85014                   | Hematocrit                             | \$ 8.00        | InterMed |
| 82950                   | Glucose 1 Hour                         | \$ 16.00       | InterMed |
| 82947                   | Glucose 3 Hour                         | \$ 56.00       | InterMed |
| 82951                   |  |                |          |
| 87147                   | Group B, Vag Strep                     | \$ 18.00       | InterMed |
| Other                   |  |                |          |
| 90934                   | Thin Prep Reflex to HPV                | \$120 - \$264  | QUEST    |
| 91414                   | Thin Prep/HPV reflex to Genotype 16/18 | \$ 264 - \$408 | QUEST    |
| 87491                   | GC/Chlamydia                           | \$ 172.00      | InterMed |
| 87591                   |  |                |          |
| 84703                   | HCG Qual. ( urine or serum )           | \$ 25.00       | InterMed |

### Ultrasound and Delivery

| <u>CPT Code</u>                   | <u>Description</u>                                     | <u>Price*</u>          |
|-----------------------------------|--|------------------------|
| General Ultrasound                |  |                        |
| 76801                             | 1st trimester u/s                                      | \$ 472.00              |
| 76802                             | 1st trimester u/s-Add'l for twins                      | \$ 249.00              |
| 76816                             | Pregnancy f/u u/s                                      | \$ 443.00              |
| 76817                             | Transvaginal pregnancy u/s                             | \$ 374.00              |
| 76805                             | Fetal Anatomy Survey-No Risks                          | \$ 624.00              |
| 76810                             | Fetal Anatomy Survey-No Risks - Twins                  | \$ 359.00              |
| 76811                             | Fetal Anatomy Survey-Risk Indication                   | \$ 699.00              |
| 76812                             | Fetal Anatomy Survey-Risk Indications- twins           | \$ 794.00              |
| Sequential Ultrasound Done at MFM |  |                        |
| 76801                             | Sequential Part 1 U/S                                  | Cost determined by MFM |
| 76813                             | Sequential Part 1 U/S if nuchal measurement is present | Cost determined by MFM |
| Delivery                          |  |                        |
| 59400                             | Global- Vaginal Delivery                               | \$ 8,973.00            |
| 59510                             | Global C-Section                                       | \$ 9,928.00            |
| 59610                             | Global- VBAC   | \$ 9,398.00            |
| 54150                             | Circumcision   | \$ 555.00              |

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