Payment Policy | Medicare Advantage Plans Laboratory Network Hospital Outpatient Allowable Test Listing

EFFECTIVE DATE: 06|01|2021
POLICY LAST UPDATED: 03|03|2021

OVERVIEW

Blue Cross & Blue Shield of Rhode Island (BCBSRI) has developed a limited network of outpatient laboratories for Medicare Advantage Plan members. This policy documents codes that are allowed to be performed in Hospital Clinical Laboratory Improvement Amendments (CLIA) certified labs outside of the approved network. This is not applicable to laboratory tests obtained in the hospital emergency room or observation status.

Note: This policy does not address coverage or reimbursement for any of the codes listed in this policy. Refer to the applicable policy for any codes that may be not medically necessary or not separately reimbursed.

MEDICAL CRITERIA

Not applicable

PRIOR AUTHORIZATION

Refer to the applicable policy for any prior authorization requirements.

POLICY STATEMENT

Medicare Advantage Plans
Hospital Outpatient Laboratory Services:
The outpatient laboratory services listed in the chart below are the only outpatient laboratory services that are reimbursed to the following facilities:

- Landmark Medical Center
- Sturdy Memorial Hospital
- Southcoast Hospitals (St. Luke's, Tobey, Charlton)
- Westerly Hospital

For all other hospitals in our local network there is no restriction on the laboratory codes that can be rendered.

Effective June 1, 2021 this network restriction is no longer applicable to any Physician Laboratories or Urgent Care Facilities.

Note: The Current Procedural Terminology (CPT) codes for CLIA tests must have the modifier QW appended to be recognized as a waived test.

Allowable Medicare Advantage Hospital Outpatient Laboratory Services	
85379	Fibrin degradation products, D-dimer; quantitative
86850	Antibody screen, RBC, each serum technique
86900	Blood typing, serologic; ABO
86901	Blood typing, serologic; Rh (D)
87015	Concentration (any type), for infectious agents

87154	Culture, typing; identification of blood pathogen and resistance typing, when performed, by nucleic acid (dna or rna) probe, multiplexed amplified probe technique including multiplex reverse transcription, when performed, per culture or isolate, 6 or more targets (New code effective 1/01/2022)
88106	Cytopathology, fluids, washings or brushings, except cervical or vaginal; simple filter method with interpretation
88112	Cytopathology, selective cellular enhancement technique with interpretation (eg, liquid based slide preparation method), except cervical or vaginal
88142	Cytopathology, cervical or vaginal (any reporting system), collected in preservative fluid, automated thin layer preparation; manual screening under physician supervision
88173	Cytopathology, evaluation of fine needle aspirate; interpretation and report
88300	Surgical Path Gross
88304	Tissue Exam by Pathologist
88305	Tissue Exam by Pathologist
88307	Tissue Exam by Pathologist
88311	Decalcification procedure (List separately in addition to code for surgical pathology examination)
88312	Special stain including interpretation and report; Group I for microorganisms (eg, acid fast, methenamine silver)
88313	Special stain including interpretation and report; Group II, all other (eg, iron, trichrome), except stain for microorganisms, stains for enzyme constituents, or immunocytochemistry and immunohistochemistry
88331	Pathology consultation during surgery; first tissue block, with frozen section(s), single specimen
88341	Immunohistochemistry or immunocytochemistry, per specimen; each additional single antibody stain procedure (List separately in addition to code for primary procedure)
88342	Immunohistochemistry or immunocytochemistry, per specimen; initial single antibody stain procedure
88360	Morphometric analysis, tumor immunohistochemistry (eg, Her-2/neu, estrogen receptor/progesterone receptor), quantitative or semiquantitative, per specimen, each single antibody stain procedure; manual
86328	Immunoassay for infectious agent antibodies, qualitative or semiquantitative, single step method (eg, reagent strip); severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19])
86408	Neutralizing antibody, severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]); screen
86409	Neutralizing antibody, severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]); titer
86413	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) antibody, quantitative
86769	Antibody; severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19])
87426	Infectious agent antigen detection by immunoassay technique (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [ELISA], fluorescence immunoassay [FIA], immunochemiluminometric assay [IMCA]), qualitative or semiquantitative; severe acute respiratory syndrome coronavirus (eg, SARS-CoV, SARS-CoV-2 [COVID-19]) (Revised text 1/01/2022)

