

# Laboratory Policy for Network Providers

Established 07-15-2005 - Updated 07-01-2010

## I. Overview of Policy Change

Priority Partners (PPMCO) has instituted a new policy for outpatient laboratory services. Effective July 15, 2005, PPMCO will no longer pay for outpatient hospital-based (Place of Service 22 only) laboratory services, as defined in CPT Codes 80000 – 89999. Recognizing that not all procedures can or should be performed in freestanding laboratory centers, PPMCO has identified a list of services that are excluded from the laboratory policy change, listed on pages 2 through 8.

## II. Pre-Authorization Requirements

- If an exception to this policy is required, the physician will be required to obtain a pre-authorization.
- The ordering provider will be responsible for initiating the pre-authorization process. The pre-authorization request must include the following information:
  - o Patient Name (first and last)
  - o Priority Partners Member Number
  - o Date of Birth
  - o Date of Service
  - o Test or procedure to be performed
  - o CPT code OR complete description of services to be provided
  - o Facility
  - o Ordering Provider
  - o Clinical documentation supporting the medical necessity that the procedure must be performed in the HSCRC regulated facility
- If you need to pre-authorize an outpatient hospital-based laboratory service, please contact our care management department at 410-762-5240 or fax your request to 410-762-5205.
- JHHC has established expedited review and appeals procedures in order to address those services deemed by the ordering physician to be medically necessary in HSCRC regulated spaces.

## III. PPMCO Outreach Assistance for Providers

- PPMCO Outreach staff members are available to provide assistance to providers who have identified members with transportation issues or other concerns that may negatively impact the member's compliance with prescribed treatment. PPMCO members will have access to and be encouraged to utilize Medicaid Transportation when available.
- Outreach will also work with members and their families to identify any additional available resources and address any other barriers to care.
- Providers or their staff should contact 410-424-4648 or 888-500-8786 to initiate the request for Outreach assistance.

## IV. Member Questions

Members with questions or needing assistance, including the locations of and/or transportation to other laboratory locations, should be directed to call Priority Partners MCO Customer Service toll free at 800-654-9728.

## V. Provider Inquiries

Providers who have questions or concerns regarding the above policy should contact their network manager.

## Priority Partners Lab Initiative

PROCEDURE CODE	PROCEDURE DESCRIPTION	PROCEDURE CODE	PROCEDURE DESCRIPTION
80195	SIROLIMUS	87207	SMEAR, SPECIAL STAIN
80400	ACTH STIM	87209	SMEAR, PRIMARY SOURCE WITH INTERPRETATION; COMPLEX SPECIAL STAIN (eg, TRICHROME, IRON HEMOTOXYLIN) FOR OVA & PARASITES
80402	21 HYDROXYLASE DEF	87210	WET MOUNT FOR INFECTIOUS AGENTS (eg, SALINE, INDIA INK, KOH PREPS)
80406	3 BETA-HYDROXYDEHYDROGENASE DEFICIENCY	87220	TISSUE EXAM BY KOH SLIDE OF SAMPLES
80408	ALDOSTERONE SUPPRESSION	87230	ASSAY, TOXIN OR ANTITOXIN
80410	CALCITONIN STIM	87250	VIRUS INOCULATE, EGGS/ANIMAL
80412	EVOCATIVE/SUPPRESSION TESTING	87252	VIRUS INOCULATION, TISSUE
80414	EVOCATIVE/SUPPRESSION TESTING	87253	VIRUS INOCULATE TISSUE, ADDL
80415	EVOCATIVE/SUPPRESSION TESTING	87254	VIRUS INOCULATION, SHELL VIA
80416	EVOCATIVE/SUPPRESSION TESTING	87255	GENET VIRUS ISOLATE, HSV
80417	EVOCATIVE/SUPPRESSION TESTING	87265	PERTUSSIS AG, IF
80418	EVOCATIVE/SUPPRESSION TESTING	87270	CHLAMYDIA TRACHOMATIS AG, IF
80420	EVOCATIVE/SUPPRESSION TESTING	87274	HERPES SIMPLEX 1, AG, IF
80422	EVOCATIVE/SUPPRESSION TESTING	87276	INFLUENZA A, AG, IF
80424	EVOCATIVE/SUPPRESSION TESTING	87280	RESPIRATORY SYNCYTIAL AG, IF
80426	EVOCATIVE/SUPPRESSION TESTING	87281	PNEUMOCYSTIS CARINII, AG, IF
80428	EVOCATIVE/SUPPRESSION TESTING	87285	TREPONEMA PALLIDUM, AG, IF
80430	EVOCATIVE/SUPPRESSION TESTING	87299	ANTIBODY DETECTION, NOS, IF
80432	EVOCATIVE/SUPPRESSION TESTING	87300	AG DETECTION, POLYVAL, IF
80434	EVOCATIVE/SUPPRESSION TESTING		
80435	EVOCATIVE/SUPPRESSION TESTING		

