

Highmark Reimbursement Policy Bulletin



Bulletin Number: RP-047
Subject: Venipuncture and Lab Services
Effective Date: May 6, 2019 **End Date:**
Issue Date: April 3, 2023 **Revised Date:** April 2023
Date Reviewed: March 2023
Source: Reimbursement Policy

Applicable Commercial Market	PA	<input checked="" type="checkbox"/>	WV	<input checked="" type="checkbox"/>	DE	<input checked="" type="checkbox"/>	NY	<input checked="" type="checkbox"/>
Applicable Medicare Advantage Market	PA	<input type="checkbox"/>	WV	<input type="checkbox"/>	DE	<input type="checkbox"/>	NY	<input type="checkbox"/>
Applicable Claim Type	UB	<input checked="" type="checkbox"/>	1500	<input checked="" type="checkbox"/>				

➔ A checked box indicates the policy is applicable to that market either entirely, or partially, as indicated within the policy.

Reimbursement Policy designation of Professional or Facility application is based on how the provider is contracted with the Plan. This Policy supersedes direction provided in Bulletins prior to the effective date of this Policy.

PURPOSE:

This policy addresses coverage guidelines for venipuncture services when billed in conjunction with laboratory services for Professional and Outpatient Facility Claims. These reimbursement guidelines do not apply to inpatient venipuncture.

REIMBURSEMENT GUIDELINES:

Venipuncture and other central venous access for the collection of specimens are considered incidental to the blood or serum laboratory service. Separate reimbursement is not permitted.

Highmark will reimburse providers for venipuncture when the specimen is sent to a lab outside the provider's office/facility, and the clinical lab test is billed by the external lab. However, if the clinical lab test is performed in the practitioner's office and the practitioner bills for the laboratory test, an additional charge for venipuncture will not be separately reimbursed, as the venipuncture charge is considered incidental to the blood or serum lab service.

Highmark will not reimburse venipuncture (blood draws) when billed with another blood or serum lab service on the same date of service, by the same provider, for the same patient. The venipuncture is considered incidental to the lab test and is not eligible for separate reimbursement.

If some of the blood and/or serum lab procedures are performed by the provider, and other procedures are sent to an external lab, the venipuncture is not eligible for separate reimbursement.

The use of modifiers XS, XP, XE, XU, 59, 90 or 91 when lab tests are billed on the same date of service is not a valid use of the modifier. The venipuncture is not a separate procedure and is considered incidental to the blood or serum laboratory procedure.

Examples of Venipuncture Billing:

- Practitioner performs venipuncture and sends the specimen to an outside laboratory for testing. No testing of that sample is performed in the practitioner's office. Venipuncture will be reimbursed to the practitioner.
- Practitioner performs venipuncture in the office and the specimen is tested in the practitioner's office. Venipuncture will not be reimbursed to the practitioner.
- Outpatient facility performs venipuncture and sends the specimen to an outside laboratory for testing. No testing of that sample is performed in the facility. Venipuncture will be reimbursed to the practitioner.
- Outpatient facility or independent laboratory performs venipuncture and the specimen is tested within the same facility or independent laboratory. Venipuncture will not be reimbursed to the outpatient facility or independent laboratory.

Applicable Venipuncture Codes:

36400 36405 36406 36420 36425 36410 36415 36416 S9529

RELATED HIGHMARK POLICIES:

Refer to the following Reimbursement Policies for additional information:

- RP-041: Services Not Separately Reimbursed

Refer to the following Commercial Medical Policies for additional information:

- L-2: Collection of Specimens

POLICY UPDATE HISTORY INFORMATION:

05 / 2019	Implementation
10 / 2020	Removed codes 36591 and 36952
11 / 2021	Added NY region applicable to the policy
4 / 2023	Policy reviewed no changes were made