



2026 Lab Trend Report



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From the Desk of Bill Kerr, MD

CEO, Avalon

Avalon's 2026 Lab Trend Report is made possible through our work with health plans across the country. We are privileged to manage lab benefits across 90 million lives.

In this report, you will find:

- Important insights into lab testing trends
- Routine and genetic testing activity
- Case studies in Averted costs, Lab Values Management in Oncology and Routine Radiology Management
- Emerging trends in lab science – including blood biomarker tests for cancer (MCED, MRD), Alzheimer's disease, and other health conditions
- Emerging public policy issues – including AI regulation and the rise of direct-to-consumer testing paired with wearable health data

[Read more from Dr. Kerr](#) →

A portrait of Bill Kerr, MD, a middle-aged man with short grey hair, wearing a blue button-down shirt and a grey patterned blazer. He is standing outdoors with his arms crossed, leaning against a white pillar. The background shows a modern building with large windows.

“Industry is at an inflection point, where diagnostics are no longer just inputs for care decisions, but are actively shaping the **quality, timing, and value of care.**”



Executive Summary



General Themes in the 2026 Lab Trend Report



Lab Testing Landscape and Snapshot of 2025 Lab Testing Data

Biggest spending was on routine testing for chronic disease screening and disease monitoring as well as genetic testing for oncology and fetal/child health diagnosis and management (again), according to Avalon data in 2025.



2025 Lab Trends

Modest growth in routine testing, but double-digit in genetic testing. The report also shows insights into why the site of lab testing and thoughtful prior authorization and optimizing care processes matter so much.



Lab Value Management, Routine Radiology Management and Averted Costs

Avalon is combining lab value management with appropriate clinical care action plans. Three examples and case studies demonstrate how to offer testing for the right patient at the right time while reducing costs.

General Themes in the 2026 Lab Trend Report, *continued*



Emerging Trends

Innovative cancer testing is an emerging trend, including multicancer early detection and minimal residual disease. Blood biomarker testing has advanced for Alzheimer's disease and chronic disease management.



Policy Update

The regulatory and policy landscape is changing fast and that impacts lab testing. Examples include the federal government's commitment to a light-touch, innovation-forward AI regulatory posture, the role of wearables and direct-to-consumer (DTC) lab testing in quietly reshaping who controls health data, and the positioning of federal reimbursement policy in the price variation of lab services across different care settings.



[Read the entire executive summary](#) →

Highlights of the 2026 Lab Trend Report



Cost differences

Independent labs cost less for routine tests. For common routine tests, outpatient services sites (generally hospital outpatient labs) were considerably more expensive than independent labs. For example, hospital outpatient lab services charges for the Basic & Comprehensive Metabolic Panel test were 6.8x higher than independent lab costs. The higher cost for routine tests in the outpatient hospital setting versus the independent lab setting is not clearly tied to demonstrated incremental quality for these routine tests.



Population changes

Increased age of the population as well as rising incidence of cancer and chronic disease with advancing age are consistent drivers of testing utilization and spend.



Genetic vs. routine testing

In a subgroup analysis of members who underwent either routine and genetic testing, genetic testing accounted for ~15% of utilization, but average per member spending on genetic testing (\$1,504) was more than 3x that of routine testing (\$490).

Highlights of the 2026 Lab Trend Report , *continued*



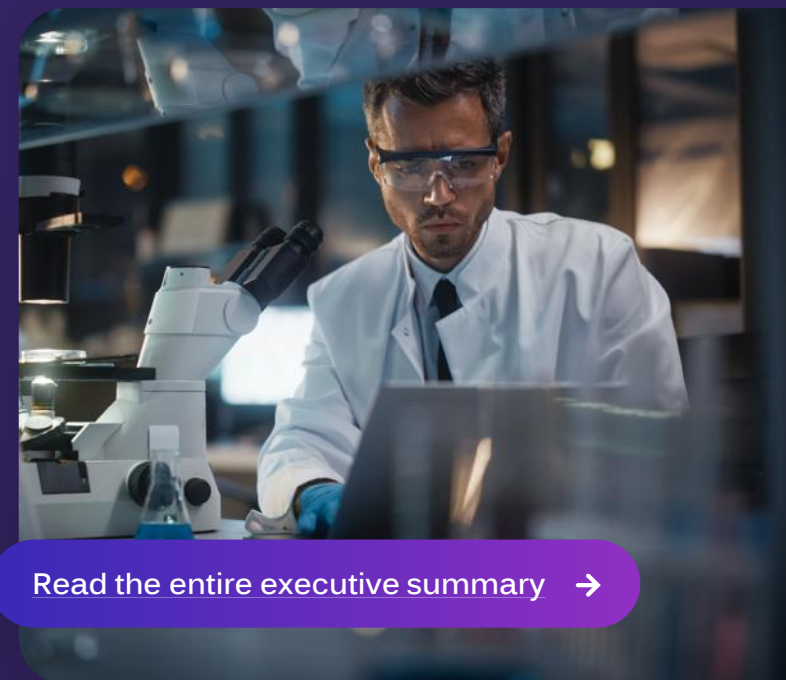
Overutilization

Overutilization due to lack of adherence to guidelines and proliferation of new tests as well as patient and healthcare provider demand for the latest and greatest innovation presents challenges in optimizing test use. In addition, underutilization due to complicated clinical care pathways and lack of access to latest information represent challenges in optimizing test use.



Complexities in test selection

As innovation accelerates, so do complexities in test selection and spending. Avalon offers trusted, evidence-based strategies to optimize lab test utilization, reduce unnecessary spending, and improve care delivery. By digitizing laboratory results and integrating them into advanced analytics, Avalon can support earlier disease detection, drive appropriate treatment protocols, and reduce the per-member cost of healthcare.



[Read the entire executive summary](#) →



Lab Testing Landscape



By the Numbers:

Laboratory Testing as Healthcare's Most Utilized Benefit



14B

Number of **routine tests per year**, making lab testing the most utilized medical benefit



329k

Number of **CLIA labs** (many performing genetic tests)



70%

Of all medical decisions influenced by **lab results**



50%

Of office visits end include a **lab test order**



10

New genetic tests marketed each day in the U.S.

So how can these themes be addressed?

- Recognizing overutilization and underutilization of lab testing
- Addressing quality and cost considerations
- Using test utilization data to improve decision making, reduce variation, and support better patient outcomes

[Read the entire executive summary](#) →

Lab Testing Is a Key Component of the Healthcare System

Lab testing is the most widely used medical benefit. A simple blood draw has not changed over time — what has changed is the diagnostic information (and potential information overload) that is available to the patient and healthcare provider.

Routine Tests

90% of lab tests are routine. Routine testing, including metabolic panels, lipid panels, and complete blood count testing, remains a core part of clinical care because these tests help identify, monitor, and manage common conditions across large populations.