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PROCEDURE CODE	PROCEDURE DESCRIPTION	PROCEDURE CODE	PROCEDURE DESCRIPTION
80436	EVOCATIVE/SUPPRESSION TESTING	87301	ADENOVIRUS AG, EIA
80438	EVOCATIVE/SUPPRESSION TESTING	87305	IAAD EIA QUAL/SEMIQUAN MULTIPLE STEP ASPERGILLUS
80439	EVOCATIVE/SUPPRESSION TESTING	87320	CHYLMD TRACH AG, EIA
80440	EVOCATIVE/SUPPRESSION TESTING	87324	CLOSTRIDIUM AG, EIA
80500	PATH CLINICAL CONSULTATION	87327	CRYPTOCOCCUS NEOFORM AG, EIA
80502	PATH CLINICAL CONSULTATION - COMPLEX	87328	CRYPTOSPORIDIUM AG, EIA
81000	URINALYSIS	87329	GIARDIA AG, EIA
81002	ROUTINE URINALYSIS W/O MICROSCOPY	87335	E COLI 0157 AG, EIA
81015	URINALYSIS, MICROSCOPY ONLY	87338	HPYLORI, STOOL, EIA
81025	URINE PREGNANCY TEST BY VISUAL COLOR COMPARISON	87350	HEPATITIS BE AG, EIA
82106	ALFA-FETOPROTEIN AMNIOTIC FLUID	87380	HEPATITIS DELTA AG, EIA
82107	AFP-L3 FRACTION ISOFORM AND TOTAL AFP	87385	HISTOPLASMA CAPSUL AG, EIA
82135	ASSAY, AMINOLEVULINIC ACID	87390	HIV-1 AG, EIA
82140	ASSAY OF AMMONIA	87400	INFLUENZA A/B, AG, EIA
82143	AMNIOTIC FLUID SCAN	87420	RESP SYNCYTIAL AG, EIA
82270	BLOOD, OCCULT; FECES SCREEN	87425	ROTAVIRUS AG, EIA
82271	BLOOD, OCCULT, BY PEROXIASE ACTIVITY (eg. GUAIAC), QUALITATIVE, FECES, SINGLE SPECIMEN (eg, FROM DIGITAL RECTAL EXAM)	87427	SHIGA-LIKE TOXIN AG, EIA
82272	BLOOD, OCCULT, BY PEROXIDASE ACTIVITY (eg, GUAIAC), QUALITATIVE; OTHER SOURCES	87430	STREP A AG, EIA
82570	ASSAY OF URINE CREATININE	87449	AG DETECT NOS, EIA, MULT
82435	CHLORIDE; BLOOD	87490	CHYLMD TRACH, DNA, DIR PROBE
82731	FETAL FIBRONECTIN SEMIQUANTITATIVE	87491	CHYLMD TRACH, DNA, AMP PROBE
82810	BLOOD GASES, O2 SAT ONLY	87493	INF AGENT DET NUC ACID CLOSTRIDIUM AMP PROBE
82948	GLUCOSE, BLOOD REAGENT STRIP	87498	IADNA ENTEROVIRUS AMPLIFIED PROBE TECHNIQUE
82962	GLUCOSE, BLOOD BY GLUCOSE MONITORING DEVISE	87529	HSV, DNA, AMP PROBE
83631	LACTOFERRIN, FECAL; QUANTITATIVE	87530	HSV, DNA, QUANT
83661	L/S RATIO FETUS	87555	M.TUBERCULO, DNA, DIR PROBE
		87581	M.PNEUMON, DNA, AMP PROBE

