



Alaska Medical Assistance

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Remittance Advice (RA) Message

Title: **Rate Changes for Genetic Testing**

Issue Date: 01/10/2018

Run Length: 8 weeks

Provider Type(s): 001, 005, 020, 033, 034, 080

Message: Alaska Medicaid utilizes the Medicare Clinical Laboratory Fee Schedule to set rates for covered laboratory procedures. The Centers for Medicare and Medicaid Services' newly established rates for the following codes will be effective for Alaska Medicaid services provided on and after 2/11/2018.

81220 (CFTR Gene Common Variant): \$556.60

81243 (FMR1 Gene Detection): \$57.04

81228 (Cytogenomic Microarray): \$900.00

81229 (Cytogenomic Microarray): \$1,160.00

81404 (Molecular Pathology Level 5): \$274.83

81405 (Molecular Pathology Level 6): \$301.35

81507 (Fetal Aneuploidy Trisomy Risk): \$795.00