[The background of routine lab testing →](#)

Genetic Tests

10 new genetic tests in areas such as fetal/child health, oncology, and rare diseases are introduced every day. These tests are especially useful for diagnosis as well as disease and treatment monitoring, and may replace radiology and tissue testing for such evaluation.

[The background of genetic lab testing →](#)

How Can Avalon Help?

Overutilization and Underutilization

Right patient and right test at the right time

Quality and Cost Consideration

Right test at the right cost for the right indication

Partner in Decision-making

Right interpretation and action through data management



Lab Test Prices – Focus on Common Routine Test

Example, Price of Complete Blood Count (CPT 85025)

\$8.99

Independent Lab
Testing

\$48.11

5.3x Higher at Hospital
Outpatient Lab
Services

Location, Location, Location

Higher pricing also noted for Comprehensive Metabolic Panel (6.8x) and Glycosylated Hemoglobin (2.3x) testing in the hospital outpatient services setting versus independent lab setting.

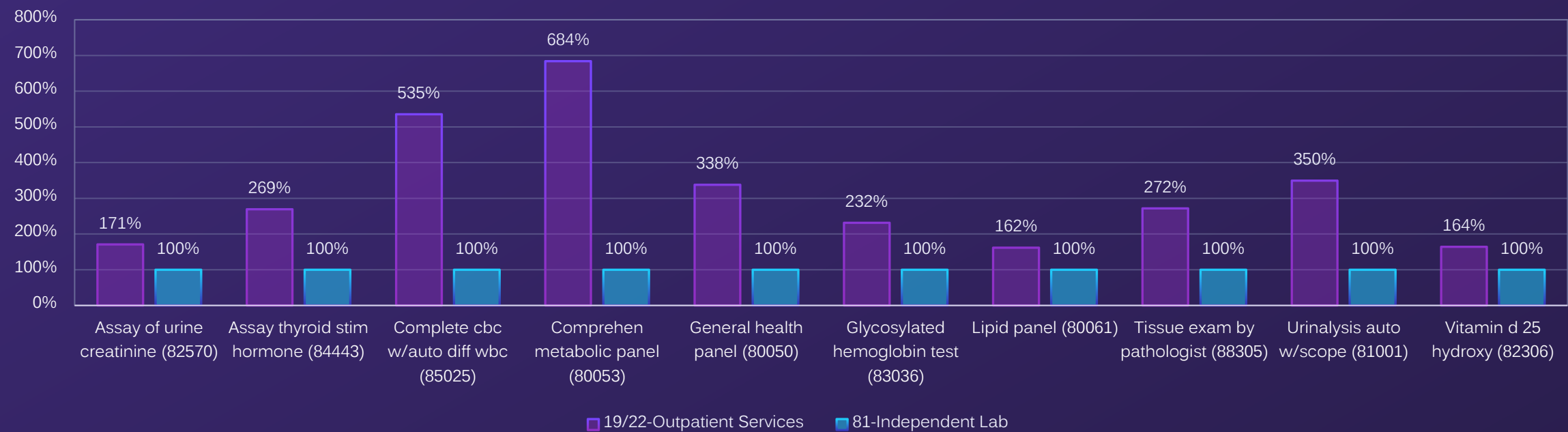
[Why place of service matters →](#)



Lab Test Prices Vary Widely According to Site of Service

The higher cost for routine tests in the outpatient hospital setting versus the independent lab setting is not clearly tied to demonstrated incremental quality for these routine tests.

Average Allowed Payment Relative to Independent Labs for 2025's Top 10 Procedure Codes



[Why place of service matters →](#)

[Public policy's role in the price differential of lab testing →](#)



Snapshot of 2025 Lab Testing Data & Trends



Most Common Routine Lab Tests in 2025

Routine testing is dominated by tests for chronic disease diagnosis and management.

Top 5 Tests by Spend

01	CPT Code: 88305 Level IV –Surgical Pathology, Gross and Microscopic Examination	\$29.32 PMPY
02	CPT Code: 80053 Basic & Comprehensive Metabolic Panel	\$21.11 PMPY
03	CPT Code: 85025 Complete Automated Blood Count	\$11.64 PMPY
04	CPT Code: 80050 Complete Health Panel	\$10.61 PMPY
05	CPT Code: 80061 Lipid Panel	\$10.48 PMPY
Most common routine lab tests in 2025 by spend →		

Top 5 Tests by Utilization

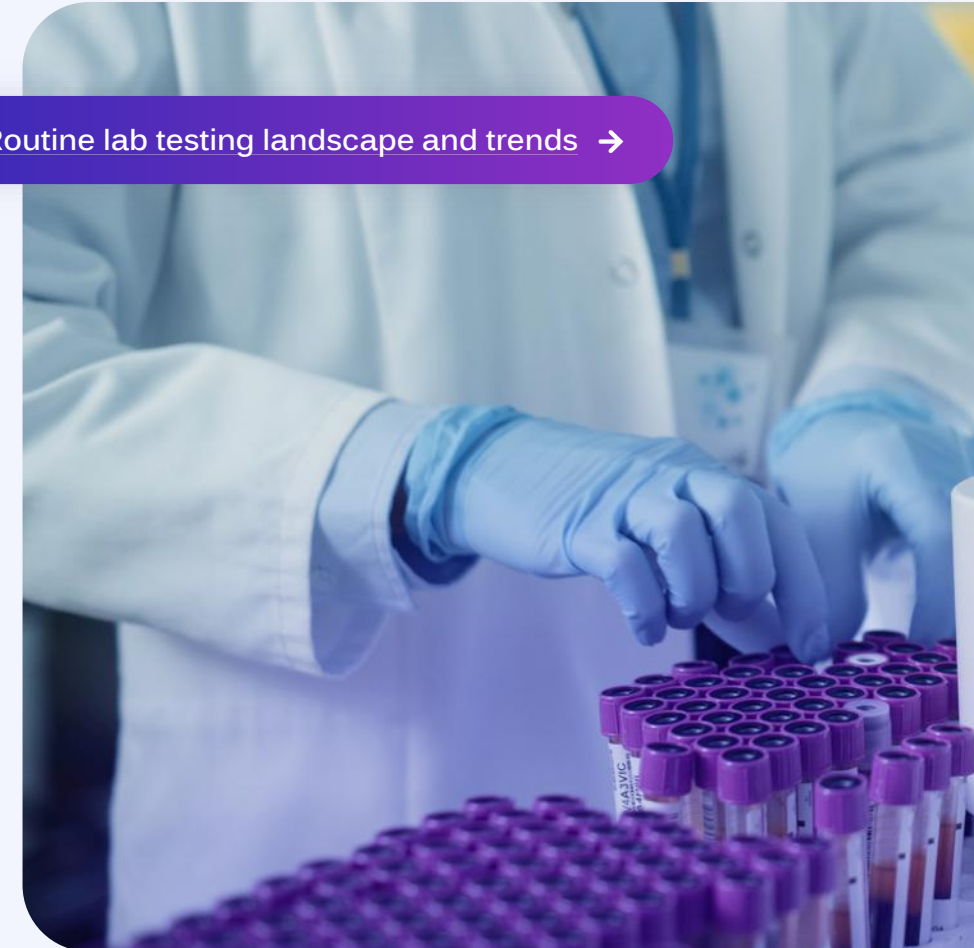
01	CPT Code: 80053 Basic & Comprehensive Metabolic Panel	5001 Units/ 10K Members
02	CPT Code: 85025 Complete Automated Blood Count	4530 Units/ 10K Members
03	CPT Code: 80061 Lipid Panel	4440 Units/ 10K Members
04	CPT Code: 83036 Hemoglobin; Glycosylated (A1c)	3744 Units/ 10K Members
05	CPT Code: 88305 Level IV - Surgical Pathology, Gross and Microscopic Examination	2611 Units/ 10K Members
Most common routine lab tests in 2025 by utilization →		

