

3. Clinical Laboratory Fee Schedule:

3.1. Northern and Southern Correctional Facilities

Name of Bidder: _____
 (as found on the State of NH Certificate of Good Standing to include DBA names)

Item #	Current Procedural Terminology (CPT) Code	Laboratory Test Description	2009 CMS Laboratory Fee Schedule, Medicare plus 10% (For Vendor Information Only)	Est. Two Year Volume	Unit Cost	Total Cost (Est. Vol. X Unit Cost)
1	86900	ABO Grouping and Rho(D) Typing	\$ 4.79	7	\$	\$
2	86901	Rh (D)	\$ 4.79	7	\$	\$
3	86903	Antigen Screening, Reagent Serum per Unit	\$ 15.16	7	\$	\$
4	86904	Antigen Screening using patient Serum, per Unit	\$ 15.27	7	\$	\$
5	86905	RBC Antigen other than ABO or Rh (D), each	\$ 4.35	7	\$	\$
6	86906	Rh Phenotyping, complete	\$ 12.44	7	\$	\$
7	82003	Acetaminophen (Tylenol®), Serum	\$ 32.51	2	\$	\$
8	83519	AChR Blocking Antibodies, Serum	\$ 21.70	1	\$	\$
9	82024	ACTH, Plasma	\$ 62.04	3	\$	\$
10	83516	Actin (Smooth Muscle) Antibody	\$ 18.40	10	\$	\$
11	87070	Aerobic Bacterial Culture, General	\$ 13.83	222	\$	\$
12	87116	AFB Broth-Based Culture & Smear	\$ 17.36	3	\$	\$
13	82105	AFP, Serum, Open Spina Bifida	\$ 26.94	1	\$	\$
14	82105	AFP, Serum, Tumor Marker	\$ 26.94	102	\$	\$
15	82105	AFP, Serum, Tumor Marker (Serial)	\$ 26.94	1	\$	\$
16	82135	ALA Delta, Random Urine	\$ 22.44	2	\$	\$
17	82085	Aldolase	\$ 15.59	1	\$	\$
18	82088	Aldosterone, Serum	\$ 65.45	6	\$	\$
19	84075	Alkaline Phosphatase, Serum	\$ 8.32	2	\$	\$
20	86003 (x 9), 86005	Allergen Profile, Basic Food Profile: Beef; Chocolate; Corn; Whole Egg; Fish/Shell Mix; Cow Milk; Peanut; Pork; Soybean; Wheat; Qualitative, Multiallergen Screen	\$ 88.22	2	\$	\$
21	82103	Alpha-1-Antitrypsin, Serum	\$ 21.57	4	\$	\$
22	84460	ALT/SGPT	\$ 8.50	376	\$	\$
23	80152	Amitriptyline (Elavil®), Serum	\$ 28.75	11	\$	\$
24	82140	Ammonia, Plasma	\$ 23.41	90	\$	\$
25	82150	Amylase, Serum	\$ 10.41	108	\$	\$
26	80100	Anabolic Steroids	\$ 23.35	2	\$	\$
27	87070	Aerobic Culture	\$ 13.83	4	\$	\$
28	87075	Anaerobic Culture	\$ 15.19	4	\$	\$
29	82164	Angiotensin-Converting Enzyme	\$ 23.44	7	\$	\$
30	86147 (x3)	Anticardiolipin (ACA) Ab, IgG, IgM, IgA, Quant	\$ 66.24	1	\$	\$
31	86147	Anticardiolipin (ACA) Ab, IgG Quant	\$ 22.08	2	\$	\$
32	86225	Anti-dsDNA Antibodies	\$ 22.07	2	\$	\$
33	86038	Antinuclear Antibodies (ANA) Direct	\$ 19.42	106	\$	\$
34	85300	Antithrombin Activity	\$ 19.03	2	\$	\$
35	82542	Aripiprazole	\$ 29.01	1	\$	\$
Subtotal [Sum of Total Cost Column Exhibit B-1, Page 1 of 13 (Item # 1 – 35)]:						\$

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3. Clinical Laboratory Fee Schedule Continued:
 3.1. Northern and Southern Correctional Facilities

