Physician Office Lab Testing

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Approved By:	Highmark Wholecare – Market Leadership
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Products:	Medicaid
Application:	All participating hospitals and providers
Page Number(s):	1 of 7

Disclaimer

Highmark Wholecare medical policy is intended to serve only as a general reference resource regarding coverage for the services described. This policy does not constitute medical advice and is not intended to govern or otherwise influence medical decisions.

POLICY STATEMENT

This policy provides information regarding the coverage of, as determined by applicable federal and/or state legislation.

This policy is designed to address medical necessity guidelines that are appropriate for the majority of individuals with a particular disease, illness or condition. Each person's unique clinical circumstances warrant individual consideration, based upon review of applicable medical records.

The qualifications of the policy will meet the standards of the National Committee for Quality Assurance (NCQA) and the Pennsylvania Department of Health (DHS) and all applicable state and federal regulations.

DEFINITIONS

Highmark Wholecare – Managed care organization serving vulnerable populations that have complex needs and qualify for Medicaid. Highmark Wholecare members include individuals and families with low income, expecting mothers, children, and people with disabilities. Members pay nothing to very little for their health coverage. Highmark Wholecare currently services Pennsylvania Medicaid: PA HealthChoices.

PROCEDURES

Prior Authorization may be required. Please validate codes on the Prior Authorization Lookup Tool https://providers.highmark.com/wholecare/provider-resources/prior-authorization-code-lookup

CODING REQUIREMENTS

CPT code	Description
80305	Drug test(s), presumptive, any number of drug classes, any number of devices or procedures; Capable of being read by direct optical observation only (eg utilizing immunoassay (eg, dipsticks, cups, cards, or cartridges), includes sample validation when performed, per date of service
80306	Drug test(s), presumptive, any number of drug classes, any number of devices or procedures; read by instrument assisted direct optical observation (eg, utilizing immunoassay [dipsticks, cups, cards, or cartridges), includes sample validation when performed, per date of service
80307	Drug test(s), presumptive, any number of drug classes, any number of devices or procedures; ; By instrument chemistry analyzers (eg Utilizing Immunoassay [eg, Eia, Elisa, Emit, Fpia, Ia, Kims, Ria]) Chromoatography (eg, Gc, Hplc), and mass spectrometry either with our without chromosaophrau (eg, Dart, Desi, Gc-ms, Gc-ms/ms, Lc-ms/ms, Ldtd, Maldi, Tof) includes sample validation when performed, per date of service
80324	Amphetamines; 1 or 2
80325	Amphetamines; 3 or 4
80326	Amphetamines; 5 or more
80327	Anabolic Steroids;1 or 2
80328	Anabolic Steroids; 3 or more
80329	Analgesics, non-opiod, 1 or 2
80330	Analgesics, non-opiod; 3-5
80331	Analgesics, non-opiod; 6 or more
80335	Antidepressants, tricyclic and other cyclicals; 1 or 2
80336	Antidepressants, tricyclic and other cyclicals; 3-5
80337	Antidepressants, tricyclic and other cyclicals; 6 or more
80342	Antipsychotics, not otherwise specified; 1-3
80343	Antipsychotics, not otherwise specified; 4-6
80344	Antipsychotics, not otherwise specified; 7 or more
80345	Barbiturates
80346	Benzodiazepines; 1-12
80347	Benzodiazepines; 13 or more