Routine Testing in 2025

Spend Increased over Utilization, Role in Chronic Disease

- Analysis of approximately 37M members, 325M tests, and \$11B in spend
- Average spend: \$314 per member in 2025
 - Overall spend PMPY increased 3.7% from \$302 in 2024
- Average utilization: 8.8 tests per member in 2025
 - Overall utilization PMPY increased 0.5% from 8.7 tests in 2024
- Increase in utilization +0.5% versus spend +3.7%
 - Since % increase in spend > % increase utilization, factors such as place of service, test price inflation, and panel expansion may be larger drivers of the trend in spend rather than increased number of tests ordered
- Avalon can help optimize care and address utilization and spend on routine tests
 - Approximately 65 evidence-based routine test outpatient laboratory policies are in place with clients
 - In addition, Avalon's automated policy enforcement technology effectively controls spending and reduces overutilization, resulting in up to 20% health plan savings and 25% member out-of-pocket savings.

Routine lab testing landscape and trends →



Routine Testing in 2025

Predictions for Future Growth 2025-2033

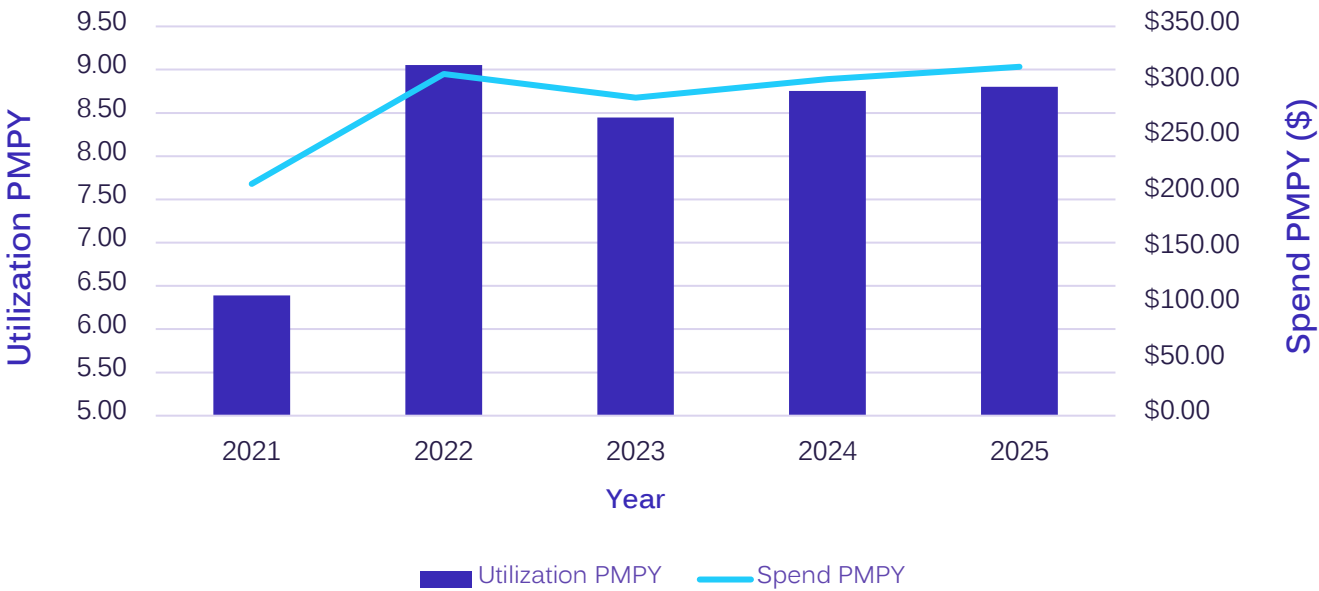
5-7%

The literature on routine testing trends suggest that spend is expected to show to increase 5-7% per year in the next 5-8 years.

Findings demonstrate Avalon's effective program management and controlled spend.

Reference: Avalon Data on File

Utilization and Spend Trend by Year



[Routine lab testing landscape and trends](#) →

[How Avalon helps manage routine testing spend and utilization](#) →

Spend and Utilization for Members Who Had at Least One Routine Test in 2025

Spend

Average spend was \$490 PMPY among members with one or more routine tests. This figure is meaningfully higher than the general population average of \$314 PMPY, as expected given this subgroup’s greater engagement with testing. The increase from the 2024 subgroup average of \$267 reflects both higher test volume (12 tests per member in 2025 vs. 8 in 2024) and the price mix trends noted above.

Spend is skewed by high-cost outliers. The standard deviation of \$2,439 reflects a wide spread in test utilization and cost. The median spend of \$145 confirms that the majority of members cluster at lower spend levels, with a small number of high-utilizers pulling the mean upward. The highest individual spend in 2025 was \$1.4 million.

Utilization

Average utilization was 12 tests PMPY. Members who had at least one routine test – compared to 8.80 tests PMPY in the general Avalon population, as expected for this higher-engagement subgroup. The average number of visits to a health care provider was 3, resulting in an average of 4 tests per visit.

Utilization is also skewed by outliers. The mean of 12 tests per member exceeds the median of 8, suggesting that a subset of high-utilizers is pulling the average upward. The member with the highest utilization had 2,025 tests.



