Rushmore
Obstetrics & Gynecology

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Optional Screening Information

We strongly encourage you to contact your insurance company regarding benefits/coverage for these prior to having the tests completed as they sometimes require preauthorization. Below are the procedure codes and *estimated* costs for each. Please let our office know if you desire them.

Cystic Fibrosis Genetic Carrier Testing (can be drawn in our office and sent to the lab)

Cystic fibrosis is a genetic disease that is passed from parents to children. It primarily affects the lungs and digestive system. For a baby to have cystic fibrosis (CF), both the mother and father need to carry the gene for CF. We can test you for the gene. This is done with a blood test that can be done at any time during the pregnancy. If you have the gene, we can then test the father of the baby. If both of you have the gene, your baby has a 1 in 4 (25%) chance of having CF. (Please be aware that this is an expensive test and it is recommended you check your insurance coverage. Even if insurance does decline coverage you can choose to have the test and pay for it.)

Diagnosis Code: Z31.430 unless other indicators (family history, etc)

CPT Codes:

81220	$800.00
36415 (blood draw)	$10.00

Noninvasive Prenatal Testing (can be drawn in our office and sent to the lab)

The Noninvasive Prenatal test (NIPT) is a non-invasive test for Down Syndrome (Trisomy 21), Edwards Syndrome (Trisomy 18), Patau Syndrome (Trisomy 13), and other Sex Chromosome Conditions (Klinefelter Syndrome, Turner Syndrome). These syndromes are caused when there is an unexpected number (normal is two) of a particular chromosome. The test measures the amount of fetal chromosomes in the maternal blood, giving a risk for the above syndromes. The testing can be completed at any time after 9 weeks gestation and is a blood draw. This test is available for all pregnancies but is most recommended for high-risk obstetrical patients. (Please be aware that this is an expensive test and it is recommended you check your insurance coverage. Even if insurance does decline coverage you can choose to have the test and pay for it.)

Diagnosis Code: Z36.0 unless other indicators (advanced maternal age, family history, etc)

CPT Codes:

81420	$1100.00
36415 (blood draw)	$10.00

Optional Screening Information Continued

First Trimester Screening (requires visit to maternal fetal medicine specialist)

The NT screen is a combination of blood tests and an ultrasound that is done to screen for Down Syndrome, or Trisomy 21, where the baby has 3 copies of the 21st chromosome. This results in issues such as mental retardation and defects with the baby's organs such as the heart. It also can detect Trisomy 18. This screening is done between 11 and 14 weeks of pregnancy. It is more accurate at detecting problems than the Quad Screen and can be done earlier in pregnancy. We do not perform this screening in our office, but we can refer you to a number of other facilities where you can have this screening done. If the test comes back abnormal, you will be offered further testing. (Please be aware that this is an expensive test and it is recommended you check your insurance coverage. Even if insurance does decline coverage you can choose to have the test and pay for it.)

Diagnosis Code: Z36.0 unless other indicators (advanced maternal age, history, etc)
CPT Codes:

76813 (ultrasound for 1 gestation)	$450.00
76814 (each additional gestation)	$300.00
84163 & 84702 (lab tests)	$150.00
36415 (blood draw)	$10.00
Office visit with physician	$200.00-$500.00

Second Trimester Screening (can be drawn in our office and sent to the lab)

The Quad Screen is a blood test that is done on the mother to look for certain birth defects in the baby between 16 0/7 and 19 weeks optimally of pregnancy. The most common problem this test can detect is Down Syndrome. Another problem this test can detect is spina bifida, where the baby's spine closes incorrectly. This test can have false positives, where the test results are abnormal, but the baby is normal. The test can also have false negatives, where the test results are normal, but the baby is born with a defect that the test will usually detect. If the test comes back abnormal, you will be offered further testing.

Diagnosis Code: Z36.1 unless other indicators (advanced maternal age, family history, etc)
CPT Codes:

82105, 82677, 84702, 86336	$475.00
36415 (blood draw)	$10.00

The costs listed above should only be used as a guideline; actual costs may vary once testing is initiated.