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PROCEDURE CODE	PROCEDURE DESCRIPTION	PROCEDURE CODE	PROCEDURE DESCRIPTION
83663	FLUORESCENCE POLARIZATION	87590	N.GONORRHOEAE, DNA, DIR PROB
83873	CSF MYELIN BASIC PROTEIN	87591	N.GONORRHOEAE, DNA, AMP PROB
83876	MYELOPEROXIDASE MPO	87621	HPV, DNA, AMP PROBE
83883	PEPHRELOMETRY, EACH ANALYTE	87640	IADNA S. AUREUS AMP PRB TQ
83900	MOLECULE NUCLEIC AMPLI 2 SEQ	87641	IADNA S. AUREUS METHICILLIN RESISTANT AMP PRB TQ
83907	MOLECULAR DIAGNOSTICS; LYSIS LOF CELLS PRIOR TO NUCEIC ACID EXTRACTION (eg, STOOL SPECIMENS, PARRAFFIN EMBEDDED TISSUE)	87650	STREP A, DNA, DIR PROBE
83908	MOLECULAR DIAGNOSTICS; SIGNAL AMPLIFICIATION OF PATIENT NUCLEIC ACID, EACH NUCLEIC ACID SEQUENCE	87653	IADNA STREPTOCOCCUS GROUP B AMPLIFIED PROBE TQ
83909	MOLECULAR DIAGNOSTICS; SEPARATION AND IDENTIFICATION BY HIGH RESOLUTION TECHNIQUE (eg, CAPILLARY ELECTROPHORESIS)	87797	DETECT AGENT NOS, DNA, DIR
83914	(ASPE) MUTATION IDENTIFICATION BY ENZYMATIC LIGATION OR PRIMER EXTENSION, SINGLE SEGMENT, EACH SEGMENT (eg, OLIGONUCLEOTIDE LIGATION ASSAY (OLA), SINGLE BASE CHAIN EXTENSION (SBCE), OR ALLELE-SPECIFIC PRIMER EXTENSION	87799	DETECT AGENT NOS, DNA, QUANT
83951	ONCOPROTEIN DES-GAMMA-CARBOXY-PROTHROMBIN DCP	87801	DETECT AGNT MULT, DNA, AMPLI
83986	ASSAY BODY FLUID ACIDITY	87802	STREP B ASSAY W/OPTIC
84081	PHOSPHATIDYL GLYCEROL (AMNIOTIC FLUID ENZYME TEST)	87803	CLOSTRIDIUM TOXIN A W/OPTIC
84315	SPECIFIC GRAVITY - OTHER THAN URINE	87804	INFLUENZA ASSAY W/OPTIC
84703	CHORIONIC GONADOTROPIN ASSAY	87808	IAADIADOO TRICHOMONAS VAGINALIS
85002	BLEEDING TIME	87810	CHYLMD TRACH ASSAY W/OPTIC
85013	BLOOD COUNT, SPUN MICROHEMATOCRIT (HCT)	87880	INFECTIOUS AGENT DETECTION BY IMMUNOASSAY W/DIRECT OPTIONAL OBSERVATION; STREPTOCOCCUS, GROUP A
85018	BLOOD COUNT, HEMOGLOBIN (Hgb)	87899	AGENT NOS ASSAY W/OPTIC
85097	BONE MARROW	87900	INFECTIOUS AGENT DRUG SUSCEPTIBILITY PHENOTYPE PREDICTION USING REGULARLY UPDATED GENOTYPIC BIOINFORMATICS
85347	COAGULATION TIME	87905	INFECTIOUS AGENT ENZMATIC ACTV OTH/THN VIRUS
85397	COAG & FBRINOLYSIS FUNCTIONAL ACTGV NOS EA ANAL	88108	CYTOPATHOLOGY, CONCENTRATION TECHNIQUE, SMEARS AND INTERPRETATION
85460	KLEIHAUR BETKE TEST	88112	SELECTIVE CELLULAR ENHANCEMENT TECHNIQUE
85540	OPENED STAIN	88125	FORENSIC
85610	PROTHROMBIN TIME	88130	SEX CHROMATIN IDENTIFICATION; BARR BODIES
86200	CYCLIC CITRULLINATED PEPTIFE (CCP), ANTIBODY		
86308	HETEROPHILE ANTIBODIES SCREENING		
86355	IMMUNOFIXATION ELECTROPHERESIS; OTHER FLUIDES WITH CONCENTRATION (eg, URINE, CSF)		