Category	Utilization PMPY	Spend PMPY
Mean	12	\$490
Median	8	\$145
Standard Deviation	16.60	\$2,439
Quartile 1	4	\$60
Quartile 3	16	\$376
Intra-quartile Range	12	\$316

[More about routine lab testing landscape and trends](#) →

Reference: Avalon Data on File

Routine Testing in 2025

Drivers and Challenges

Factors driving utilization and spend in routine testing include

- **Aging membership** and **greater use of testing** for chronic disease diagnosis and monitoring
- Rising prevalence of **chronic conditions** that require longitudinal lab surveillance
- **Patient and clinician demand** for newer, faster, or more convenient testing options
- **Expanded testing capacity**, including PCR platforms, which may contribute to supply-sensitive utilization
- **Shifts in market structure**, including hospital-reference lab integration and changes in place of service patterns

Challenges in monitoring and optimizing routine testing continue and include

- **Overutilization** versus underutilization
- Need for **disease-specific clinical care pathway** and general rules (e.g., Choosing Wisely)
- **Lack of awareness** of appropriate test ordering practices
- View that **more = better care**
- Lack of **data access** and **feedback**

More about routine testing in 2025: drivers and challenges →

Genetic Testing Is Increasingly Being Used in Clinical Care

Genetic testing for fetal and child health (NIPT) dominates the utilization list, yet genetic testing for oncological and hematological diseases (diagnosis, prognosis, and treatment) leads the spend list.

Top 5 Tests by Spend

01	CPT Code: 81420 Fetal Chromosomal Aneuploidy	\$3.48 PMPY
02	PLA Code: 0340U Onc Pan Ca Alys MRD Plasma	\$2.71 PMPY
03	PLA Code: 0211U Onc Pan-Tum DNA&RNA Next Gen Seq	\$1.96 PMPY
04	CPT Code: 81479 Unlisted Molecular Pathology	\$1.56 PMPY
05	CPT Code: 81408 Mopath Procedure Level 9	\$1.44 PMPY

Most common genetic lab tests in 2025 by spend →

Top 5 Tests by Utilization

01	CPT Code: 87150 DNA/RNA Amplified Probe	56.5 Units/ 10K Members
02	CPT Code: 81420 Fetal Chromosomal Aneuploidy	56.2 Units/ 10K Members
03	CPT Code: 88271 Cytogenetics DNA Probe	21.4 Units/ 10K Members
04	CPT Code: 81220 CFTR Gene Com Variants	20.9 Units/ 10K Members
05	CPT Code: 81329 SMN1 Gene Dos/Deletion Alys	19.3 Units/ 10K Members

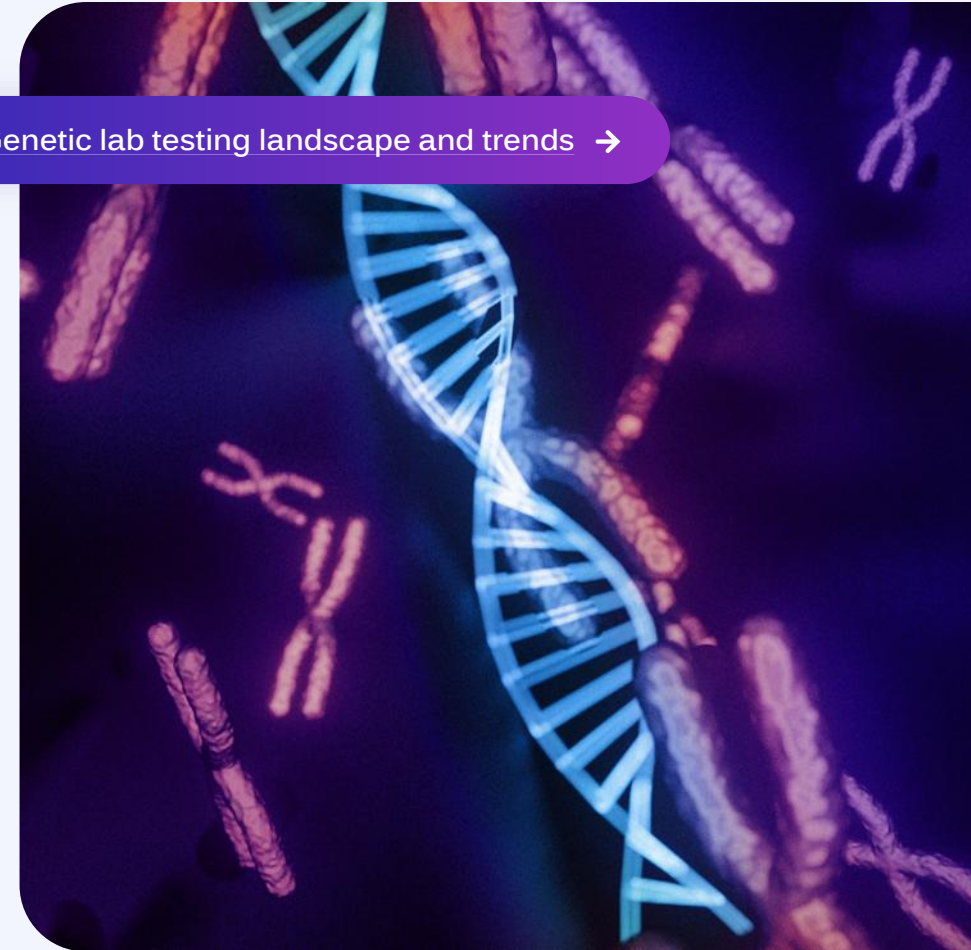
Most common genetic lab tests in 2025 by utilization →

Genetic Testing in 2025

Utilization and Spend with Major Increases from 2024 to 2025

- Analysis of approximately 37M members (not all enrolled in Avalon's Genetic Test Management programs), 2M tests, and \$1.3B in spend
- Average spend: \$36 per member in 2025
 - Overall spend PMPY increased 35% from \$26 in 2024
- Average utilization: 5.8 tests per 100 members in 2025
 - Overall utilization PMPY increased 22% from 4.7 tests in 2024
- Increase in utilization +22% versus spend +35%
 - Since % increase in spend > % increase in utilization, factors such as premium-priced new tests and test panel expansion may be larger drivers of the trend in spend rather than increased number of tests ordered
- Avalon can help optimize care and address utilization and spend on genetic testing
 - PGTM with 65 genetic test outpatient laboratory policies, Gold Card program, AvalonSelect genetic managed network, and more