Name of Bidder: _____
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Item #	Current Procedural Terminology (CPT) Code	Laboratory Test Description	2009 CMS Laboratory Fee Schedule, Medicare plus 10% (For Vendor Information Only)	Est. Two Year Volume	Unit Cost	Total Cost (Est. Vol. X Unit Cost)
36	84450	Aspartate Aminotransferase (AST/SGOT)	\$ 8.31	18	\$	\$
37	82205	Barbiturates (GC/MS), Blood	\$ 18.39	1	\$	\$
38	83880	B-Type Natriuretic Peptide	\$ 54.52	1	\$	\$
39	80154	Benzodiazepine Confirmation, Urine	\$ 29.70	1	\$	\$
40	87081	Beta-Hemolytic Strep Culture, Grp A	\$ 9.26	99	\$	\$
41	82232	B-2 Microglobulin, Serum	\$ 25.98	6	\$	\$
42	82232	B-2 Microglobulin, Serum (Serial)	\$ 25.98	1	\$	\$
43	82248	Bilirubin, Direct	\$ 8.06	1	\$	\$
44	82247	Bilirubin, Total	\$ 8.06	3	\$	\$
45	86003	Black Bean, IgE	\$ 8.38	1	\$	\$
46	87040	Blood Culture, Routine	\$ 16.58	4	\$	\$
47	87070	Body Fluid Culture, Sterile, Routine	\$ 13.83	2	\$	\$
48	83970	Parathyroid Hormone (PTH)	\$ 66.30	2	\$	\$
49	82652	Calcitriol (1, 25 di-OH Vitamin D)	\$ 61.82	2	\$	\$
50	82330	Calcium, Ionized, Serum	\$ 21.95	2	\$	\$
51	82310	Calcium, Serum	\$ 8.28	18	\$	\$
52	82340	Calcium, 24-Hr Urine	\$ 9.69	1	\$	\$
53	82360	Calculi, Urinary	\$ 20.68	6	\$	\$
54	82360	Calculi, Urinary, w/ Photograph	\$ 20.68	2	\$	\$
55	86304	Cancer Antigen (CA) 125, Serum	\$ 33.42	3	\$	\$
56	80156	Carbamazepine (Tegretol®), Serum	\$ 23.39	99	\$	\$
57	86301	Carbohydrate Antigen 19-9	\$ 33.42	3	\$	\$
58	82378	Carcinoembryonic Antigen (CEA)	\$ 30.47	7	\$	\$
59	82380	Carotene, Beta	\$ 14.82	5	\$	\$
60	84681	C-Peptide, Serum	\$ 33.42	1	\$	\$
61	86141	C-Reactive Protein (CRP), Cardiac	\$ 20.80	7	\$	\$
62	86140	C-Reactive Protein (CRP), Quant	\$ 8.32	185	\$	\$
63	85025	CBC w/ Differential/Platelet	\$ 12.49	2680	\$	\$
64	85014	CBC w/ Differential w/o Platelet	\$ 3.81	15	\$	\$
65	85014	CBC w/o Differential/Platelet	\$ 3.81	5	\$	\$
66	85027	CBC w/o Differential w/ Platelet	\$ 10.40	5	\$	\$
67	86200	CCP IgG Antibodies, ELISA	\$ 20.80	4	\$	\$
68	86360	CD4 and CD8 Absolute Count, w/ Ratio	\$ 22.08	1	\$	\$
69	89051	Cell Count, Body Fluid	\$ 8.84	3	\$	\$
70	82390	Ceruloplasmin	\$ 17.25	4	\$	\$
71	87491, 87591	Chlamydia/Gonococcus Amplified	\$ 83.66	116	\$	\$
72	87490, 87590	Chlamydia/Gonococcus, DNA Probe	\$ 64.42	123	\$	\$
73	87490, 87590	Chlamydia/GC, DNA Probe w/ Conf	\$ 64.42	8	\$	\$
74	87270	Chlamydia trachomatis, DFA	\$ 18.40	1	\$	\$
Subtotal [Sum of Total Cost Column Exhibit B-1, Page 2 of 13 (Item # 36 – 74)]:						\$

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3. Clinical Laboratory Fee Schedule Continued:
 3.1. Northern and Southern Correctional Facilities

Name of Bidder: _____
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Item #	Current Procedural Terminology (CPT) Code	Laboratory Test Description	2009 CMS Laboratory Fee Schedule, Medicare plus 10% (For Vendor Information Only)	Est. Two Year Volume	Unit Cost	Total Cost (Est. Vol. X Unit Cost)
75	87491	Chlamydia trachomatis, NAA	\$ 41.83	16	\$	\$
76	82465	Cholesterol, Total	\$ 7.00	1	\$	\$
77	82507	Citric Acid (Citrate), 24-Hr Urine	\$ 34.05	1	\$	\$
78	87324	Clostridium difficile Toxin A+B, EIA	\$ 18.40	58	\$	\$
79	87230	Clostridium difficile Toxin B Cytotox	\$ 31.38	1	\$	\$
80	80154	Clozapine (Clozaril®), Serum	\$ 29.70	9	\$	\$
81	86880	Coombs', Direct	\$ 8.62	1	\$	\$
82	82525	Copper, Serum or Plasma	\$ 19.93	1	\$	\$
83	82533	Cortisol	\$ 26.19	33	\$	\$
84	82533	Cortisol – AM	\$ 26.19	1	\$	\$
85	82550	Creatine Kinase (CK), Total, Serum	\$ 10.46	115	\$	\$
86	82570	Creatine, 24-Hr Urine	\$ 7.44	1	\$	\$
87	82575	Creatinine Clearance w/ Body Surface Area Normalization	\$ 15.17	11	\$	\$
88	82565	Creatinine, Serum (Blood)	\$ 8.23	110	\$	\$
89	82570, 81000	Creatinine Urine + Protein Urine	\$ 12.49	1	\$	\$
90	82595	Cryoglobulin, Ql, Serum	\$ 10.40	4	\$	\$
91	82595	Cryoglobulin, Ql, Serum w/ Qnt Rflx	\$ 10.40	6	\$	\$
92	89060	Crystal Exam, Miscellaneous Fluid	\$ 11.48	3	\$	\$
93	86644	Cytomegalovirus Antibodies, IgG	\$ 23.12	8	\$	\$
94	82627	Dehydroepiandrosterone Sulfate	\$ 35.71	2	\$	\$
95	80160	Desipramine, Serum	\$ 27.64	4	\$	\$
96	80154	Diazepam (Valium®), Serum	\$ 29.70	1	\$	\$
97	80162	Digoxin, Serum	\$ 21.33	8	\$	\$
98	85613	Dilute Russell Viper Venom Time	\$ 15.37	1	\$	\$
99	80166	Doxepin (Sinequan®), Serum	\$ 24.90	1	\$	\$
100	85613	dRVVT Mix	\$ 15.37	1	\$	\$
101	85613	dRVVT Confirm	\$ 15.37	1	\$	\$
102	80101 (x7)	Drug Profile, Blood (7 Drugs): Amphetamines; Barbiturates; Benzodiazepines; Cannabinoids; Cocaine; Opiates, Phencyclidine	\$ 154.84	1	\$	\$
103	80101 (x8)	Drug Profile, Urine (7 Drugs + Alcohol): Amphetamines; Barbiturates; Benzodiazepines; Cannabinoids; cocaine; Opiates; Phencyclidine; Alcohol.	\$ 176.96	1	\$	\$
Subtotal [Sum of Total Cost Column Exhibit B-1, Page 3 of 13 (Item # 75 – 103)]:						\$

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3. Clinical Laboratory Fee Schedule Continued:
 3.1. Northern and Southern Correctional Facilities

