

## PRENATAL TESTING

TEST	APPROXIMATE COST	SCREENING ICD-9 CODE	CPT CODES
<b>AFP</b>	\$32 - \$115	V281	82105
<b>MSS5 – PENTA SCREEN</b>	\$420	V281	82677 84702 82105 86336 82397
<b>HIV TEST</b>	\$81- \$94	V288.9	86703
<b>CYSTIC FIBROSIS</b>	\$415 - \$595	V776	83891 83900 83901 (x13) 83909 83912 83914 (x23)
<b>FIRST SCREEN -NUCHAL TRANSLUCENCY– SONOGRAM 1<sup>st</sup> FETUS</b>	\$300	655.83 TRISOMY SCREEN  659.63 ADVANCE MATERNAL AGE	76813
<b>FIRST SCREEN -NUCHAL TRANSLUCENCY – SONOGRAM EACH ADDITIONAL FETUS</b>	\$190 / EACH		76814
<b>FIRST SCREEN- ULTRA SCREEN-BLOOD WORK</b>	\$160		84704 84163
<b>PRL DRAW FEE</b>	\$6		36415

**APPROXIMATE COSTS ARE YOUR RESPONSIBILITY SHOULD YOUR  
INSURANCE COMPANY NOT COVER THESE EXPENSES.**