Genetic lab testing landscape and trends →



Genetic Testing in 2025

Predictions for Future Growth 2025-2033

14-21%

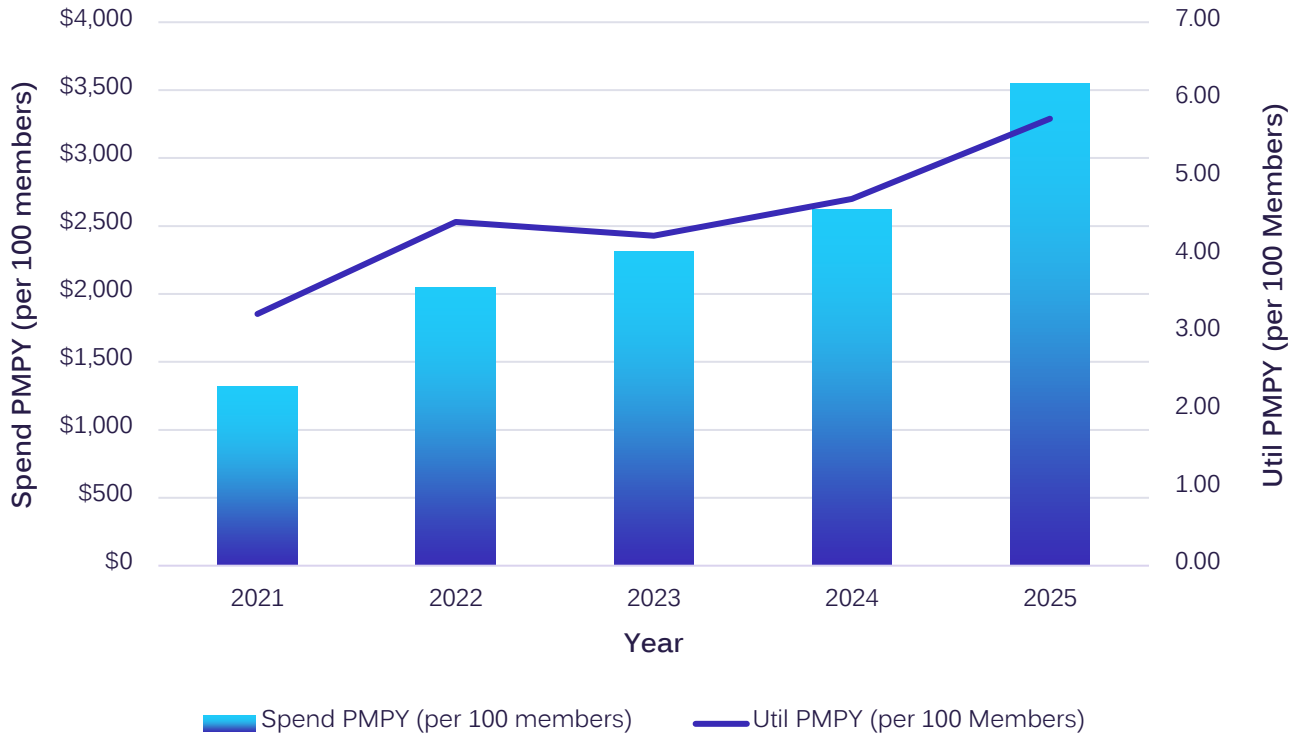
The literature on genetic testing trends suggests that spend is expected to increase 14-16% per year and perhaps as high as 21% for the next 5-8 years.^{1,2}

Increase in utilization likely related to a growing share of members receiving genetic testing, greater awareness and acceptance of genetic tests among patients and clinicians, and the expanded use of testing in oncology.

Increase in spend likely related to increased utilization of genetic tests for new indication as well as introduction of premium priced versus 1st generation tests and test panel expansion.

Reference: Avalon Data on File

Trends in Genetic Testing 2021 - 2025
Reflect Multiple Drivers of Growth



[Genetic lab testing landscape and trends](#) →

[How Avalon helps manage genetic testing spend and utilization](#) →

Spend and Utilization for Members Who Had at Least One Genetic Test in 2025

Spend

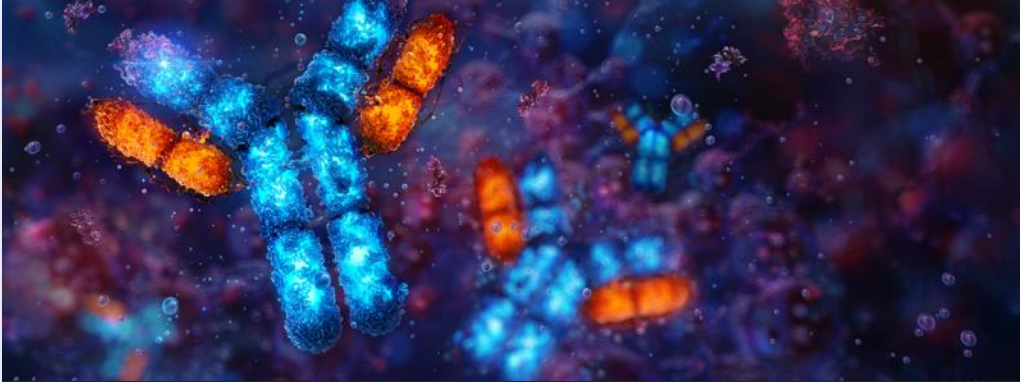
Overall, genetic spending increased by 17%. Among members who had one or more genetic tests in 2025, the average spend increased 17% to \$1,504 in 2025 from \$1,138 in 2024, consistent with the increased use of genetic testing observed.

High spending for outliers skewed the results. The median value of spend was \$592 in 2025, which is lower than the mean spend of \$1,504, suggesting that the population is skewed by outliers. The highest outlier, representing the highest spend for any member in the 2025 analysis, was \$324,234. Significant variability in spending patterns was identified. The large standard deviation and interquartile range underscore the high variability of spending patterns.

Utilization

Most members had 2 genetic tests in 2025, up from 1 in 2024. Among members who had one or more genetic tests in 2025, the mean number of genetic tests used was 2 in 2025 versus 1 in 2024. This number contrasts with the data on routine test users who obtained 4-5 routine tests per office visit.

High utilization by outliers skewed the results. The mean number of tests per member (2) was higher than the median number of tests per member (1), suggesting there were high users of genetic testing in the subgroup population. In terms of outliers, the standard deviation of the test utilization was high, suggesting high variation on use among members. The highest outlier, representing the highest utilization for any member in the 2025 analysis, was 192 tests.



Category	Utilization	Spend
Mean	2	\$1,504
Median	1	\$592
Standard Deviation	3	\$2,929
Quartile 1	1	\$112
Quartile 3	2	\$1,456
Intra-quartile Range	1	\$1,344

[More about genetic lab testing landscape and trends](#) →

Reference: Avalon Data on File

Genetic Testing in 2025

Drivers and Challenges

Factors driving utilization and spend in genetic testing include

- **Aging membership** and greater need for disease risk assessment, diagnosis, and monitoring
- Advances in understanding the **molecular basis of disease**
- **Increased recognition** of inherited conditions, cancer risk subgroups, rare diseases, and chronic disease subtypes
- **Clinical demand** for more precise tools to predict risk, confirm diagnosis, guide therapy, and monitor disease progression
- Greater clinician, patient, and advocacy-group awareness of **personalized medicine**
- Rapid expansion of the genetic testing market, with **~10 new tests entering the market per day**

Challenges in monitoring and optimizing genetic testing continue and include

- **Coding**
 - ~40,000 tests coded under CPT 81479
- **Quality control**
 - 453 labs running genetic tests
 - 175,000 genetic tests on the clinical market
 - Dearth of trained lab professionals
- **Low barrier to entry** with CLIA lab
- View that **more = better care**
- Lack of clinical care pathway **guidelines**
- Lack of **data access** and **feedback**

[More about genetic testing in 2025: drivers and challenges →](#)



Case Studies

Averted Costs, Lab Value
Management in Oncology, and
Routine Radiology Management



Case Study

Thoughtful Management Strategies Can Avert Costs

This case study examined averted costs for more than 6.5 million members (routine testing analysis) and more than 9.2 million members (genetic testing analysis) attributed to Avalon's automated policy enforcement and utilization management strategies for both Routine and Genetic Testing Management programs.