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PROCEDURE CODE	PROCEDURE DESCRIPTION	PROCEDURE CODE	PROCEDURE DESCRIPTION
86357	NATURAL KILLER (NK) CELLS, TOTAL COUNT	88141	CYTOPATHOLOGY, CERVICAL OR VAGINAL (ANY REPORTING SYSTEM), REQUIRING INTERPRETATION BY PHYSICIAN
86367	STEM CELLS (eg,CD34), TOTAL COUNT	88142	CYTOPATHOLOGY, SLIDES, CERVICAL OR VAGINAL
86480	TUBERCULOSIS TEST, CELL MEDIATED IMMUNITY MEASUREMENT OF GAMMA INTERFERON ANTIGEN RESPONSE	88143	CYTOPATHOLOGY, SLIDES, CERVICAL OR VAGINAL
86485	SKIN TEST	88147	CYTOPATHOLOGY, SLIDES, CERVICAL OR VAGINAL
86490	SKIN TEST	88148	CYTOPATHOLOGY, SLIDES, CERVICAL OR VAGINAL
86510	SKIN TEST	88150	CYTOPATHOLOGY, SLIDES, CERVICAL OR VAGINAL
86580	SKIN TEST	88152	CYTOPATHOLOGY, SLIDES, CERVICAL OR VAGINAL
86805	TISSUE TYPING - LYMPHOCYTE ASSAY	88153	CYTOPATHOLOGY, SLIDES, CERVICAL OR VAGINAL
86806	TISSUE TYPING	88154	CYTOPATHOLOGY, SLIDES, CERVICAL OR VAGINAL
86807	TISSUE TYPING	88155	CYTOPATHOLOGY, SLIDES, CERVICAL OR VAGINAL
86808	TISSUE TYPING	88160	CYTOPATHOLOGY, SMEARS, ANY OTHER SOURCES; SCREENING AND INTERPRETATION
86812	TISSUE TYPING		
86813	TISSUE TYPING	88161	PREPARATION, SCREENING AND INTERPRETATION
86816	TISSUE TYPING	88162	EXTENDED STUDY INVOLVING OVER 5 SLIDES AND/OR MULTIPLE STAINS
86817	TISSUE TYPING		
86821	TISSUE TYPING	88164	CYTOPATHOLOGY, SLIDES, CERVICAL OR VAGINAL
86822	TISSUE TYPING	88165	CYTOPATHOLOGY, SLIDES, CERVICAL OR VAGINAL
86825	HLA CROSSMATCH NONCYTOTOXIC IST SERUM/DILUTION	88166	CYTOPATHOLOGY, SLIDES, CERVICAL OR VAGINAL
86826	HLS CROSSMATCH NONCYTOTOXIC EA+ SERUM/DILUTION	88167	CYTOPATHOLOGY, SLIDES, CERVICAL OR VAGINAL
86849	TISSUE TYPING	88172	CYTOPATHOLOGY, SLIDES, CERVICAL OR VAGINAL
86880	ANTIHUMAN GLOBULIN TEST	88173	INTERPRETATION AND REPORT
86885	← INDIRECT, QUALITATIVE, EACH ANTISERUM	88174	CYTOPATHOLOGY, SLIDES, CERVICAL OR VAGINAL
86886	← INDIRECT, TITER, EACH ANTISERUM	88175	CYTOPATHOLOGY, SLIDES, CERVICAL OR VAGINAL
86890	AUTOLOGOUS BLOOD OR COMPONENT, COLLECTING PROCESSING & STORAGE	88300	SURGICAL PATH GROSS EXAM - IF DONE W/SURGICAL PROCEDURE IN HOSPITAL
86891	INTRA- OR POSTOPERATIVE SALVAGE		
86900	BLOOD TYPING IF PART OF TRANSFUSION		