80348	Buprenophrine
80349	Cannabinoids, natural
80051	Electrolyte panel This panel must include the following: Carbon dioxide (bicarbonate) (82374) Chloride (82435) Potassium (84132) Sodium (84295)
80353	Cocaine
80354	Fentanyl
80358	Methadone
80361	Opiates, 1 or more
80362	Opiates and opiate analogs; 1 or 2
80363	Opiates and opiate analogs; 3 or 4
80364	Opiates and opiate analogs; 5 or more
80365	Oxycodone
80369	Skeletal muscle relaxants; 1 or 2
80370	Skeletal muscle relaxants; 3 or more
80375	Drug(s) or substance(s), definitive, qualitative orquanitative, not otherwise specified :1-3
81000	Urinalysis, by dip stick or tablet reagent for bilirubin, glucose, hemoglobin, ketones, leukocytes, nitrite, Ph, Protein, specific gravity, uroblinogen, any number of these constituents, non-automated, with microscopy
81001	Urinalysis, by dip stick or tablet reagent for bilirubin, glucose, hemoglobin, ketones, leukocytes, nitrite, Ph, Protein, specific gravity, uroblinogen, any number of these constituents,; automated with microscopy
81002	Urinalysis, by dip stick or tablet reagent for bilirubin, glucose, hemoglobin, ketones, leukocytes, nitrite, Ph, Protein, specific gravity, uroblinogen, any number of these constituents, non-automated, without microscopy
81003	Urinalysis, by dip stick or tablet reagent for bilirubin, glucose, hemoglobin, ketones, leukocytes, nitrite, Ph, Protein, specific gravity, uroblinogen, any number of these constituents,; automated without microscopy
81005	Urinalysis; qualitative or semiquantitative, except immunoassays
81015	Urinalysis; microscopic only
81025	Urine pregnancy test, by visual color comparison methods
82043	Alburnin; Urine (eg, Microalburnin), quanitative
82044	Alburnin; Urine (eg, Microalburnin), semiquanitative (eg, reagent strip assay)
82247	Bilirubin; total

82270	Blood, occult, by peroxidase activity (eg, guaiac) , qualitative; feces, consecutive collected specimens with single determination, for colorectal neoplasm screening (ie, patient was provided three cards or single triple card for consecutive collection)
82271	Blood, occult, by peroxidase activity (eg, guaiac), qualitative; other sources
82272	Blood, occult, by peroxidase activity (eg, guaiac), qualitative; feces, 1-3 simultaneous deteriminations, performed for other than colorectal neoplasm screening
82310	Calcium, total
82465	Cholesterol, serum; or whole blood, total
82565	Creatinine; blood
82731	Fetal fibronectin, cervicovaginal secretions, semi-quantitative
82947	Glucose, quantitative, blood(except reagent strip)
82948	Glucose; blood, reagent strip
82950	Glucose post dose (includes glucose)
82951	Glucose; tolerance test (gtt), 3 specimens (includes glucose)
82952	Glucose; tolerance test, each additional beyond 3 speciments (list separately in addition to code for primary procedure)
82962	Glucose, blood, by glucose monitoring service(s) cleared by the fda specifically for home use
83036	Hemoglobin; glycosylated (a1c)
83655	Lead
83690	Lipase
83825	Mercury, quantitative
83986	PH, Body fluid, not otherwise specified
83992	Phencyclidine(pcp)
84075	Phosphatase, alkaline;
84132	Potassium; serum, plastma or whole blood
84295	Sodium; serum, plasma or whole blood
84450	Transferase; aspartate amino (AST) (SGOT)
84703	Gonadotropin, chorionic(hcg); Qualitative
85013	Blood count; spun microhematocrit
85014	Blood count; hematocrit (hct)
85018	Blood count; hemoglobin (hgb)