9%

averted cost savings for Routine Test Management (RTM)

39%

~39% averted cost savings for Genetic Test Management (GTM)

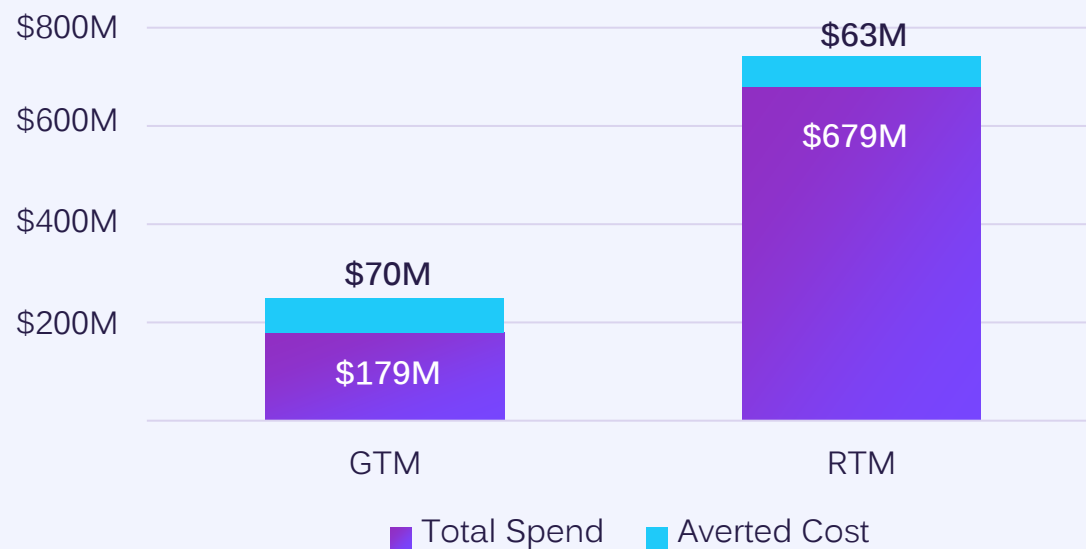
16%

overall averted costs (\$133M averted costs/ \$858M spend) for total lab spend

10-15%

additional lab behavior change driven by Avalon's GTM and RTM solutions

RTM and GTM Savings



Comparison of Averted Costs for Routine Test Management (RTM) and Genetic Test Management (GTM) Selected Member Population

[More about averted costs](#) →

Case Study

Impacting Non-Small Cell Lung Cancer Care is Possible Through Lab Values Management (LVM)

Increased Quality of Care

- Testing optimization to ensure the right tests are performed at the right time
- Utilization of guideline-concordant management, including liquid biopsy testing to enable real-time, data-driven treatment decisions

Faster Speed of Care

- Reduction in the time to test and time to guideline-concordant treatment from 30-40 days to 7 days
- Faster utilization management through movement from manual to automated prior authorization requirements in two key areas

[More about lab values management in oncology care →](#)



Case Study

Real-World Financial Impact Associated with LVM Pilot Study

Validated through retrospective analysis:

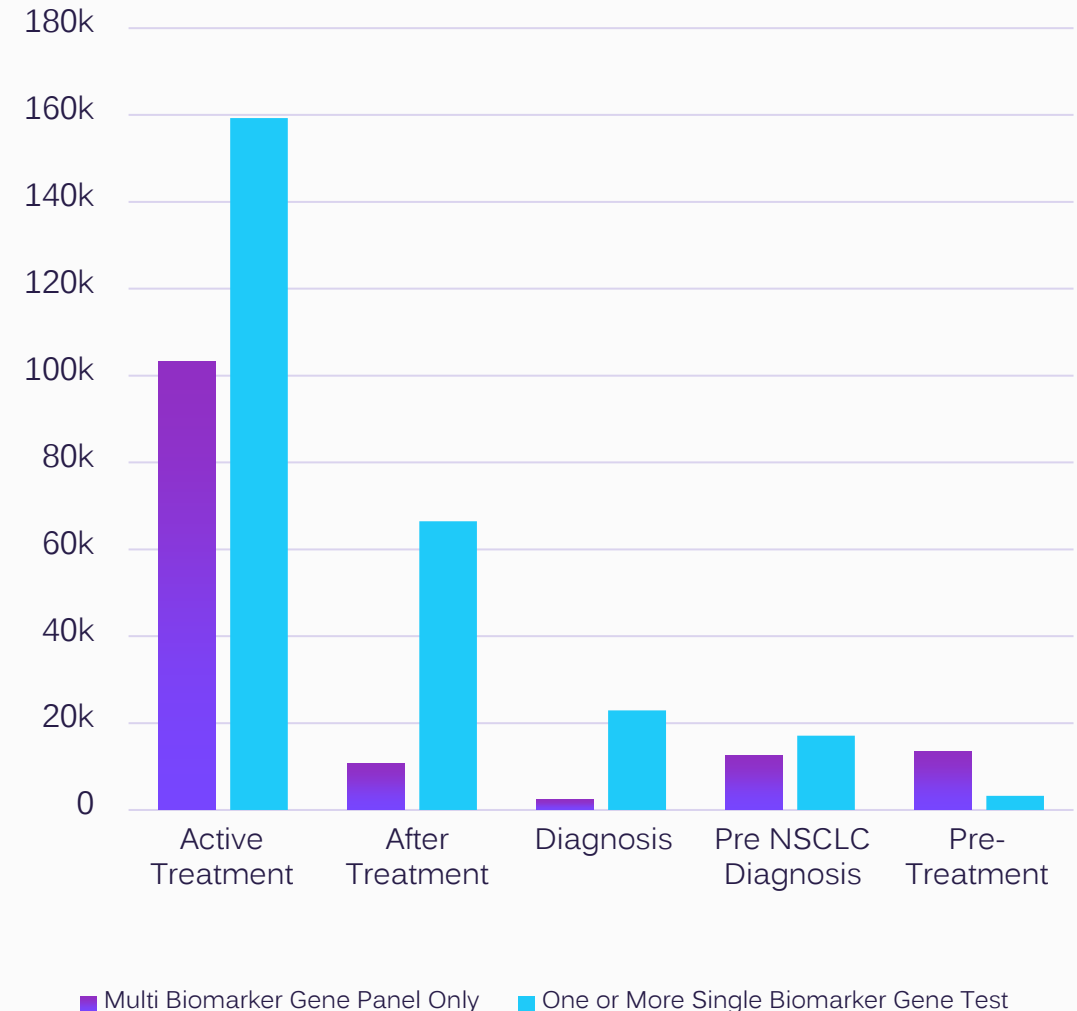
- Stage II patients receiving multi-biomarker testing saved \$125K per patient vs. single biomarker testing

