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| <b>CMS Manual System</b>                     | <b>Department of Health &amp; Human Services (DHHS)</b>   |
| <b>Pub 100-04 Medicare Claims Processing</b> | <b>Centers for Medicare &amp; Medicaid Services (CMS)</b> |
| <b>Transmittal 2730</b>                      | <b>Date: June 20, 2013</b>                                |
|  | <b>Change Request 8339</b>                                |

**Transmittal 2726, dated June 14, 2013, is being rescinded and replaced by Transmittal 2730, dated June 20, 2013, to remove DME MAC Responsibility and correct the narrative for CPT 36415. All other information remains the same.**

**SUBJECT: Coding Requirements for Laboratory Specimen Collection Update**

**I. SUMMARY OF CHANGES:** Current CMS instructions found at Publication 100-04, Chapter 16, Section 60.1.4, need to be updated due to questions received from the Laboratory industry. This CR is necessary to correct coding in processing claims for laboratory specimen collection services.

**EFFECTIVE DATE: July 16, 2013**

**IMPLEMENTATION DATE: July 16, 2013**

*Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.*

**II. CHANGES IN MANUAL INSTRUCTIONS:** (N/A if manual is not updated)

R=REVISED, N=NEW, D=DELETED-*Only One Per Row.*

| <b>R/N/D</b> | <b>CHAPTER / SECTION / SUBSECTION / TITLE</b>           |
|--------------|---|
| R            | 16/60.1.4 - Coding Requirements for Specimen Collection |

**III. FUNDING:**

**For Fiscal Intermediaries (FIs), Regional Home Health Intermediaries (RHHIs):**

No additional funding will be provided by CMS; Contractors activities are to be carried out with their operating budgets

**For Medicare Administrative Contractors (MACs):**

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC statement of Work. The contractor is not obliged to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

**IV. ATTACHMENTS:**

**Business Requirements**

**Manual Instruction**

*\*Unless otherwise specified, the effective date is the date of service.*

## Attachment - Business Requirements

|             |                   |                     |                      |
|-------------|-------------------|---------------------|----------------------|
| Pub. 100-04 | Transmittal: 2730 | Date: June 20, 2013 | Change Request: 8339 |
|-------------|-------------------|---------------------|----------------------|

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**SUBJECT: Coding Requirements for Laboratory Specimen Collection Update**

**EFFECTIVE DATE: July 16, 2013**

**IMPLEMENTATION DATE: July 16, 2013**

### I. GENERAL INFORMATION

**A. Background:** Current CMS instructions have a terminated code listed in the manual for the routine venipuncture for collection of specimen(s). CMS is releasing this update to these manual instructions to list the active code and address questions received from the Laboratory industry. Since the fee schedules and systems were updated when the coding change occurred, there is no need to include any system or fee schedule updates.

**B. Policy:** Although the manual is being updated to reflect current coding requirements for the routine venipuncture for collection of specimen(s), there is no change in policy. Publication 100-04, Chapter 16, Section 60.1.4 is being updated to correct the coding requirements for specimen collection.

### II. BUSINESS REQUIREMENTS TABLE

*"Shall" denotes a mandatory requirement, and "should" denotes an optional requirement.*

| Number | Requirement  | Responsibility |   |             |             |        |             |             |                           |             |             |             |       |
|--------|--|----------------|---|-------------|-------------|--------|-------------|-------------|---------------------------|-------------|-------------|-------------|-------|
|        |  | A/B MAC        |   |             | D<br>M<br>E | F<br>I | C<br>A<br>R | R<br>H<br>I | Shared-System Maintainers |             |             |             | Other |
|        |  | A              | B | H<br>H<br>H |             |        |             |             | F<br>I<br>S               | M<br>C<br>S | V<br>M<br>S | C<br>W<br>F |       |
| 8339.1 | Medicare Contractors shall note changes in Publication, 100-04, Chapter 16, Section 60.1.4 for policy on Coding Requirements for Specimen Collection services. | X              | X |             |             | X      | X           |             |                           |             |             |             |       |

### III. PROVIDER EDUCATION TABLE

| Number | Requirement | Responsibility |
|--------|-------------|----------------|
|        |             |                |

|        |  | A/B<br>MAC |   |             | D<br>M<br>E<br>M<br>A<br>C | F<br>I<br>M<br>A<br>C | C<br>A<br>R<br>R<br>I<br>E<br>R | R<br>H<br>H<br>I | Other |
|--------|--|------------|---|-------------|----------------------------|-----------------------|---------------------------------|------------------|-------|
|        |  | A          | B | H<br>H<br>H |                            |                       |                                 |                  |       |
| 8339.2 | <p>MLN Article : A provider education article related to this instruction will be available at <a href="http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/">http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/</a> shortly after the CR is released. You will receive notification of the article release via the established "MLN Matters" listserv. