Calendar Year 2010

Centers for Medicare & Medicaid Services

New Clinical Laboratory Fee Schedule Test Codes

And Preliminary Payment Determinations

Reconsideration Code

83876

New Code Description

Myeloperoxidase (MPO)

Industry Recommended Crosswalk

82553--Creatine kinase (CK), (CPK); MB fraction only; **OR** 83880--Natriuretic peptide

CMS Final Crosswalk Decision

83880--Natriuretic peptide

Rationale

The Myeloperoxidase (MPO) test is a quantitative immunoassay test that uses the enzyme-linked immunosorbent assay (ELISA) sandwich methodology. Last year, CMS crosswalked CPT 83876 Myeloperoxidase (MPO) to CPT 83520 “Immunoassay, analyte, quantitative; not otherwise specified” which pays at $18.91. During the reconsideration process, CMS performed further research on the methodology used for this test and concluded that the MPO test appears to have the same level of complexity in its action step process as the CPT 83880, Natriuretic Peptide; therefore, this is our final crosswalk decision on this test.

New Code

84145

New Code Description

Procalcitonin (PCT)

Industry Recommended Crosswalk

84146--Prolactin; **OR** 83880--Natriuretic peptide

CMS Final Crosswalk Decision

84146--Prolactin

Rationale

The Procalcitonin (PCT) test is a quantitative immunoassay test which uses a sandwich methodology with a final fluorescent detection. It is performed in an automated instrument. Therefore, the performance of the PCT test is less complicated than some other tests using the ELISA sandwich methodology. At the Annual Public Meeting, this crosswalk recommendation was supported by the College of American Pathologists, the American Society for Microbiology, the Clinical Laboratory Management Association, and the American Society for Clinical Pathology.

New Code

87153

New Code Description

Culture, typing; identification by nucleic acid sequencing method, each isolate

Industry Recommended Crosswalk

87902--Infectious agent genotype analysis by nucleic acid (DNA or RNA), Hepatitis C virus; **OR** Stacking codes in the CPT range 83890 through 83912

CMS Final Crosswalk Decision

83891—Molecular diagnostics; isolation or extraction of highly purified nucleic acid, each nucleic acid type (i.e., DNA or RNA); PLUS 83898—Molecular diagnostics; amplification target, each nucleic acid sequence; PLUS 83904—Molecular diagnostics; mutation identification by sequencing, single segment, each segment; PLUS 83912—Molecular diagnostics; interpretation and report; PLUS (HALF OF CODE) 87900—Infectious agent drug susceptibility phenotype prediction using regularly updated genotypic bioinformatics

Rationale

CMS agrees with the recommendation to establish a crosswalk to a series of molecular diagnostic CPT codes. CMS dervived its recommended crosswalk by selecting codes describing the steps involved in this test, that is, comparing selected nucleic acid (gene) sequences (e.g., 1 sequence) with known sequences from well-characterized microbes to identify microbial isolates. CMS chose to include CPT 87900 as a part of this crosswalk as it describes the use of a genotype to predict the isolate's identity using a bioinformatics approach. This is similar to the idea of using the sequence to predict bacterial drug susceptibility. However, CMS understands that CPT 87153 is used to compare one nucleic acid sequence to a database while CPT 87900 is used to compare multiple nucleic acid sequences to multiple databases. In order to reflect this difference, CMS recommends dividing the payment for CPT 87900 in half. During the comment periods, CMS did not receive convincing evidence to support any alternative decision.

New Code

86825

New Code Description

Human leukocyte antigen (HLA) crossmatch, non-cytotoxic (e.g., using flow cytometry), first serum sample or dilution

Industry Recommended Crosswalk

3 TIMES 86356--Mononuclear cell antigen, quantitative (e.g., flow cytometry), not otherwise specified, each antigen; **OR** 86806--Lymphocytotoxicity assay, visual crossmatch; without titration; PLUS 86355--B cells, total count; PLUS 86359--T cells, total count; PLUS 86356--Mononuclear cell antigen, quantitative (e.g., flow cytometry), not otherwise specified, each antigen; **OR** 88184--Flow cytometry, cell surface, cytoplasmic, or nuclear marker, technical component only; first marker; **OR** 87536--Infectious agent detection by nucleic acid (DNA or RNA); HIV-1, quantification; **OR** 88184 PLUS 88185--Flow cytometry, cell surface, cytoplasmic, or nuclear marker, technical component only; each additional marker

CMS Final Crosswalk Decision

3 TIMES 86356—Mononuclear cell antigen, quantitative (e.g., flow cytometry), not otherwise specified, each antigen

Rationale

This test identifies a subgroup of potential organ transplant recipients who are at increased risk for graft failure or a complicated post-transplant clinical course due to low levels of antibody not detected by lymphocytoxic crossmatch procedures. A fluorescent crossmatch analysis of patient antibody bound to donor cells uses 3 color fluorescent tests with CD3 and CD19 monoclonals and conjugated anti-human immunoglobulin. Three times CPT 86356 represents the antigens tested and the antibodies used in this test.

New Code

86826

New Code Description

Human leukocyte antigen (HLA) crossmatch, non-cytotoxic (e.g., using flow cytometry),each additional serum sample or sample dilution (List separately in addition to primary procedure)

Industry Recommended Crosswalk

86356--Mononuclear cell antigen, quantitative (e.g., flow cytometry), not otherwise specified, each antigen; **OR** 86355--B cells, total count; PLUS 86359--T cells; total count; **OR** 88185--Flow cytometry, cell surface, cytoplasmic, or nuclear marker, technical component only; each additional marker; **OR** 86361--T cells; absolute CD4 count; **OR** 88184--Flow cytometry, cell surface, cytoplasmic, or nuclear marker, technical component only; first marker; PLUS 88185—Flow cytometry, cell surface, cytoplasmic, or nuclear marker, technical component only; each additional marker

CMS Final Crosswalk Decision

86356—Mononuclear cell antigen, quantitative (e.g., flow cytometry), not otherwise specified, each antigen

Rationale

CPT 86826 uses the same methodology as CPT 86825 (i.e., testing antibodies as part of 1 test) except there is no need to prepare donor lymphocytes again. CPT 86356 reflects the economies of scale inherent in this code.

New Code

83987

New Code Description

pH; exhaled breath condensate

Industry Recommended Crosswalk

82800--Gases, blood, pH only PLUS (1 or 3 TIMES) 87015--Concentration (any type), for infectious agents

CMS Final Crosswalk Decision

82800—Gases, blood, pH only; PLUS 87015—Concentration (any type), for infectious agents

Rationale

The Exhaled Breath Condensate pH test produces a single pH measurement unique to a breath condensate specimen collected at a specific time. Performance of this test requires two distinct analytical steps. These steps would be appropriately crosswalked to CPT 82800 and CPT 87015. CPT 82800 describes the pH measurement step, and CPT 87015 describes the concentration step. Together, these two codes represent a similar level of resources and testing techniques required to perform this type of test. We note that the patient is responsible for assembling the device that will perform a portion of the test and collecting his/her own breath specimen at home.

New Code

84431

New Code Description

Thromboxane metabolite(s), including thromboxane if performed, urine

Industry Recommended Crosswalk

83520--Immunoassay, analyte, quantitative, not otherwise specified; **OR** 83520—Immunoassay, analyte, quantitative, not otherwise specified; PLUS 82570—Creatinine; other source; **OR** 85576-- Platelet, aggregation (in virto), each agent

CMS Final Crosswalk Decision

83520—Immunoassay, analyte, quantitative, not otherwise specified

Rationale

CPT 83520 describes a quantitative immunoassay analyte test which covers the thromboxane metabolite test. The CPT committee will be instructing separate reporting for urine creatinine; therefore, it would be redundant to add CPT 82570 to this crosswalk.

New Code

86352

New Code Description

Cellular function assay involving stimulation (e.g., mitogen or antigen) and detection of biomarker (e.g., ATP)

Industry Recommended Crosswalk

Gap-fill; **OR** 86353--Lymphocyte transformation, mitogen (phytomitogen) or antigen induced blastogenesis; PLUS 82397--Chemiluminescent assay

CMS Final Crosswalk Decision

86353—Lymphocyte transformation, mitogen (phytomitogen) or antigen induced blastogenesis; PLUS 82397—Chemiluminescent assay

Rationale

This test requires two distinct analytical steps. These steps would be appropriately crosswalked to CPT 86353 and CPT 82397. CPT 86353 describes the stimulation step, and CPT 82397 describes the detection test by chemiluminescence. At the Annual Public Meeting, this crosswalk decision was supported by the majority of commenters, including the AACC, the American Society for Microbiology, and the American Clinical Laboratory Association.

New Code

86305

New Code Description

Human epididymis protein 4 (HE4)

Industry Recommended Crosswalk

86304--Immunoassay for tumor antigen, quantitative, CA 125; or 86316--Immunoassay for tumor antigen, other antigen; quantitative (e.g., CA 50, 72-4, 549), each

CMS Final Crosswalk Decision

86316—Immunoassay for tumor antigen, other antigen; quantitative (e.g., CA 50, 72-4, 549), each

Rationale

Both crosswalk suggestions from the clinical laboratory fee schedule pay at the same rate. CMS is crosswalking this code to CPT 86316 because this test is a quantitative immunoassay and the description for CPT 86316 provides a better descriptive match.

New Code

86780

New Code Description

Antibody; treponema pallidum

Industry Recommended Crosswalk

86781--Antibody; Treponema pallidum, confirmatory test (e.g., FTA-abs)

CMS Final Crosswalk Decision

86781—Antibody; Treponema pallidum, confirmatory test (e.g., FTA-abs)

Rationale

The Antibody; treponema pallidum, confirmatory test is performed using a treponema antibody approach and allows separate reporting from other types of syphilis testing used for screening and confirmation specified in CPT.

New Code

87150

New Code Description

Culture, typing; identification by nucleic acid (DNA or RNA) probe, amplified probe technique, per culture or isolate, each organism probed

Industry Recommended Crosswalk

87798--Infectious agent detection by nucleic acid (DNA or RNA), not otherwise specified; amplified probe technique, each organism; **OR** 87641--Staphylococcus aureus, methicillin resistant, amplified probe technique

CMS Final Crosswalk Decision

87798—Infectious agent detection by nucleic acid (DNA or RNA), not otherwise specified; amplified probe technique, each organism

Rationale

This test uses an amplified probe technique from a cultured specimen. CPT 87798 is a general code that describes an amplified code technique applied to a primary specimen. Because the new CPT code is not organism specific, cross-walking to a non-specific test code rather than an amplified code technique targeted to a specific organism is more appropriate.

New Code

87493

New Code Description

Infectious agent detection by nucleic acid (DNA or RNA); clostridum difficile, toxin gene(s), amplified probe technique

Industry Recommended Crosswalk

87500--Infectious agent detection by nucleic acid (DNA or RNA); vancomycin resistance (e.g., enterococcus species van A, van B), amplified probe technique; **OR** 87798--Infectious agent detection by nucleic acid (DNA or RNA), not otherwise specified; amplified probe technique, each organism

CMS Final Crosswalk Decision

87798—Infectious agent detection by nucleic acid (DNA or RNA), not otherwise specified, amplified probe technique, each organism

Rationale

This test uses an amplified probe technique from a cultured specimen. CPT 87798 describes a general amplified code technique. CMS believes this is a better fit than cross-walking to an amplified code technique targeted to a specific organism.

New Code

88738

New Code Description

Hemoglobin (Hgb), quantitative, transcutaneous

Industry Recommended Crosswalk

88740--Hemoglobin, quantitative, transcutaneous, per day; carboxyhemoglobin

CMS Final Crosswalk Decision

88740—Hemoglobin, quantitative, transcutaneous, per day; carboxyhemoglobin

Rationale

CMS selected CPT 88740 as an appropriate crosswalk because it describes a transcutaneous, quantitive measurement of hemoglobin using similar techniques and methodologies.

New Code

G0430

New Code Description

Drug screen, qualitative; multiple drug classes other than chromatographic method, each procedure

Industry Recommended Crosswalk

80100--Drug screen, qualitative; multiple drug classes chromatographic method, each procedure

CMS Final Crosswalk Decision

80100—Drug screen, qualitative; multiple drug classes chromatographic method, each procedure

Rationale

G0430 is being created to limit the billing to 1 time per procedure and to remove the limitation of the method (chromatographic) which made CPT 80100 inappropriate in many instances.

New Code

G0431

New Code Description

Drug screen, qualitative; single drug class method (e.g., immunoassay, enzyme assay), each drug class

Industry Recommended Crosswalk

80101--Drug screen qualitative; single drug class method (e.g., immunoassay, enzyme assay), each drug class

CMS Final Crosswalk Decision

80101—Drug screen qualitative; single drug class method (e.g., immunoassay, enzyme assay), each drug class

Rationale

G0431 is a direct replacement for CPT 80101. CMS intends to make CPT 80101 no longer active once G0431 becomes available.