Why this matters:

- Earlier, more precise therapy selection
- Reduced ineffective treatment and downstream costs
- Impact spans the full treatment journey (not just the drugs)

[More about lab values management in oncology care →](#)

Comparison Average Cost per Stage 2 NSCLC Patient



Case Study

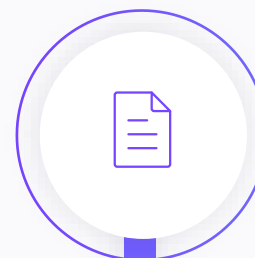
Routine Radiology Management (RRM) Solution Overview

Why isn't PA practical?

- Routine radiology procedures are generally low cost (less than \$500), and most are appropriate, so the cost of PA outweighs the benefit
- PA delays care for members and burdens provider organizations
- PA shifts the cost of care to members, who may choose to self-pay if denied

[More about routine radiology management →](#)

Policies



Avalon's three RRM policies outline clear criteria for appropriate routine radiology use in outpatient settings, based on recognized sources and clinical expertise:

- Chest X-ray
- Breast sonography
- Bone age study

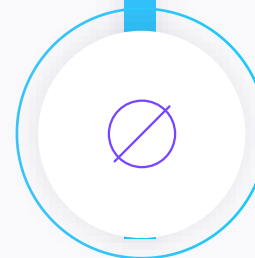
Rules/edits



Avalon establishes fixed criteria from the policies for consistent application across the member population, enabling full automation. Rule/edit types include:

- Procedure-to-procedure compatibility
- Procedure-to-diagnosis compatibility
- Frequency limits
- Age requirements

Reduce waste, change behavior



The data from a retrospective analysis using three sample rules applied to a regional health plan with over one million members demonstrated the potential for Avalon's RRM solution to:

- promote high-quality, cost-effective care
- reduce unnecessary radiation exposure and downstream care
- drive positive behavior change
- support value-based care



Emerging Themes



ABC's of Biomarkers

Biomarker Role	Biomarker Indications for Use
Risk/probability	Identification of people at risk for a disease
Diagnosis	Confirmation of the presence or absence of a disease
Prognosis	Evaluation of risk of disease progression
Prediction	Prediction of a positive effect or adverse event from pharmacotherapy
Monitoring	Evaluation of changes in disease progression and/or therapeutic effect
Safety	Identification of adverse events

[Read more about biomarker testing beyond cancer →](#)



Biomarker Tests to Watch

Simple Blood Draw, Complex Results

MCED Tests

- Multi-cancer early detection
- Evaluation of signals released by cancer cells into the blood
- 70% of all cancer deaths from cancers without proven screening tests
- Supplement to current screening tests
- Tests on market, several in large scale trials
- Assessing the evidence to support broad testing remains a question

[More about MCED tests →](#)

MRD Tests

- Minimal residual disease
- Measurement of circulating tumor DNA for cancer monitoring
- Facilitate prognosis and recurrence risk assessment after definitive therapy
- Clinical validity and clinical utility data available
- Determining who should get MRD testing and at what frequency remains a challenge

[More about MRD tests →](#)

AD Tests

- Alzheimer's disease
- Measurement of blood amyloid levels in symptomatic patients
- Several workgroup recommendations exist
- High-performance test similar to PET/CSF biomarkers
- Clinical utility data available
- Deciding on who and when and for what indications to be tested is less well understood

[More about AD tests →](#)

Other Biomarkers Beyond Cancer

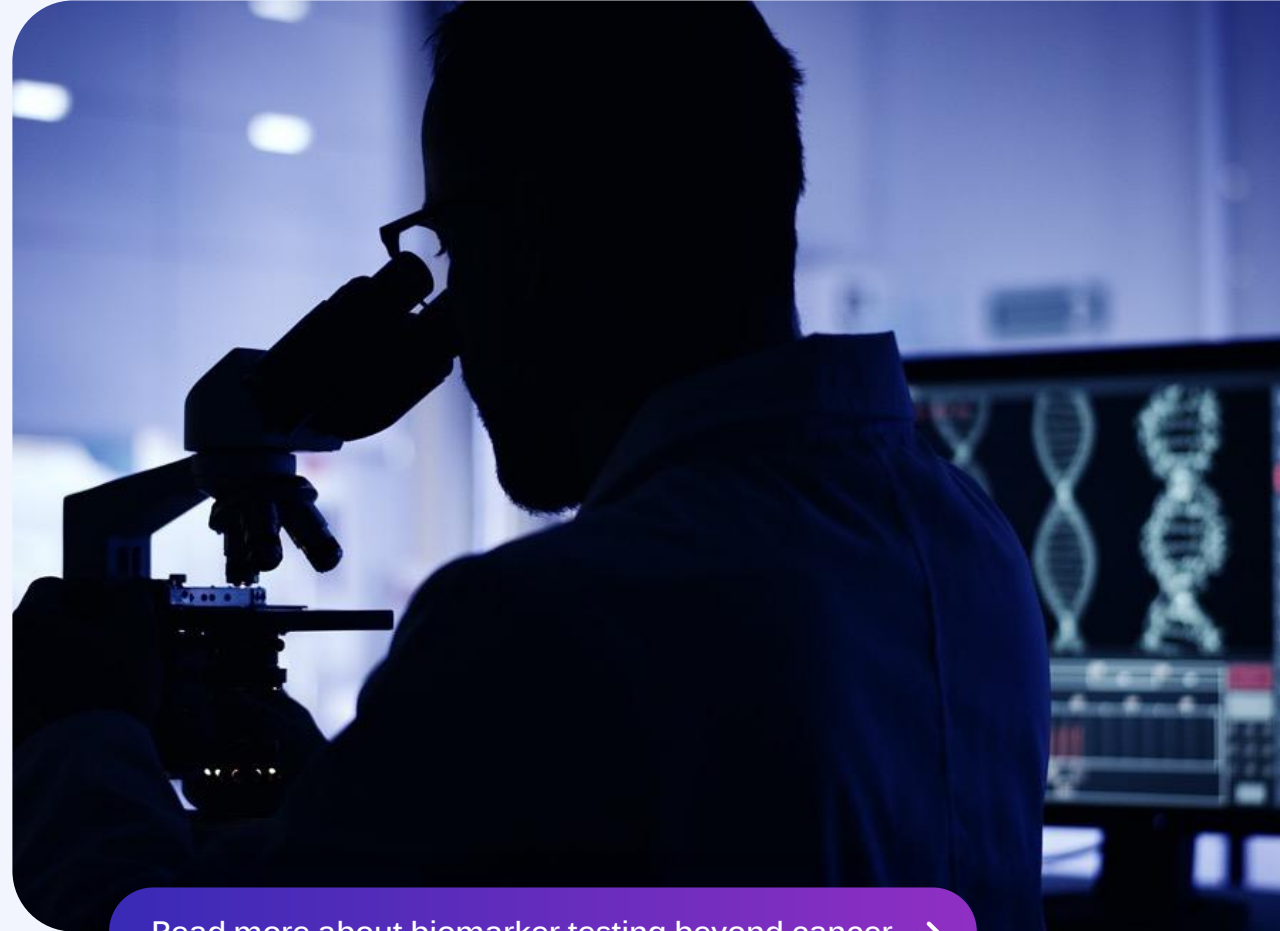
Targeted Disease Areas	Clinical Conditions	Test Use
Infectious disease	Sepsis	Diagnosis
Rare disease	~10,000 rare diseases	Diagnosis
Reproductive health	Pre-eclampsia (SFlt1, PIGF)	Prognosis
Cardiac disease	Coronary artery disease, heart failure (leptin)	Prognosis
Organ transplantation	Organ rejection (cfDNA)	Disease monitoring
Inflammatory disease	Rheumatoid arthritis (anti-CCP, polyglutamate)	Prediction, therapeutic monitoring
Central nervous system	Depression	Pharmacogenomics
AI-assisted	Multiple	Diagnosis, prediction, discovery