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Item #	Current Procedural Terminology (CPT) Code	Laboratory Test Description	2009 CMS Laboratory Fee Schedule, Medicare plus 10% (For Vendor Information Only)	Est. Two Year Volume	Unit Cost	Total Cost (Est. Vol. X Unit Cost)
104	80101 (x7)	Drug Profile Routine, Urine (7 Drug): Amphetamines; Barbiturates; Benzodiazepines; Cannabinoids; Cocaine; Opiates; Phencyclidine (GC/MS Confirm w/ + Charge)	\$ 154.84	1	\$	\$
105	80101 (x7)	Drug Profile Routine, Urine (7 Drug): Amphetamines; Barbiturates; Benzodiazepines; Cannabinoids; Cocaine; Opiates, Phencyclidine (GC/MS included)	\$ 154.84	2	\$	\$
106	80051	Electrolyte Panel	\$ 11.26	39	\$	\$
107	82668	Erythropoietin (EPO), Serum	\$ 30.20	1	\$	\$
108	82670	Estradiol	\$ 44.88	1	\$	\$
109	83891, 83894, 83898 (x2), 83912	Factor V Leiden Mutation Analysis	\$ 33.33	3	\$	\$
110	83892	Factor II, DNA Analysis	\$ 6.44	1	\$	\$
111	82728	Ferritin, Serum	\$ 21.88	588	\$	\$
112	85384	Fibrinogen Activity	\$ 13.64	1	\$	\$
113	82746	Folate (Folic Acid)	\$ 23.62	1	\$	\$
114	83001	FSH, Serum	\$ 29.85	7	\$	\$
115	83002	LH	\$ 29.74	19	\$	\$
116	87101, 87206	Fungus Culture w/ Stain	\$ 21.01	3	\$	\$
117	87101	Fungus (Mycology) Culture	\$ 12.39	1	\$	\$
118	86003	F002 Milk (Cow)	\$ 8.38	4	\$	\$
119	86003	F003 Codfish	\$ 8.38	2	\$	\$
120	86003	F006 Barley, Whole Grain	\$ 8.38	1	\$	\$
121	86003	F011 Buckwheat	\$ 8.38	1	\$	\$
122	86003	F013 Peanut	\$ 8.38	4	\$	\$
123	86003	F014 Soybean	\$ 8.38	2	\$	\$
124	86003	F015 White Bean	\$ 8.38	1	\$	\$
125	86003	F020 Almond	\$ 8.38	1	\$	\$
126	86003	F021 Cane Sugar	\$ 8.38	1	\$	\$
127	86003	F024 Shrimp	\$ 8.38	1	\$	\$
128	86003	F026 Pork	\$ 8.38	1	\$	\$
129	86003	F027 Beef	\$ 8.38	1	\$	\$
130	86003	F033 Orange	\$ 8.38	1	\$	\$
131	86003	F040 Tuna	\$ 8.38	5	\$	\$
132	86003	F041 Salmon	\$ 8.38	1	\$	\$
133	86003	F042 Haddock	\$ 8.38	1	\$	\$
134	86003	F045 Yeast, Baker's	\$ 8.38	1	\$	\$
135	86003	F046 Nut Mix 2	\$ 12.80	1	\$	\$
Subtotal [Sum of Total Cost Column Exhibit B-1, Page 4 of 13 (Item # 104 – 135)]:						\$

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3. Clinical Laboratory Fee Schedule Continued:
 3.1. Northern and Southern Correctional Facilities

Name of Bidder: _____
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Item #	Current Procedural Terminology (CPT) Code	Laboratory Test Description	2009 CMS Laboratory Fee Schedule, Medicare plus 10% (For Vendor Information Only)	Est. Two Year Volume	Unit Cost	Total Cost (Est. Vol. X Unit Cost)
136	86003	F048 Onions	\$ 8.38	4	\$	\$
137	86003	F049 Apple	\$ 8.38	1	\$	\$
138	86003	F050 Mackerel	\$ 8.38	1	\$	\$
139	86003	F079 Gluten	\$ 8.38	1	\$	\$
140	86003	F080 Lobster	\$ 8.38	1	\$	\$
141	86003	F081 Cheese, Cheddar	\$ 8.38	1	\$	\$
142	86003	F094 Pear	\$ 8.38	1	\$	\$
143	86003	F212 Mushroom	\$ 8.38	2	\$	\$
144	86003	F121 Pinto Bean	\$ 8.38	1	\$	\$
145	86003	F183 Sunflower Seed	\$ 8.38	1	\$	\$
146	86003	F203 Crab	\$ 8.38	3	\$	\$
147	86003	F207 Clam	\$ 8.38	1	\$	\$
148	86003	F284 Turkey	\$ 8.38	3	\$	\$
149	86003	F235 Lentil	\$ 8.38	1	\$	\$
150	86003	F236 Whey	\$ 8.38	1	\$	\$
151	86003	F242 Bing Cheery	\$ 8.38	1	\$	\$
152	86003	F245 Egg, Whole	\$ 8.38	4	\$	\$
153	86003	F256 Walnut, Food	\$ 8.38	1	\$	\$
154	86003	F287 Kidney Bean (Red Bean)	\$ 8.38	1	\$	\$
155	86003	F315 Green Bean	\$ 8.38	1	\$	\$
156	86003	F384 Whitefish	\$ 8.38	3	\$	\$
157	82491	Gabapentin (Neurontin®), Serum	\$ 29.01	59	\$	\$
158	87081	GC Culture Only	\$ 9.26	1	\$	\$
159	87070	Genital Culture, Routine	\$ 13.83	5	\$	\$
160	80170	Gentamicin, Serum, Peak	\$ 26.32	1	\$	\$
161	80170	Gentamicin, Serum, Trough	\$ 26.32	1	\$	\$
162	82951	Gestational Glucose Tolerance	\$ 20.68	1	\$	\$
163	82977	GGT	\$ 11.56	5	\$	\$
164	87329	Giardia lamblia Direct Detection EIA	\$ 18.40	3	\$	\$
165	82947	Glucose, Plasma	\$ 6.30	8	\$	\$
166	82947	Glucose, Serum	\$ 6.30	31	\$	\$
167	82951 (x4)	Glucose Tolerance Test (GTT), Blood 3 Specimens (includes Glucose)	\$ 82.72	1	\$	\$
168	82952	Glucose Tolerance Test (GTT), Blood, each additional beyond 3 Specimens	\$ 6.29	1	\$	\$
169	82950	Glucose, 1-Hour PP	\$ 7.62	2	\$	\$
170	82950	Glucose (1 Spec) Tolerance, Serum	\$ 7.62	2	\$	\$
171	82947	Glucose (2 Spec) Tolerance, Serum	\$ 6.30	2	\$	\$
172	83036	Glycohemoglobin (GHB), Total	\$ 15.59	1	\$	\$
Subtotal [Sum of Total Cost Column Exhibit B-1, Page 5 of 13 (Item # 136 – 172)]:						\$