85025	Blood count; complete (cbc), automated (hbg, Hct, rbc, Wbc and platelet count) and automated differential wbc count
85027	Blood count; complete (cbc), automated (hbg, Hct, rbc, Wbc and platelet count)
85049	Blood count; platelet, automated
85610	Protrombin time
85651	Sedimentation rate, erytocryte; non-automated
85730	Thromboplastin time, partial (PTT); plasma or whole blood
86147	Cardiolipin (phospholipid) antibody, each Ig class
86308	Heterophile antibodies; screening
86309	Heterophile antibodies; titer
86318	Immunoassay for infectious agent antibody, qualitative or semiquantitative , single step method (eg, Reagent Strip)
86328	Immunoassay for infectious agent antibody(ies), qualitative or semiquantitative, single-step method (e.g., reagent strip); severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease
86580	Skin test; tuberculosis, patch or intradermal
86756	Antibody; respiratory syncytial virus
86769	Antibody; severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease
87070	Culture, bacterial; any other source except urine, blood or stool, aerobic; with isolation and presumptive identification of isolates
87205	Smear, primary source with interpretation; gram or Giemsa stain for bacteria, fungi, or cell types
87210	Smear, primary source with interpretation; wet mount for infectious agents (e.g. saline, india ink, koh preps)
87220	Tissue examination by KOH slide of samples from skin, hair, or nails for fungi or ectoparasite ova or mites (e.g, scabies)
87400	Infectious agent antigen detection by immunofluorescent technique, (eg, enzyme immunoassay [eia], Enzyme-linked immunosorbent assay [elisa],immunochemiluminometric assay [imca] qualitative or semiquantitative, multiple step method; influenza A or B, each
87426	Infectious agent antigen detection by immunoassay technique, qualitative, for severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (COVID)
87428	“Infectious agent antigen detection by immunoassay technique, (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [ELISA]
87430	Infectious agent antigen detection by immunoassay technique (eg, enzyme immunoassay [eia], Enzyme-linked immunosorbent assay [elisa],immunochemiluminometric assay [imca] qualitative or semiquantitative, multiple step method; Streptococcus, group A
87490	Infectious agent detection by nucleic acid (dna or Rna); chlamydia trachomatis, direct probe technique

87491	Infectious agent detection by nucleic acid (dna or Rna); chlamydia trachomatis, amplified probe technique
87492	Infectious agent detection by nucleic acid (dna or Rna); chlamydia trachomatis, quantification
87635	procedure for detecting the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) virus
87800	Infectious agent detection by nucleic acid (dna or Rna); multiple organisms ; direct probe(s) technique
87802	Infectious agent detection by immunoassay with direct optical observation; streptococcus, group B
87803	Infectious agent antigen detection by immunoassay with direct optical (ie, visual) observation, clostridium difficile toxin A
87804	Infectious agent antigen detection by immunoassay with direct optical (ie, visual) observation; influenza
87806	Infectious agent antigen detection by immunoassay with direct optical (ie, visual) observation,; Hiv-1 antigen(s), with Hiv-1 and Hiv-2 Antibodies
87807	Infectious agent antigen detection by immunoassay with direct optical (ie, visual) observation,Respiratory syncytial virus
87808	Infectious agent antigen detection by immunoassay with direct optical (ie, visual) observation,; trichomonas vaginalis
87811	Infectious agent antigen detection by immunoassay with direct optical (ie, visual) observation; severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19])
87880	Infectious agent detection by immunoassay with direct optical observation; streptococcus, group A
87905	Infectious agent enzymatic activity other than virus (eg, Sialidase activity in vaginal fluid)
89050	Cell count, miscellaneous body fluids (eg, cerebrospinal fluid, joint fluid), except blood
89051	Cell count, miscellaneous body fluids (eg, cerebrospinal fluid, joint fluid), except blood; with differential count
G0480	Drug test(s), definitive, utilizing (1) drug identification methods able to identify individual drugs and distinguish between structural isomers (but not necessarily stereoisomers), including, but not limited to gc/ms (any type, single or tandem) and lc/ms (any type, single or tandem and excluding immunoassays (e.g., ia, eia, elisa, emit, fpia) and enzymatic methods (e.g., alcohol dehydrogenase)), (2) stable isotope or other universally recognized internal standards in all samples (e.g., to control for matrix effects, interferences and variations in signal strength), and (3) method or drug-specific calibration and matrix-matched quality control material (e.g., to control for instrument variations and mass spectral drift); qualitative or quantitative, all sources, includes specimen validity testing, per day; 1-7 drug class(es), including metabolite(s) if performed

Post-payment Audit Statement

The medical record must include documentation that reflects the medical necessity criteria and is

subject to audit by Highmark Wholecare at any time pursuant to the terms of your provider agreement.

Place of Service: Inpatient/Outpatient

REIMBURSEMENT

Participating facilities will be reimbursed per their Highmark Wholecare contract.

References

CMS