

HGBA1C FREQUENCY LIMITATIONS

Physicians Laboratory Services has received numerous denials for HgbA1C due to frequency limitations. The Medicare National Coverage Determinations (NCD) states that the following guidelines must be followed when ordering HgbA1C testing:

- It is not reasonable or necessary to perform glycosylated hemoglobin tests more often than every three months on a controlled diabetic patient to determine whether the patient's metabolic control is within the target range.
- It is not reasonable and necessary for these tests to be performed more frequently than once a month for diabetic pregnant women.
- Testing for uncontrolled type one or two diabetes mellitus may require testing more than four times a year. Medical necessity documentation must support the decision for additional testing.
(<https://www.cms.gov/CoverageGenInfo/Downloads/manual201201.pdf>)

An Advance Beneficiary Notice (ABN) must be submitted for Medicare patients whenever HgbA1C testing exceeds the frequency limitations. Without a signed ABN, Physicians Laboratory cannot bill the patient for services provided.

TEST CHANGES – EFFECTIVE FEBRUARY 1ST

Choices for ANA Testing:

- 556 Anti-Nuclear Antibody (ANA), IgG**
Performed: PLS Lincoln CPT: 86038
- 8035 Anti-Nuclear Antibody (ANA), IgG Screen w/ Reflex to IFA Titer**
CPT: 86038; If reflexed add 86039
The ANA IgG screen will be performed at the PLS Lincoln facility. All equivocal and positive samples will be sent to ARUP for titer by IFA.
- 7274 ANA w/ Reflex to Connective Tissue Disease Profile**
Performed: PLS Lincoln
CPT: 86038; If reflexed add 86225, 86235x7
All equivocal and positive ANA IgG screens will automatically reflex to the Connective Tissue Disease Profile.

Choices for Double Stranded DNA Testing:

- 8207 Double Stranded (dsDNA), IgG**
Performed: PLS Lincoln CPT: 86225
- 8038 Double Stranded DNA (dsDNA) Antibody IgG by ELISA w/ Reflex to dsDNA Antibody IgG by IFA**
CPT: 86225; If reflexed add 86256
The Double Stranded DNA (dsDNA) IgG screen will be performed at the PLS Lincoln facility. All equivocal and positive samples will be sent to ARUP for titer by IFA.

TEST CHANGES - FLUID PANELS

Effective February 1st, Physicians Laboratory Services will now offer the following Fluid Cell Count & Differential panels. Test #257 will be deactivated.

317	CSF / Dialysis Fluid Cell Count & Differential	CPT 89051
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(Source: CSF & Dialysis Fluid ONLY)

WBC

RBC

Differential

Color

Clarity

1317	Body Fluid Cell Count & Differential	CPT 89051
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(Source: Pleural Fluid, Synovial Fluid, Cyst Fluid, Paracentesis Fluid, Pericardial Fluid, etc)

WBC

RBC

Differential

Color

Clarity

2317	Bronchial Alveolar Lavage (BAL) Fluid Cell Count & Differential	CPT 89051
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(Source: BAL ONLY)

WBC

RBC

Differential

Color

Clarity

Physicians Laboratory currently offers CSF and Synovial profiles, which include testing in addition to the fluid cell count and differential. The test numbers, components, and CPT codes are listed below for your review.

1203	CSF Profile	CPT 89051, 82945, 84157
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Cell Count w/ Differential	89051
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Glucose	82945
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Protein	84157
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Color

Clarity

2203	Synovial Fluid Profile	CPT 89051, 82945, 84157, 86430, 89060
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Cell Count w/ Differential	89051
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Glucose	82945
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Protein	84157
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Rheumatoid Factor	86430
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Crystals	89060
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Color

Clarity

CPT CODE UPDATES – EFFECTIVE JANUARY 1, 2012

There were several CPT code changes that were inadvertently excluded from the previous memo that was distributed in December. The modifications to the OB and Fertility panels are due to the new Syphilis Trepsure EIA testing (CPT 86780). Since RPR is no longer the method used to screen for syphilis, OB panels cannot be bundled using the 80055 code. For this reason, each component must be reported as a separate CPT code resulting in the changes listed below. Additionally, all positive Syphilis Trepsure results will automatically reflex to confirmation by RPR (CPT 86592).

#582 OB PANEL I

CBC w/ Differential	85025
Rubella IgG	86762
Syphilis Trepsure EIA	86780
Hepatitis Bs Antigen	87340
RBC Antibody Screen	86850
ABO	86900
Rho (D)	86901

#583 OB PANEL II

CBC w/ Differential	85025
Rubella IgG	86762
Syphilis Trepsure EIA	86780
RBC Antibody Screen	86850
ABO	86900
Rho (D)	86901

#585 OB PANEL IV

Rubella IgG	86762
Syphilis Trepsure EIA	86780
Hepatitis Bs Antigen	87340
RBC Antibody Screen	86850
ABO	86900
Rho (D)	86901

#2585 OB PANEL IV + HEP C

Hepatitis C IgG	86803
Rubella IgG	86762
Syphilis Trepsure EIA	86780
Hepatitis Bs Antigen	87340
RBC Antibody Screen	86850
ABO	86900
Rho (D)	86901

#480 OB Panel VI

CBC w/ Differential	85025
Glucose Random	82947
Rubella IgG	86762
Syphilis Trepsure EIA	86780
Hepatitis Bs Antigen	87340
RBC Antibody Screen	86850
ABO	86900
Rho (D)	86901

#2555 FEMALE INFERTILITY PANEL

Hepatitis C IgG	86803
HIV ½ Antibody	86703
Varicella Zoster IgG	86787
Rubella IgG	86762
Syphilis Trepsure EIA	86780
Hepatitis Bs Antigen	87340
Hepatitis B Core Total Antibody	86704
ABO	86900
Rho (D)	86901
CMV IgG	86644
CMV IgM	86645

#2554 MALE INFERTILITY PANEL

Hepatitis C IgG	86803
HIV ½ Antibody	86703
Syphilis Trepsure EIA	86780
Hepatitis Bs Antigen	87340
Hepatitis B Core Total Antibody	86704

ADDITIONAL CPT CODE CORRECTIONS – EFFECTIVE JANUARY 1, 2012

There were two CPT coding errors that were listed in previous client bulletins. Please make the following corrections to your records. These changes took effect on January 1, 2012. We apologize for any confusion or inconvenience that this may have caused.

8210 CONNECTIVE TISSUE DISEASE PROFILE CPT: 86225, 86235x7

8207	Double Stranded DNA (dsDNA), IgG	86225
8163	Smith ENA, IgG	86235
8208	Ribonucleic Protein (RNP), IgG	86235
7616	SSA (Ro), IgG	86235
7617	SSB (La), IgG	86235
1750	Scleroderma (Scl-70), IgG	86235
2098	Chromatin, IgG	86235
8209	Centromere, IgG	86235

In the technical bulletin, Centromere IgG was incorrectly listed as 86038

214 SEMEN ANALYSIS, POST VASECTOMY CPT: 89321

In the 2012 CPT Code & Pricing Changes Memo, Semen Analysis Post Vasectomy was incorrectly listed as 89322