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3. Clinical Laboratory Fee Schedule Continued:
 3.1. Northern and Southern Correctional Facilities

Name of Bidder: _____
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Item #	Current Procedural Terminology (CPT) Code	Laboratory Test Description	2009 CMS Laboratory Fee Schedule, Medicare plus 10% (For Vendor Information Only)	Est. Two Year Volume	Unit Cost	Total Cost (Est. Vol. X Unit Cost)
173	87205	Gram Stain	\$ 6.85	2	\$	\$
174	82955, 85041	G-6-PD, Quantity, Blood and RBC	\$ 20.42	1	\$	\$
175	84703	hCG, Beta Subunit, Qual, Serum	\$ 12.07	5	\$	\$
176	84702	hCG, Beta Subunit, Quant, Serum	\$ 24.18	10	\$	\$
177	80173	Haloperidon (Haldol®), Serum	\$ 23.39	5	\$	\$
178	87516	HBV, Amplified Probe Technique (DNA, Qualitative)	\$ 41.83	4	\$	\$
179	87517	HBV, Quantitative Quantification (DNA, QuantaSure™ PCR)	\$ 68.79	11	\$	\$
180	87517	HBV, Quantification (NGI SuperQuant™, Qnt PCR)	\$ 68.79	1	\$	\$
181	87517	HBV, Quantification (DNA QuantaSure™, PCR, Serial)	\$ 68.79	3	\$	\$
182	87517	HBV, Quantification (Real-Time PCR, Quant)	\$ 68.79	2	\$	\$
183	86803	HCV Ab (w/Rflx to RIBA)	\$ 21.37	12	\$	\$
184	86803	HCV Antibody	\$ 21.37	5	\$	\$
185	83883, 82172, 82247, 82977, 83010, 84460	HCV FibroSure	\$ 91.41	170	\$	\$
186	87902	HCV (Genotyping Nonreflex)	\$ 132.13	36	\$	\$
187	87522	HCV, Quantification (NGI SuperQuant™)	\$ 68.79	1	\$	\$
188	87522	HCV, Quantification (NGI QuantaSure™, Qnt, PCR)	\$ 68.79	2	\$	\$
189	87522	HCV, Quantification (QuantaSure™ Plus Non-Graph)	\$ 68.79	254	\$	\$
190	87522	HCV, Quantification (RNA PCR, Quan, Reflex Geno)	\$ 68.79	1	\$	\$
191	87522	HCV, Quantification (RT-PCR, Quant Non-Graph)	\$ 68.79	13	\$	\$
192	82175, 82570, 83655, 83825	Heavy Metals Profile I, Urine: Arsenic, Lead & Mercury	\$ 84.34	1	\$	\$
193	86677	Helicobacter pylori, IgA	\$ 23.31	1	\$	\$
194	86677	Helicobacter pylori, IgG	\$ 23.31	1	\$	\$
195	86677	Helicobacter pylori, IgM	\$ 23.31	1	\$	\$
196	86677 (x2)	Helicobacter pylori Ab IgG, IgA	\$ 46.62	1	\$	\$
197	86677 (x3)	Helicobacter pylori Ab IgG, IgA, IgM	\$ 69.93	3	\$	\$
198	86677	Helicobacter pylori Ab, IgG	\$ 23.31	127	\$	\$
199	86677	Helicobacter pylori, Ab, IgM	\$ 23.31	2	\$	\$
200	86361	Absolute CD4 (Helper T-Lymphocyte Marker CD4)	\$ 17.67	108	\$	\$
Subtotal [Sum of Total Cost Column Exhibit B-1, Page 6 of 13 (Item # 173 – 200)]:						\$

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3. Clinical Laboratory Fee Schedule Continued:
 3.1. Northern and Southern Correctional Facilities