87428	Infectious agent antigen detection by immunoassay technique, (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [ELISA], fluorescence immunoassay [FIA], immunochemiluminometric assay [IMCA]) qualitative or semiquantitative; severe acute respiratory syndrome coronavirus (eg, SARS-CoV, SARS-CoV-2 [COVID-19]) and influenza virus types A and B
87635	Infectious agent detection by nucleic acid (DNA or RNA); severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]), amplified probe technique
87636	Infectious agent detection by nucleic acid (DNA or RNA); severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) and influenza virus types A and B, multiplex amplified probe technique
87637	Infectious agent detection by nucleic acid (DNA or RNA); severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]), influenza virus types A and B, and respiratory syncytial virus, multiplex amplified probe technique
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])
0202U	Infectious disease (bacterial or viral respiratory tract infection), pathogen-specific nucleic acid (DNA or RNA), 22 targets including severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), qualitative RT-PCR, nasopharyngeal swab, each pathogen reported as detected or not detected
0223U	Infectious disease (bacterial or viral respiratory tract infection), pathogen-specific nucleic acid (DNA or RNA), 22 targets including severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), qualitative RT-PCR, nasopharyngeal swab, each pathogen reported as detected or not detected
0224U	Antibody, severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]), includes titer(s), when performed
0225U	Infectious disease (bacterial or viral respiratory tract infection) pathogen-specific DNA and RNA, 21 targets, including severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), amplified probe technique, including multiplex reverse transcription for RNA targets, each analyte reported as detected or not detected
0226U	Surrogate viral neutralization test (sVNT), severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]), ELISA, plasma, serum
0240U	Infectious disease (viral respiratory tract infection), pathogen-specific RNA, 3 targets (severe acute respiratory syndrome coronavirus 2 [SARS-CoV-2], influenza A, influenza B), upper respiratory specimen, each pathogen reported as detected or not detected
0241U	Infectious disease (viral respiratory tract infection), pathogen-specific RNA, 4 targets (severe acute respiratory syndrome coronavirus 2 [SARS-CoV-2], influenza A, influenza B, respiratory syncytial virus [RSV]), upper respiratory specimen, each pathogen reported as detected or not detected
U0001	CDC 2019 novel coronavirus (2019-ncov) real-time rt-pcr diagnostic panel
U0002	2019-ncov coronavirus, sars-cov-2/2019-ncov (covid-19), any technique, multiple types or subtypes (includes all targets), non-cdc
U0003	Infectious agent detection by nucleic acid (DNA or RNA); severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]), amplified probe technique, making use of high throughput technologies as described by CMS-2020-01-R
U0004	2019-nCoV Coronavirus, SARS-CoV-2/2019-nCoV (COVID-19), any technique, multiple types or subtypes (includes all targetsy), non-CDC, making use of high throughput technologies as described by CMS-2020-01-R
U0005	Infectious agent detection by nucleic acid (DNA or RNA); Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]), amplified probe technique, CDC or non-CDC, making use of high throughput technologies, completed within 2 calendar days from date of specimen collection (list separately in addition to either HCPCS code U0003 or U0004) as described by CMS-2020-01-R2

COVERAGE

Appearance on this list does not imply coverage. Benefits may vary between individual plans.
Please refer to the appropriate Evidence of Coverage for the applicable laboratory benefits/coverage.

BACKGROUND
Not applicable

CODING
See above

RELATED POLICIES
None

PUBLISHED
Provider Update, April 2021
Provider Update, June 2020
Provider Update, March 2018
Provider Update, December 2016

REFERENCES:
None