

## GENETIC ASSAYS - Insurances Accepted?

INSURANCE	RVBP w/COVID	Diarrhea Panel	Bacterial Vag Panel
ABS Assurant Health Self-funded	Yes	Yes	Yes
Aetna	Out of Network	Out of Network	Out of Network
Alabama Medicaid	Yes	Yes	Yes
Ambetter	Yes	Yes	Yes
Amerchoice	Yes	Yes	Yes
Amerigroup Wellpoint	Yes	Yes	Yes
Arkansas Medicaid	Yes	Yes	Yes
Ascension Personalized Care	NO	NO	NO
Ascension Smart Health (WOY Prefix)	Yes	Yes	Yes
Blue Advantage	Yes	Yes	Yes
BlueCare (ID: ZEC)/TNCare (ID: ZED)	Yes	Yes	Yes
BCBS CoverKids (ID: ZXK)	Yes	Yes	Yes
BlueCross BlueShield TN	Yes	Yes	Yes
Bright Healthcare	NO	NO	NO
Cigna	Out of Network	Out of Network	Out of Network
Golden Rule	Yes	Yes	Yes
Great West	Yes	Yes	Yes
HealthSpring	Yes	Yes	Yes
Healthscope Benefits Inc.	Yes	Yes	Yes
Humana (Commercial) - ID: #'S Only	Out of Network	Out of Network	Out of Network
Humana (Medicare)-ID: starts with H	NO	NO	NO
Medicare (Palmetto GBA)	Yes	Yes	Yes
Medishare	Yes	Yes	Yes
Meritain	Yes	Yes	Yes
Oscar	NO	NO	NO
TriCare	Yes	Yes	Yes
UMR	Yes	Yes	Yes
United Healthcare	Yes	Yes	Yes
United Healthcare Community Plan	Yes	Yes	Yes
Wellpoint (Formally Amerigroup)	Yes	Yes	Yes
<b>Maximum Out-of-Pocket Expense if applied towards deductible or insurance doesn't pay</b>	<b>\$199</b>	<b>\$199</b>	<b>\$189</b>
<b>"Out Of Network" - We will file the claim, but it may go toward the patient's out of network deductible.</b>			
<b>"NO" Insurances: Patient may prepay with credit card the maximum out of pocket fee. Use "Self Pay Authorization Form"</b>			