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201	85014	Hematocrit	\$ 3.81	45	\$	\$
202	85018	Hemoglobin (Hgb)	\$ 3.81	36	\$	\$
203	83036	Hemoglobin (Hgb) A1c	\$ 15.59	2117	\$	\$
204	83021, 85660	Hemoglobinopathy Profile (Chromatography)	\$ 29.01	1	\$	\$
205	8302	Hemoglobinopathy Profile w/o Sol (Chromatography)	\$ 29.01	1	\$	\$
206	80076	Hepatic Function Panel (7)	\$ 13.12	1051	\$	\$
207	86709	Hepatitis A Antibody, IgM	\$ 18.08	4	\$	\$
208	86708	Hepatitis A Antibody, Total	\$ 19.90	2	\$	\$
209	86704	Hepatitis B Core Antibody, Total	\$ 19.36	1	\$	\$
210	86706	Hepatitis B Surface Antibody	\$ 17.25	12	\$	\$
211	87340	Hepatitis B Surface Antigen	\$ 16.59	12	\$	\$
212	87350	Hepatitis Be Antigen	\$ 18.51	7	\$	\$
213	86707	Hepatitis Be Antibody	\$ 18.58	6	\$	\$
214	86704, 86705	Hepatitis B Core Ab, IgG, IgM, Diff	\$ 38.26	1	\$	\$
215	83891, 83892 (x3), 83894 (x3), 83898 (x2), 83912	Hereditary Hemochromatosis, DNA (Enzymatic Digestion), (Separation by Gel Electrophoresis), (Amplification, Target, each Nucleic Acid Sequence), (Interpretation and Report)	\$ 64.40	21	\$	\$
216	86694	Herpes Simplex, Non-Specific Type Test (Virus Types I/II, IgG)	\$ 23.12	3	\$	\$
217	85732	Hexagonal Phase Phospholipid	\$ 10.00	1	\$	\$
218	83036	Hgb A1c with w/ MBG Estimation	\$ 15.59	427	\$	\$
219	86698	Histoplasma Abs, Quant, DID	\$ 20.08	1	\$	\$
220	87385	Histoplasma capsulatum, Ag, Serum	\$ 18.40	1	\$	\$
221	87385	Histoplasma capsulatum, Ag, Urine	\$ 18.40	1	\$	\$
222	86703	HIV-1 and HIV-2 Single Assay	\$ 22.02	1	\$	\$
223	87535	HIV-1 Amplified Probe Technique (HIV-1 Proviral, DNA, PCR Amplification)	\$ 41.83	1	\$	\$
224	87901, 87903, 87904 (x9)	HIV Phenotype + Genotype (HIV PhenoSenseGT™)	\$ 1,293.69	1	\$	\$
225	87536	HIV-1 Quantification (HIV-1 RNA b-DNA)	\$ 90.26	3	\$	\$
226	87536	HIV-1 Quantification (HIV-1 RNA b-DNA, Non-Graph)	\$ 90.26	1	\$	\$
Subtotal [Sum of Total Cost Column Exhibit B-1, Page 7 of 13 (Item # 201 – 226)]:						\$

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3. Clinical Laboratory Fee Schedule Continued:
 3.1. Northern and Southern Correctional Facilities

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227	87901	Infectious Agent Genotype Analysis by Nucleic Acid (DNA or RNA); HIV-1, Reverse Transcriptase and Protease (HIV GenoSure™)	\$ 132.13	2	\$	\$
228	87903, 87904	Infectious Agent Phenotype Analysis by Nucleic Acid w/ Drug Resistance Tissue Culture Analysis, HIV-1; first through 10 drugs tested (HIV-1 PhenoSense™ Comprehensive)	\$ 826.64	1	\$	\$
229	83890	HLA B 27 disease Association	\$ 6.44	1	\$	\$
230	87621	HPV, High-Risk DNA Detection	\$ 41.83	1	\$	\$
231	87255	HSV Culture w/o Typing	\$ 54.38	3	\$	\$
232	86696	HSV Type 2-Specific Ab, IgG	\$ 31.09	4	\$	\$
233	86695	HSV 1 & 2-Specific Ab, IgG	\$ 21.18	2	\$	\$
232	86694	HSV 1 & 2, IgG w Rflx to H I-II Type Specific, IgG Tests	\$ 23.12	1	\$	\$
233	83500, 83505	Hydroxyproline, Free & Total, Quant, 24-Hr	\$ 75.42	1	\$	\$
234	86335, 84166	IFE & Protein Elect, Random Urine	\$ 75.78	1	\$	\$
235	82784 (x3), 86344	IFE, Serum & PE, Serum	\$ 57.65	3	\$	\$
236	82784	Immunofixation, (IFE), Serum	\$ 14.94	1	\$	\$
237	82785	Immunoglobulin E, Total	\$ 26.46	1	\$	\$
238	82784	Immunoglobulin G, Qnt, Serum	\$ 14.94	1	\$	\$
239	87804 (x2)	Influenza A&B, Direct Immunoassay	\$ 18.40	1	\$	\$
240	83525	Insulin	\$ 18.36	2	\$	\$
241	83540, 83550	Iron + IBC w/o Saturation	\$ 24.46	1	\$	\$
242	83540, 83550	Iron & Total Iron Bind Cap (TIBC)	\$ 24.46	169	\$	\$
243	83540	Iron, Serum	\$ 10.41	1	\$	\$
244	81003, 82131, 82140, 82340, 82436, 82507, 82570, 83735, 83935, 83945, 84105, 84133, 84300, 84392, 84560	Kidney Stone, Urine w/ Saturation (Ammonia, Calcium, Chloride, Citrate, Creatinine, Cystine Magnesium, Osmolality, Oxalate, pH, Phosphorus, Potassium, Sodium, Sulfate, Total Volume, Uric Acid, Saturation Ratios: Brushite, Calcium Oxalate, Monosodium Urate, Struvite, Graph Review	\$ 194.16	2	\$	\$
245	83615	Lactic Acid Dehydrogenase (LDH)	\$ 9.69	11	\$	\$
246	83605	Lactic Acid, Plasma	\$ 17.15	3	\$	\$
247	82491	Lamotrigine (Lamictal®), Serum	\$ 29.01	7	\$	\$
Subtotal [Sum of Total Cost Column Exhibit B-1, Page 8 of 13 (Item # 227 – 247)]:						\$

Vendor Initials: _____

3. Clinical Laboratory Fee Schedule Continued:
 3.1. Northern and Southern Correctional Facilities

Name of Bidder: _____
 (as found on the State of NH Certificate of Good Standing to include DBA names)