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PROCEDURE CODE	PROCEDURE DESCRIPTION	PROCEDURE CODE	PROCEDURE DESCRIPTION
86901	← Rh (D)		
86903	← ANTIGEN SCREENING FOR COMPATIBLE BLOOD UNIT USING REAGENT SERUM	88302	SURGICAL PATH GROSS EXAM - IF DONE W/SURGICAL PROCEDURE IN HOSPITAL
86904	← ANTIGEN SCREENING FOR COMPATIBLE UNIT USING PATIENT SERUM	88304	SURGICAL PATH GROSS EXAM - IF DONE W/SURGICAL PROCEDURE IN HOSPITAL
86905	← RBC ANTIGENS, OTHER THAN ABO OR RH (D)		
86906	← RH PHENOTYPING, COMPLETE	88305	SURGICAL PATH GROSS EXAM - IF DONE W/SURGICAL PROCEDURE IN HOSPITAL
86922	TRANSFUSION MEDICINE COMPATIBILITY TESTING		
86923	COMPATIBILITY TEST EACH UNIT; ELECTRONIC	88307	SURGICAL PATH GROSS EXAM - IF DONE W/SURGICAL PROCEDURE IN HOSPITAL
86927	FRESH FROZEN PLASMA, THAWING		
86930	FROZEN BLOOD, EACH UNIT, FREEZING (INCLUDES PREPARATION)	88309	SURGICAL PATH GROSS EXAM - IF DONE W/SURGICAL PROCEDURE IN HOSPITAL
86931	THAWING		
86940	HEMOLYSIS AND AGGLUTININS; AUTO, SCREEN	88311	DECALCIFICATION PROCEDURES
86941	INCUBATED	88312	OPENED STAIN
86945	INCUBATION OF BLOOD PRODUCT	88313	SPECIAL STAIN
86950	LEUKOCYTE TRANSFUSION	88314	FROZEN SECTION
86960	VOLUME REDUCTION OF BLOOD OR BLOOD PRODUCT (eg, RED BLOOD CELLS OR PLATELETS), EACH UNIT	88321	CONSULTATION AND REPORT ON REFERRED SLIDES PREPARED ELSEWHERE
86965	POOLING OF PLATELETS OR OTHER BLOOD PRODUCTS	88323	PATHOLOGY REVIEW
86970	PRETREATMENT OF RBC's FOR USE IN RBC ANTIBODY DETECTION	88325	SURGICAL PATH - CONSULTATION AND REVIEW OF MATERIALS
86971	INCUBATION WITH ENZYMES	88329	PATHOLOGY CONSULTATION DURING SURGERY
86972	BY DENSITY GRADIENT SEPARATION	88331	SURGICAL PATH
86975	PRETREATMENT OF SERUM FOR USE IN RBC ANTIBODY IDENTIFICATION	88332	SURGICAL PATH
86976	BY DILUTIO	88333	CYTOLOGIC EXAMINATION (eg, TOUCH PREP, SQUASH PREP), EACH ADDITIONAL SITE
86977	INCUBATION WITH INHIBITORS		
86978	RBC's BY DIFFERENTIAL RED CELL ABSORPTION USING PATIENT RBC's	88334	CYTOLOGIC EXAMINATION (eg, TOUCH PREP, SQUASH PREP), EACH ADDITIONAL SITE

