

CPT	Procedure Description	Prompt Pay Price ⁽¹⁾
U0001	2019-ncov diagnostic p	\$35
U0002	Covid-19 lab test non-cdc	\$50
U0003	Cov-19 amp prb hgh thrupt	\$100
U0004	Cov-19 test non-cdc hgh thru	\$100
86328	Ia nfct ab sarscov2 covid19	\$49
36415	Routine venipuncture	\$28
85025	Complete cbc w/auto diff wbc	\$105
80048	Metabolic panel total ca	\$169
80053	Comprehen metabolic panel	\$231
85027	Complete cbc automated	\$75
83735	Assay of magnesium	\$103
84484	Assay of troponin quant	\$149
85610	Prothrombin time	\$71
81001	Urinalysis auto w/scope	\$67
84100	Assay of phosphorus	\$74
85730	Thromboplastin time partial	\$80
82248	Bilirubin direct	\$81
87040	Blood culture for bacteria	\$274
83690	Assay of lipase	\$103
84132	Assay of serum potassium	\$83
88305	Tissue exam by pathologist	\$271
87086	Urine culture/colony count	\$62
86901	Blood typing serologic rh(d)	\$66
86900	Blood typing serologic abo	\$106
86850	Rbc antibody screen	\$168
88185	Flowcytometry/tc add-on	\$120
82330	Assay of calcium	\$143
87149	Dna/rna direct probe	\$42
87400	Influenza a/b each ag ia	\$67
87205	Smear gram stain	\$79
83036	Glycosylated hemoglobin test	\$62
85018	Hemoglobin	\$34
83880	Assay of natriuretic peptide	\$142
85014	Hematocrit	\$32
80069	Renal function panel	\$186
84443	Assay thyroid stim hormone	\$140
85007	Bl smear w/diff wbc count	\$43
84145	Procalcitonin (pct)	\$114
88341	Immunohisto antib addl slide	\$187
82550	Assay of ck (cpk)	\$94
87077	Culture aerobic identify	\$45
81025	Urine pregnancy test	\$131
80306	Drug test prsmv instrmnt	\$136
87070	Culture othr specimn aerobic	\$168

CPT	Procedure Description	Prompt Pay Price ⁽¹⁾
87186	Microbe susceptible mic	\$146
85379	Fibrin degradation quant	\$138
86920	Compatibility test spin	\$165
84520	Assay of urea nitrogen	\$66
80051	Electrolyte panel	\$117
84295	Assay of serum sodium	\$73
P9016	Rbc leukocytes reduced	\$314
84703	Chorionic gonadotropin assay	\$191
80061	Lipid panel	\$190
80320	Drug screen quantalcohols	\$89
86635	Coccidioides antibody	\$78

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