248	86003	Latex-Specific IgE	\$ 8.38	1	\$	\$
249	83721	LDL Cholesterol (Direct)	\$ 14.73	1	\$	\$
250	83655	Lead, Blood (Adult)	\$ 19.44	2	\$	\$
251	83690	Lipase, Serum	\$ 11.07	94	\$	\$
252	80061	Lipid Panel	\$ 21.53	458	\$	\$
253	80061	Lipid Panel w/ LDL/HDL Ratio	\$ 21.53	2978	\$	\$
254	80178	Lithium (Eskalith®), Serum	\$ 10.62	382	\$	\$
255	85613, 85670, 85705, 85732	Lupus Anticoagulant Comprehensive	\$ 45.88	2	\$	\$
256	85613, 85732	Lupus Anticoagulant w/ Reflex	\$ 25.37	1	\$	\$
257	86618 (x2)	Lyme, Ab , Total IgG/IgM	\$ 45.92	9	\$	\$
258	86618 (x2)	Lyme, Total Ab Test w/ Reflex	\$ 45.92	3	\$	\$
259	86617 (x2)	Lyme, Serum, Western Blot	\$ 49.74	4	\$	\$
260	86618 (x2)	Lyme, Ab, Include Rflx Western Blot on Positives	\$ 45.92	7	\$	\$
261	83735	Magnesium, Serum	\$ 10.76	82	\$	\$
262	88299	Unlisted Cytogenic Study (Marfan Syndrome Analysis)	\$	1	\$	\$
263	80101	MDMA, Urine (GC/MS included) Includes: MBA, MDMA, MDEA	\$ 22.12	1	\$	\$
264	86765, 86735, 86762	Measles/Mumps/Rubella Immunity (Profile)	\$ 64.78	1	\$	\$
265	80048	Metabolic Panel (8), Basic	\$ 13.60	293	\$	\$
266	80053	Metabolic Panel (14), Comprehensive	\$ 16.98	3939	\$	\$
267	83835	Metanephrine (Metanephrines, Frac, Quant, 24-Hr Urine)	\$ 27.21	1	\$	\$
268	83835	Metanephrines Urine, Total	\$ 27.21	1	\$	\$
269	87186	MIC Organism # 1	\$ 13.88	114	\$	\$
270	87186	MIC Organism # 2	\$ 13.88	7	\$	\$
271	82043, 82570	Microalb/Creat Ratio, Random Urine	\$ 17.01	38	\$	\$
272	82043	Microalbumin Random Urine	\$ 8.69	29	\$	\$
273	81015	Microscopic Examination of Urine	\$ 4.87	5	\$	\$
274	83516	Mitochondrial (M2) Antibody	\$ 18.40	6	\$	\$
275	86308	Mono Qual w/Rflx to Titer on +	\$ 8.32	1	\$	\$
276	86308	Mononucleosis Test, Qualitative	\$ 8.32	9	\$	\$
277	87081	MRSA Culture Only	\$ 9.26	11	\$	\$
278	87081	MRSA Culture/Susceptibility	\$ 9.26	1	\$	\$
279	83874	Myoglobin, Urine	\$ 20.75	1	\$	\$
280	82172, 82247, 82465, 82947, 82977, 83010, 83883, 84450, 84460, 84478	Non Alcoholic Fatty Tissue Disease (NASH FibroSure)	\$ 112.29	6	\$	\$
281	87591	Neisseria gonorrhoeae, NAA	\$ 41.83	16	\$	\$
282	80182	Nortriptyline (Aventyl®), Serum	\$ 21.76	7	\$	\$
283	83925	Opiates (4) Confirmation, Urine	\$ 31.25	2	\$	\$
284	83930	Osmolality, Serum	\$ 10.62	1	\$	\$
285	83935	Osmolality, Urine	\$ 10.95	2	\$	\$
286	87177, 87209	Ova + Parasites Examination	\$ 43.15	69	\$	\$
Subtotal [Sum of Total Cost Column Exhibit B-1, Page 9 of 13 (Item # 248 – 286)]:						\$

Vendor Initials: _____

3. Clinical Laboratory Fee Schedule Continued:
 3.1. Northern and Southern Correctional Facilities

Name of Bidder: _____
 (as found on the State of NH Certificate of Good Standing to include DBA names)

Item #	Current Procedural Terminology (CPT) Code	Laboratory Test Description	2009 CMS Laboratory Fee Schedule, Medicare plus 10% (For Vendor Information Only)	Est. Two Year Volume	Unit Cost	Total Cost (Est. Vol. X Unit Cost)
287	83945	Oxalate, Quant, 24-Hr Urine	\$ 20.68	1	\$	\$
288	82491	Oxcarbazepine (Trileptal®), Serum	\$ 29.01	2	\$	\$
289	88175	Pap IG (Image Guided), Lb	\$ 42.55	10	\$	\$
290	87491, 87591, 88142	Pap Lb, CG, NAA	\$ 116.20	2	\$	\$
291	87491, 88142	Pap Lb, Ct, NAA	\$ 74.37	10	\$	\$
292	88142	Pap Lb (Liquid-Based)	\$ 32.54	203	\$	\$
293	88164	Pap Smear, 1 Slide	\$ 16.96	1	\$	\$
294	82205	Pentobarbital (Nembutal®), Serum	\$ 18.39	1	\$	\$
295	80184	Phenobarbital (Luminal®), Serum	\$ 18.39	42	\$	\$
296	80185	Phenytoin (Dilantin®), Serum	\$ 21.30	179	\$	\$
297	84100	Phosphorus, Serum	\$ 7.62	62	\$	\$
298	84105	Phosphorus, 24-Hr Urine	\$ 8.32	1	\$	\$
299	86022 (x4)	Platelet Antibody, Serum	\$ 118.00	1	\$	\$
300	85049	Platelet Count	\$ 7.18	18	\$	\$
301	84110	Porphobilinogen (PCG), Quant, Random Urine	\$ 11.23	2	\$	\$
302	84132	Potassium, Serum	\$ 7.37	28	\$	\$
303	85025, 86592, 86762, 86850, 86900, 86901, 87340	Prenatal Profile I w/ Hep B Surf Ag	\$ 67.53	3	\$	\$
304	84146	Prolactin	\$ 31.13	27	\$	\$
305	84153	Prostate-Specific Ag (PSA), Serum	\$ 23.31	818	\$	\$
306	84066	Prostatic Acid Phos (PAP), Serum	\$ 15.51	17	\$	\$
307	85302	Protein C Antigen	\$ 19.31	1	\$	\$
308	85303	Protein C-Functional	\$ 20.47	1	\$	\$
309	84166	Protein Electro, Random Urine	\$ 28.64	2	\$	\$
310	84165	Protein Electrophoreses, S	\$ 17.25	8	\$	\$
311	85306	Protein S-Functional	\$ 22.96	1	\$	\$
312	84157	Protein, Total, Body Fluid	\$ 5.75	2	\$	\$
313	84156	Protein Total, Quant, 24-Hr Urine	\$ 5.75	10	\$	\$
314	84155	Protein, Total, Serum	\$ 5.75	2	\$	\$
315	84156	Protein, Total, Urine	\$ 5.75	1	\$	\$
316	85610	Prothrombin Time (PT)	\$ 6.31	782	\$	\$
317	84202	Protoporphyrin, RBC: Quantitative (Protoporphyrin, FEP/ZPP)	\$ 23.05	1	\$	\$
318	84153	PSA, Free: Total Ratio Reflex	\$ 23.31	2	\$	\$
319	84154	PSA, % Free: Total Ratio	\$ 23.31	2	\$	\$
320	83970	PTH, Intact	\$ 66.30	37	\$	\$
Subtotal [Sum of Total Cost Column Exhibit B-1, Page 10 of 13 (Item # 287 – 320):						\$

