

Calendar Year 2009
Centers for Medicare & Medicaid Services
New Clinical Laboratory Fee Schedule Test Codes
And Preliminary Payment Determinations

Introduction

This document summarizes the Centers for Medicare and Medicaid Services (CMS) decisions of six new codes for the clinical laboratory fee schedule. Based on clinical judgment and public input gathered from and after the July 14, 2008 Laboratory Public Meeting, these new codes were cross-walked to current codes that were sufficiently similar in process and outcome. As a result, no gap filling of codes was required.

Please provide your comments regarding our rationale and determinations by no later than October 10, 2008. You can e-mail your comments to Glenn McGuirk, at Glenn.McGuirk@cms.hhs.gov.

New Code

83876

New Code Description

Myeloperoxidase (MPO)

Industry Recommended Crosswalk

82553 (Creatine Kinase (CK), (CPK); MB fraction only)/

83880 (Natriuretic Peptide)/

82045 (Albumin, ischemia modified (IMA))

CMS Preliminary Crosswalk Decision

83520

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Rationale and Data on Which Determination Is Based

CMS understands based on information submitted to the CPT editorial panel, that testing for MPO is currently generally billed with CPT code 83520 (Immunoassay, quantitative, not otherwise specified). MPO is a similar immunoassay test which CMS expects would require similar resources and utilize similar testing techniques in order to process the test. Therefore, CMS believes that a crosswalk to code 83520 is appropriate.

New Code

83951

New Code Description

Oncoprotein; des-gamma-carboxy-prothrombin (DCP)

Industry Recommended Crosswalk

83950 (Oncoprotein; HER-2/neu)

CMS Preliminary Crosswalk Decision

82491 PLUS 83520

Rationale and Data on Which Determination Is Based

Performance of this test requires two distinct analytical steps. According to information submitted to the CPT Editorial Panel, these steps would be appropriately coded as CPT codes 82491 plus 83520. CPT 82491 describes chromatography, qualitative, column, single analyte not otherwise specified; CPT 83520 describes immunoassay, analyte, quantitative not otherwise specified. Together these two codes represent a similar level of resources and testing techniques required to perform this type of test.

New Code

85397

New Code Description

Coagulation and Fibrinolysis, functional activity, not otherwise specified (e.g., ADAMTS-13), each analyte

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Industry Recommended Crosswalk

85245 (Clotting; factor VIII, VW factor, ristocetin cofactor)/

85246 (Clotting; factor VIII, VW factor antigen)/

85247 (Clotting; factor VIII, von Willebrand factor, multimetric analysis)

CMS Preliminary Crosswalk Decision

85230

Rationale and Data on Which Determination Is Based

This test is a clotting test similar to tests in the CPT code range 85210-85293. This range includes the crosswalk codes recommended by industry. This range of coding provided no median price that could be cross-walked to a specific code. However, there are four codes that have the same price and establish the mode of this range of codes. The codes that make up the mode are 85230, 85240, 85260, and 85270. Therefore, CMS recommends a crosswalk to the mode of this code range. Any one of these codes would be appropriate for a crosswalk to the new code because of similarity, but since for pricing purposes a one-to-one match is required, CMS recommends a crosswalk to the first code on this list, which is 85230.

New Code

87905

New Code Description

Infectious agent enzymatic activity other than virus (e.g., sialidase activity in vaginal fluid)

Industry Recommended Crosswalk

(82657) Enzyme activity in blood cells, cultured cells, or tissue, not elsewhere specified; nonradioactive substrate, each specimen/

(82657) Enzyme activity in blood cells, cultured cells, or tissue, not elsewhere specified; nonradioactive substrate, each specimen, MINUS (87176)

Homogenization, tissue, for culture/

(87810) Infectious agent antigen detection by immunoassay with direct optical observation; chlamydia trachomatis/

(87808) Infectious agent antigen detection by immunoassay with direct optical observation; trichomonas vaginalis

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CMS Preliminary Crosswalk Decision

82657 MINUS 87176

Rationale and Data on Which Determination Is Based

CMS understands based on information submitted to the CPT editorial panel, crosswalk to CPT Code 82657 less CPT Code 87176 is recommended because Code 82657 represents an analogous test using similar methodology applied to cell or tissue specimens, while Code 87176 is subtracted to allow for specimen processing not required in the assay described by the new code directly applied to body fluid specimens (e.g., vaginal fluid).

New Code

88740

New Code Description

Hemoglobin, quantitative, transcutaneous, per day; carboxy-hemoglobin

Industry Recommended Crosswalk

88720 (Bilirubin) (New Code 88720 replaces Code 88400)/

One half of 88720 (Bilirubin) (New Code 88720 replaces Code 88400)

CMS Preliminary Crosswalk Decision

One half of the payment for 88720

Rationale and Data on Which Determination Is Based

Based on clinical review, CMS believes that 88740 and 88741 are performed using the same equipment, and that the resources required to perform both 88740 and 88741 are similar to those required to perform CPT 88720 (Bilirubin). Therefore, in order to adequately recognize the resources needed to perform these tests and also the economies of scale associated with a single test device used to perform both tests, CMS believes it is appropriate to divide the payment for Code 88720 by two.

New Code

88741

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New Code Description

Methemoglobin, quantitative, transcutaneous, per day; carboxy-hemoglobin

Industry Recommended Crosswalk

88720 (Bilirubin) (New Code 88720 replaces Code 88400)/

One half of 88720 (Bilirubin) (New Code 88720 replaces Code 88400)

CMS Preliminary Crosswalk Decision

One half of the payment for 88720

Rationale and Data on Which Determination Is Based

Based on clinical review, CMS believes that 88740 and 88741 are performed using the same equipment, and that the resources required to perform both 88740 and 88741 are similar to those required to perform CPT 88720 (Bilirubin). Therefore, in order to adequately recognize the resources needed to perform these tests and also the economies of scale associated with a single test device used to perform both tests, CMS believes it is appropriate to divide the payment for Code 88720 by two.

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