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PROCEDURE CODE	PROCEDURE DESCRIPTION	PROCEDURE CODE	PROCEDURE DESCRIPTION
86985	SPLITTING OF BLOOD OR BLOOD PRODUCTS	88342	SURGICAL PATH
87001	ANIMAL INOCULATION, SMALL ANIMAL, WITH OBSERVATION	88346	SURGICAL PATH
87003	ANIMAL INOCULATION, SMALL ANIMAL, WITH OBSERVATION AND DISSECTION	88347	SURGICAL PATH
87015	SPECIMEN CONCENTRATION	88348	ELECTRON MICROSCOPY, DIAGNOSTIC
87045	FECES CULTURE, BACTERIA	88349	SURGICAL PAT
87046	STOOL CULTR, BACTERIA, EACH	88355	SURGICAL PATH
87070	CULTURE, BACTERIA, OTHER	88356	SURGICAL PATH
87071	CULTURE BACTERI AEROBIC OTHR	88358	SURGICAL PATH
87073	CULTURE BACTERIA ANAEROBIC	88360	SURGICAL PATH
87076	CULTURE ANAEROBE IDENT, EACH	88361	SURGICAL PATH
87081	CULTURE SCREEN ONLY	88362	SURGICAL PATH
87101	SKIN FUNGI CULTURE	88365	SURGICAL PATH
87102	FUNGUS ISOLATION CULTURE	88367	SURGICAL PATH
87106	FUNGI IDENTIFICATION, YEAST	88368	SURGICAL PATH
87107	FUNGI IDENTIFICATION, MOLD	88371	SURGICAL PATH
87109	MYCOPLASMA	88372	SURGICAL PATH
87110	CHLAMYDIA CULTURE	88380	SURGICAL PATH
87116	MYCOBACTERIA CULTURE	88384	ARRAY-BASED EVALUATION OF MULTIPLE MOLECULAR PROBES; 11 THROUGH 50 PROBES
87118	MYCOBACTERIC IDENTIFICATION	88385	ARRAY-BASED EVALUATION OF MULTIPLE MOLECULAR PROBES; 51 THROUGH 250 PROBES
87140	CULTURE TYPE IMMUNOFLUORESC	88381	MICRODISSECTION PREP IDENTIFIED TARGET MANUAL
87143	CULTURE TYPING, GLC/HPLC	88386	ARRAY-BASED EVALUATION OF MULTIPLE MOLECULAR PROBES; 251 THROUGH 500 PROBES
87147	CULTURE TYPE, IMMUNOLOGIC	88387	MACRO EXAM DISSECT & PREP TISS NONMICRO STD EA
87149	CULTURE TYPE, NUCLEIC ACID	88388	MACR EXM DISS & PRP NONMICR IMPRNT/CONSLT/FRZ SEC
87150	CULTYP NUC ACID AMP PRB CULT/ISOLATE EA ORGNISM	88720	BILRUBINTOTAL TRANSCUTANEOUS
87152	IDENTIFICATION BY PULSE FIELD GEL TYPING	88740	HEMOGLOBIN QUAN TC PER DAY CARBOXYHEMOGLOBIN
87153	CULTYP NUCLEIC ACID SEQUENCING METH EA ISOLTE	88741	HEMOGLOBIN QUANTATIVE TC PER DAY METHEMOGLOBIN

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PROCEDURE CODE	PROCEDURE DESCRIPTION	PROCEDURE CODE	PROCEDURE DESCRIPTION
87158	CULTURE TYPING, ADDED METHOD	88720	BILRUBIN TOTAL TRANSCUTANEOUS
87172	PINWORM EXAM	88740	HEMOGLOBIN QUAN TC PER DAY CARBOXYHEMOGLOBIN
87176	TISSUE HOMOGENIZATION, CULTR	88741	HEMOGLOBIN QUANTITATIVE TC PER DAY METHEMOGLOBIN
87177	OVA AND PARASITES, DIRECT SMEARS, CONCENTRATION AND ID	89049	PATHOLOGY CONSULTATION DURING SURGERY; CYTOLOGIC EXAMINATION (eg, TOUCH PREP, SQUASH PREP), INITIAL SITE
87181	MICROBE SUSCEPTIBLE, DIFFUSE	89050	CELL COUNT - BODY FLUID
87184	MICROBE SUSCEPTIBLE, DISK	89051	CELL COUNT - BODY FLUID
87185	MICROBE SUSCEPTIBLE, ENZYME	89060	CRYSTAL ID BY LIGHT MICROSCOPY AND BODY FLUID
87186	MICROBE SUSCEPTIBLE, MIC	89100	DUODENAL INTUBATION AND ASPIRATION
87187	MICROBE SUSCEPTIBLE, MLC	89105	PANCREATIC OR GALL BLADDER SPECIMEN COLLECTION
87190	MICROBE SUSCEPT, MYCOBACTERI	89130	GASTRIC INTUBATION AND ASPIRATION
87197	BACTERICIDAL LEVEL, SERUM	89132	GASTRIC INTUBATION AND ASPIRATION
87205	SMEAR, GRAM STAIN	89135	GASTRIC INTUBATION AND ASPIRATION
87206	SMEAR, FLUORESCENT/ACID STAI	89136	GASTRIC INTUBATION AND ASPIRATION
		89140	GASTRIC INTUBATION AND ASPIRATION
		89141	GASTRIC INTUBATION AND ASPIRATION