Vendor Initials: _____

3. Clinical Laboratory Fee Schedule Continued:
 3.1. Northern and Southern Correctional Facilities

Name of Bidder: _____
 (as found on the State of NH Certificate of Good Standing to include DBA names)

Item #	Current Procedural Terminology (CPT) Code	Laboratory Test Description	2009 CMS Laboratory Fee Schedule, Medicare plus 10% (For Vendor Information Only)	Est. Two Year Volume	Unit Cost	Total Cost (Est. Vol. X Unit Cost)
321	85610, 85730	PT and PTT	\$ 15.95	46	\$	\$
322	85730	PTT, Acitivated	\$ 9.64	6	\$	\$
323	85732 (x2)	PTT-LA Incub Mix	\$ 20.00	1	\$	\$
324	85732 (x2)	PTT-LA Mix	\$ 20.00	2	\$	\$
325	86592	Rapid Plasma Reagin (RPR), Qual	\$ 6.85	43	\$	\$
326	80069	Renal Function Panel (10)	\$ 13.95	4	\$	\$
327	85045	Reticulocyte Count	\$ 6.44	5	\$	\$
328	86901	Rh Typing (Factor)	\$ 4.79	1	\$	\$
329	86431	Rheumatoid Arthritis (RA) Factor	\$ 9.12	100	\$	\$
330	82542	Risperidone (Risperdal®), Serum	\$ 29.01	1	\$	\$
331	87536	HIV-1 Quantification (RNA, PCR (Non-Graph) Rflx/Geno)	\$ 90.26	1	\$	\$
332	87536	HIV-1 Quantification (RNA, PCR (Non-Graph) Rflx/Geno +)	\$ 90.26	1	\$	\$
333	87536	HIV-1 Quantification (RNA, Real Time PCR Graph)	\$ 90.26	95	\$	\$
334	87536	HIV-1 Quantification (RNA, Real Time PCR (Non-Graph)	\$ 90.26	4	\$	\$
335	86593	RPR, Quantitation (RPR Qn + TP-PA)	\$ 7.07	1	\$	\$
336	86592	RPR Qualitative (RPR, Rfx Quan RPR/Confirm TP-PA)	\$ 6.85	1	\$	\$
337	86762	Rubella Antibodies, IgG	\$ 23.12	4	\$	\$
338	87045	Salmonella/Shigella Screen	\$ 15.15	1	\$	\$
339	85652	Sedimentation Rate-Westergren	\$ 4.33	248	\$	\$
340	87186	Sensitivity Organism # 1	\$ 13.88	146	\$	\$
341	87186	Sensitivity Organism # 2	\$ 13.88	32	\$	\$
342	87186	Sensitivity Organism # 3	\$ 13.88	9	\$	\$
343	87186	Sensitivity Organism # 4	\$ 13.88	5	\$	\$
344	84270	Sex Hormone Binding Globul, Serum	\$ 34.90	1	\$	\$
345	84295	Sodium, Serum	\$ 7.47	3	\$	\$
346	81003	Specific Gravity, Urine	\$ 2.86	2	\$	\$
347	82360	Stone Analysis	\$ 20.68	7	\$	\$
348	87045	Stool Culture	\$ 15.15	24	\$	\$
359	84402	Testosterone, Free (Direct) Serum	\$ 39.05	3	\$	\$
350	84402, 84403	Testosterone Free, Serum (Equilibrium) w/ Total	\$ 80.52	2	\$	\$
351	84403	Testosterone, Total, Serum	\$ 41.47	19	\$	\$
352	80198	Theophylline, Serum	\$ 22.73	33	\$	\$
353	84443	Thyroid Cascade Profile w/o Reflex (TSH)	\$ 26.98	8	\$	\$
Subtotal [Sum of Total Cost Column Exhibit B-1, Page 11 of 13 (Item # 321 – 353):						\$

Vendor Initials: _____

3. Clinical Laboratory Fee Schedule Continued:
 3.1. Northern and Southern Correctional Facilities

Name of Bidder: _____
 (as found on the State of NH Certificate of Good Standing to include DBA names)

