

CPT	Procedure Description	Prompt Pay Price ⁽¹⁾
U0001	2019-ncov diagnostic p	\$41
U0002	Covid-19 lab test non-cdc	\$58
U0003	Cov-19 amp prb hgh thrupt	\$116
U0004	Cov-19 test non-cdc hgh thru	\$116
86328	Ia nfct ab sarscov2 covid19	\$57
36415	Routine venipuncture	\$28
85025	Complete cbc w/auto diff wbc	\$121
80048	Metabolic panel total ca	\$190
80053	Comprehen metabolic panel	\$260
85027	Complete cbc automated	\$87
83735	Assay of magnesium	\$120
84484	Assay of troponin quant	\$173
85610	Prothrombin time	\$82
81001	Urinalysis auto w/scope	\$67
84100	Assay of phosphorus	\$86
85730	Thromboplastin time partial	\$93
82248	Bilirubin direct	\$94
87040	Blood culture for bacteria	\$318
83690	Assay of lipase	\$119
84132	Assay of serum potassium	\$97
88305	Tissue exam by pathologist	\$271
87086	Urine culture/colony count	\$72
86901	Blood typing serologic rh(d)	\$76
86900	Blood typing serologic abo	\$123
86850	Rbc antibody screen	\$194
88185	Flowcytometry/tc add-on	\$120
82330	Assay of calcium	\$166
87149	Dna/rna direct probe	\$48
87400	Influenza a/b each ag ia	\$77
87205	Smear gram stain	\$92
83036	Glycosylated hemoglobin test	\$72
85018	Hemoglobin	\$39
83880	Assay of natriuretic peptide	\$164
85014	Hematocrit	\$37
80069	Renal function panel	\$209
84443	Assay thyroid stim hormone	\$162
85007	Bl smear w/diff wbc count	\$50
84145	Procalcitonin (pct)	\$132
88341	Immunohisto antib addl slide	\$187
82550	Assay of ck (cpk)	\$109
87077	Culture aerobic identify	\$52
81025	Urine pregnancy test	\$131
80306	Drug test prsmv instrmnt	\$157
87070	Culture othr specimn aerobic	\$195

CPT	Procedure Description	Prompt Pay Price ⁽¹⁾
87186	Microbe susceptible mic	\$170
85379	Fibrin degradation quant	\$160
86920	Compatibility test spin	\$190
84520	Assay of urea nitrogen	\$76
80051	Electrolyte panel	\$131
84295	Assay of serum sodium	\$85
P9016	Rbc leukocytes reduced	\$362
84703	Chorionic gonadotropin assay	\$221
80061	Lipid panel	\$213
80320	Drug screen quantalcohols	\$103
86635	Coccidioides antibody	\$90

The above prices are for laboratory procedures performed at HonorHealth facilities and do not include physicians' fees. Please contact your physicians' office and health insurance provider directly for price information.

⁽¹⁾ Prompt Pay Price is the average price a self-pay patient will pay when paid-in-full in advance of having this procedure.

Deer Valley Medical Center

19829 N.27th Ave.
Phoenix, AZ 85027
(623) 879-6100

John C. Lincoln Medical Center

250 E. Dunlap Ave.
Phoenix, AZ 85020
(602) 943-2381

Scottsdale Osborn Medical Center

7400 E. Osborn Rd.
Scottsdale, AZ 85251
(480) 882-4000

Scottsdale Shea Medical Center

9003 E. Shea Blvd.
Scottsdale, AZ 85260
(480) 323-3000

Scottsdale Thompson Peak Medical Center

7400 E. Thompson Peak Pkwy.
Scottsdale, AZ 85255
(480) 324-7000

Sonoran Crossing Medical Center

33400 N. 32nd Ave.
Phoenix, AZ 85085
(623) 683-5000