[Read more about biomarker testing beyond cancer](#) →

New Blood Biomarker Tests

How Can Avalon Help Health Plans Prepare?

- Provide ongoing surveillance of advances – 10 new genetic tests/day
- Assist in evaluation of the literature for:
 - Clinical validity - test performance (sensitivity and specificity versus reference standard)
 - Clinical utility – effect on clinical decision making and outcomes (pre/post test result)
 - Cost utility – cost of care in clinical pathway (budget impact model, cost-effectiveness)
- Precision Genetic Test Management
 - Policy development
 - Test identification and quality assessment
 - Utilization management
 - Payment accuracy



[Read more about biomarker testing beyond cancer →](#)

Policy Themes for 2026



AI Regulation & Healthcare Implications

The federal government is committed to a light-touch, innovation-forward AI regulatory posture. At the same time, states are filling the governance vacuum with more prescriptive requirements. Health plans are left operating at the center of an unresolved national debate over how to govern AI in healthcare.

[Read more about AI regulation](#) →



Direct-to-Consumer Lab Testing & Wearable Health Data

Wearables and direct-to-consumer (DTC) lab testing are quietly reshaping who controls health data. Driven by consumer frustration with traditional care, advances in AI, and a federal push to expand wearable adoption, this market is scaling faster than the infrastructure needed to manage it.

[Read more about direct-to-consumer lab testing](#) →

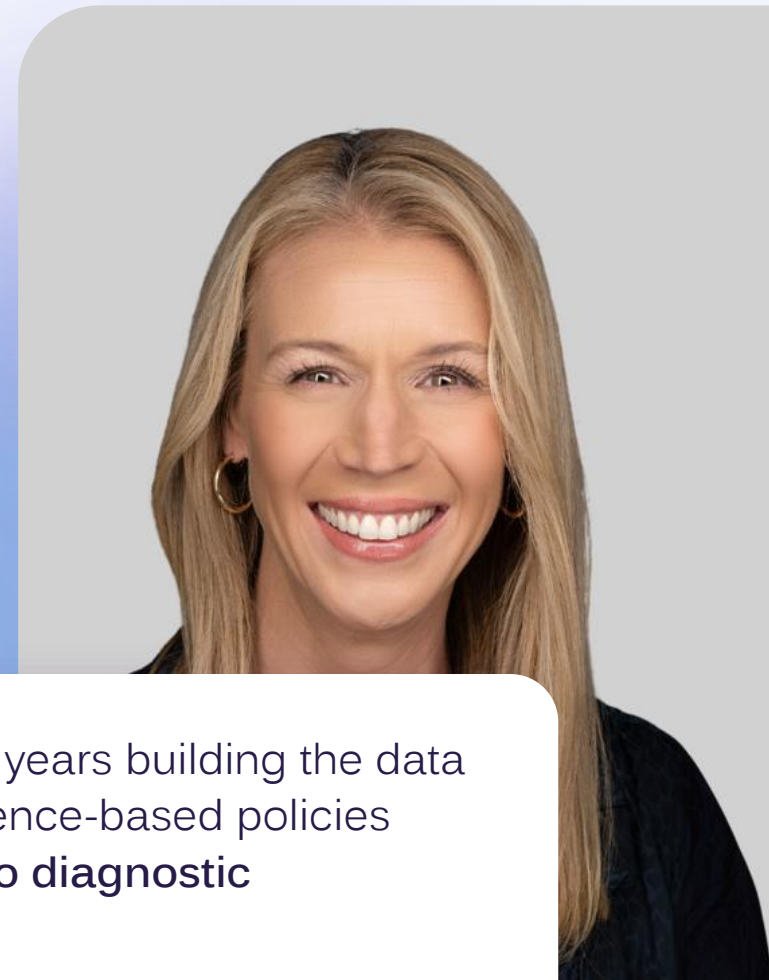
2026 Lab Trend Report Takeaways

Lab testing is, in many ways, the unsung workhorse of American health care. Diagnostics are the starting point for high-cost clinical decisions. And yet, lab tests remain one of the least scrutinized components of health care spending — a blind spot that has real consequences.

The 2026 Lab Trend Report — our sixth annual edition — tells a clear story: spending is rising faster than utilization, genetic testing is expanding at a pace that demands active management, and emerging technologies like AI are introducing opportunities alongside challenges.

Avalon is uniquely positioned to help navigate today's diagnostic challenges and prepare for the future.

Key takeaways from the desk of Julie Devine →



“At Avalon, we’ve spent years building the data infrastructure and evidence-based policies needed to **bring rigor to diagnostic management.**”

— Julie Devine

Chief Commercial Officer, Avalon



This information is based on Avalon's 2026 Lab Trend Report. For full data analysis or to contact us, please use the information below:



avalonhcs.com/2026-lab-trend-report



avalon-insights@avalonhcs.com



[@avalon-healthcare-solutions](https://www.linkedin.com/company/avalon-healthcare-solutions)

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