Item #	Current Procedural Terminology (CPT) Code	Laboratory Test Description	2009 CMS Laboratory Fee Schedule, Medicare plus 10% (For Vendor Information Only)	Est. Two Year Volume	Unit Cost	Total Cost (Est. Vol. X Unit Cost)
354	84443, 84439, 84481, 86376	Thyroid Cascade Profile w/ Reflex	\$ 90.75	8	\$	\$
355	84436, 84479	Thyroid Panel/Profile	\$ 18.52	11	\$	\$
356	84436, 84443, 84479	Thyroid Panel/Profile w/ TSH	\$ 45.50	3	\$	\$
357	86376	Thyroid Peroxidase (TPO) Ab	\$ 23.38	1	\$	\$
358	84443	Thyroid-Stimulating Hormone (TSH)	\$ 26.98	1529	\$	\$
359	83520	Thyrotropin Receptor Ab, Serum	\$ 20.80	1	\$	\$
360	84436	Thyroxine (T4)	\$ 9.26	81	\$	\$
361	84439	Thyroxine (T4) Free, Direct, Serum	\$ 14.49	26	\$	\$
362	80200	Tobramycin (Nebcin®), Serum, Peak	\$ 25.88	1	\$	\$
363	80200	Tobramycin, (Nebcin®) Serum, Trough	\$ 25.88	1	\$	\$
364	80201	Topiramate (Topamax®), Serum	\$ 19.14	2	\$	\$
365	86777	Toxoplasma gondii Antibodies, IgG	\$ 23.12	9	\$	\$
366	87798	Toxoplasma gondii, PCR	\$ 41.83	1	\$	\$
367	86781	Treponema pallidum Ab (FTA-ABS)	\$ 21.27	7	\$	\$
368	86781	Treponema pallidum Ab (TP-PA)	\$ 21.27	3	\$	\$
369	80101	Tricyclic Antidepressants Screen, Ser	\$ 22.12	1	\$	\$
370	82492	Tricyclic, Serum	\$ 29.01	2	\$	\$
371	84480	Tri-iodothyronine (T3)	\$ 22.77	67	\$	\$
372	84481	Tri-iodothyronine (T3), Free, Serum	\$ 27.21	1	\$	\$
373	84479	T3 Uptake	\$ 9.26	38	\$	\$
374	81001	UA/M w/ Rflx Culture, Comp	\$ 5.09	30	\$	\$
375	81001	UA/M w/ Rflx Culture, Routine	\$ 5.09	53	\$	\$
376	87070	Upper Respiratory Culture, Routine	\$ 13.83	93	\$	\$
377	84520	Urea Nitrogen, Serum (Bun)	\$ 6.34	97	\$	\$
378	84550	Uric Acid, Serum	\$ 7.25	67	\$	\$
379	81001	Urinalysis, Complete w/ Mic Exam	\$ 5.09	58	\$	\$
380	81003	Urinalysis, Routine w/ Mic Exam +	\$ 2.86	357	\$	\$
381	87086	Urine Culture, Comprehensive	\$ 10.31	11	\$	\$
382	87086	Urine Culture, Routine	\$ 10.31	300	\$	\$
383	80164	Valproic Acid (Depakote®), Serum	\$ 21.76	369	\$	\$
384	80202	Vancomycin (Vancocin®), Serum Peak	\$ 21.76	8	\$	\$
385	80202 (x2)	Vancomycin, Serum, Peak & Trough	\$ 43.52	16	\$	\$
386	82570, 84585	Vanillylmandelic Acid, 24-Hr Urine	\$ 33.22	1	\$	\$
387	87252	Viral Culture, General	\$ 41.87	4	\$	\$
388	85810	Viscosity, Serum	\$ 18.76	7	\$	\$
389	84590	Vitamin A, Serum	\$ 18.62	1	\$	\$
390	82607	Vitamin B 12	\$ 19.27	7	\$	\$
Subtotal [Sum of Total Cost Column Exhibit B-1, Page 12 of 13 (Item # 354 – 390)]:						\$

Vendor Initials: _____

3. Clinical Laboratory Fee Schedule Continued:
 3.1. Northern and Southern Correctional Facilities

Name of Bidder: _____
 (as found on the State of NH Certificate of Good Standing to include DBA names)

Item #	Current Procedural Terminology (CPT) Code	Laboratory Test Description	2009 CMS Laboratory Fee Schedule, Medicare plus 10% (For Vendor Information Only)	Est. Two Year Volume	Unit Cost	Total Cost (Est. Vol. X Unit Cost)
391	82607, 82746	Vitamin B12 & Folates	\$ 42.89	108	\$	\$
392	82180	Vitamin C	\$ 15.87	3	\$	\$
393	82306	Vitamin D, 25-Hydroxy	\$ 47.54	4	\$	\$
394	82570	VMA, Random Urine	\$ 8.32	1	\$	\$
395	85048	White Blood Cell (WBC) Count	\$ 3.42	2	\$	\$
396	86003	White Pollock, IgE	\$ 8.38	1	\$	\$
397	80101 (x10)	NHDOC SLP Drug Screen Panel (10)	\$ 221.20	5	\$	\$
398	80101 (x11)	NHDOC SLP Drug Screen Panel (11)	\$ 243.32	5	\$	\$
399	80101 (x14)	NHDOC SLP Drug Screen Panel (14)	\$ 309.68	1200	\$	\$
400	80074	NHDOC SLP Hepatitis Panel, Acute (4)	\$ 74.94	2	\$	\$
401	80053	NHDOC SLP Admission Panel 1 (CMP 14 + LP + RPR)	\$ 16.98	2302	\$	\$
402	80053	NHDOC SLP Admission Panel 2 (CMP 14 + LP RPR + PSA)	\$ 16.98	191	\$	\$
403	80053	NHDOC SLP Admission Panel 3 (CMP 14 + TP + CBC/D/PIT + RPR)	\$ 16.98	1	\$	\$
Subtotal [Sum of Total Cost Column Exhibit B-1, Page 13 of 13 (Item # 391– 403)]:						\$
Two Year Estimated Budget: [Add Subtotal Cost Columns Exhibit B-1, Pages 1 – 13 (Item # 1 – 403)]						\$

Please Note:

- (1) Multiplier noted in CPT Code column (column #2) has been applied to CMS Fee Schedule (column # 4). This represents Medicare plus 10% for that given laboratory procedure.
- (2) Item # 262: Marfan’s Chromosome Analysis has been coded with an unlisted Cytogenic Study. This is not reimbursable under CMS Fee Schedule. Please provide pricing for this CPT test code.
- (3) Item # 303: CPT code 86850 is not on the CMS Fee Schedule. The quoted CMS Fee Schedule pricing found in column # 4 does not include the cost of CPT code 86850. Please provide pricing to include the cost of CPT code 86850.
- (4) Item # 397 – 403: Contents of these specialty screens are found in Exhibit A-1, NHDOC Panels, Page 1 & 2. Please provide bundled pricing for the NHDOC Panels. Drug screens pricing shall include confirmatory pricing.

Vendor Initials: _____