

Non-CMBS Tests not covered by Medicare

The following tests are not eligible for Medicare benefit and all costs are the responsibility of the patient.

Test	Price
16SPCR	\$130
Alpha-Galactosidase	\$119
Acylcarnitine Profile	\$154
ADSL Mutation	\$1400
Alpha Thalassemia Gene Testing (Screening)	\$100
Anti-Mullerian Hormone (AMH)	\$85
ApoCIII Isoforms	\$150
AQP2 Gene Analysis	\$300
AVP Gene Analysis	\$300
AVPR2 Gene Analysis	\$300
Bcl1/IgH Transcript	\$299
Acids, Fluid	\$39
Beta Trace Protein	\$155.65
C-Kit Mutation Study	\$100
Calprotectin - Faeces	\$75
Cardiac Panel (NG Sequencing)	\$1495
Carotene	\$30
Chromogranin A	\$48
Congenital Adrenal Hyperplasia (CAH) CYP21A2 Gene Analysis	\$900
Disorders of Sex Development Panel* (AMH, AMHR2, AR, ARX, CBX2, CYP11A1, CYP11B1, CYP17A1, CYP19A1, DHCR7, DHH, DMRT1, HSD11B1, HSD17B3, HSD3B2, LHCGR, MAMLD1, NR3C1, NR5A1 (SF1), POR, RSPO1, SOX9, SRD5A2, STAR, TSPYL1, WNT4, WT1)	\$1100
ELF Score (Liver Fibrosis Markers)	\$195
Fatty Acid Profile	\$200
Familial Hyperinsulinism (FHI) Panel (ABCC8, GCK, GLUD1, HADH, HNF4A, KCNJ11, SLC6A1, UCP2)	\$1100
FISH - Bone Marrow (BMFISH)	\$300
FISH - Paraffin Embedded Tissue (PETFISH)	\$400
FISH - Prenatal 5 Probe Panel (PNFISH)	\$255
Gaucher Mutation Analysis	\$368
Glucose Tetrasaccharide Analysis	\$119
Glycine Antibodies	\$110
Glycolate - 24hr Urine	\$110
HE4 Tumour Marker/ROMA Score	\$50
Helicobacter Urease Biopsy Test	\$15
Hepatitis B Genotype	\$237.44
HMG CoA Antibodies	\$55
HPRT1 Gene Analysis	\$750
IGFBP3	\$55
IgH Gene Rearrangement	\$299
IgH/BCL2 Transcript	\$299
Inhibin	\$92
Iodine - Urine	\$52
Leptin	\$34

Test	Price
Lipoprotein A	\$21
Maternal Cell Contamination	\$400
MC2R Gene Analysis	\$550
MC4R Gene Analysis	\$550
MECP2 Gene Analysis	\$350
Methylmalonic Acid - Urine	\$85
Maturity Onset Diabetes of the Young (MODY) Panel (ABCC8, GCK, HNF4A, HNF1A, HNF1B, INS, KCNJ11, NEUROD1, PDX1, PAX4)	\$1,100
MuSK Antibody	\$70
MRAP Gene Analysis	\$550
Mucopolysaccharide Electrophoresis	\$50
NIPT	\$449
Organic Acids - Amniotic Fluid or Urine	\$85
Orotic Acid Urine	\$85
Osteocalcin	\$27
OTC Mutation Studies	\$975
Pap Smear (Conventional)	\$30
pH - Fluid or Urine	\$17
Placental Growth Factor	\$40
Plasma Haemoglobin	\$51.75
Plasminogen	\$115
Permanent Neonatal Diabetes (PND) Panel (ABCC8, EIF2AK3, GCK, HNF1A, HNF1B, HNF4A, INS, KCNJ11, NEUROD1, PDX1)	\$1,100
Plasminogen Activation Inhibitor	\$85
Prepair Genetic Carrier Screening	\$385
PTH-Related Peptide	\$110
Purines - Urine	\$300
Rapid Flu PCR (Flu A/B and RSV)	\$50
RASopathy Syndromes Panel* (BRAF, CBL, HRAS, KAT6B, KRAS, MAP2K1, MAP2K2, NF1, NRAS, PTPN11, RAF1, RIT1, SHOC2, SOS1, SPRED1)	\$1,100
Reverse T3	\$72
SCN1A Gene Analysis	\$1,750
SHOX Gene Analysis	\$400
Snake Bite Venom Detection	\$280
Sulphates - Urine or Plasma	\$30
T-Cell Gene Rearrangement	\$299
Thawed Vial	\$219
Thyroxine Binding Globulin (TBG)	\$30
UBE3A Gene Analysis	\$800
Urine Dipstick (Chem)	\$16
Urine Drugs or Abuse Panel for Employment	\$75
Urine Mitochondrial DNA	\$400
Vasopressin (ADH)	\$31
Vitamin K	\$50
Very Long Chain Fatty Acids	\$85
Xanthochromia - CSF	\$75

Price list of tests with specific Medicare requirements

The following tests are eligible for Medicare benefit only when specific criteria are met or if frequency limits are not exceeded.

Test	Price
Activated Protein C Resistance	\$25
Antithrombin III	\$25
Factor V Leiden/Prothrombin Gene Mutation	\$60
Folate	\$25
Haemoglobin A1c (HbA1c)	\$17
HFE Genotyping	\$37
HoloTranscobalamin (Active B12) if Vitamin B12 not Medicare eligible	\$25
Lupus Anticoagulant	\$25
MS-MLPA for Prader-Willi-Angelman Syndromes	\$232.50
NT-proBNP	\$59
Protein C	\$25
Protein S	\$25
Thrombotic Profile including FVL/PT Gene Mutation	\$185
Vitamin B12	\$25
Vitamin D [25 Hydroxy]	\$30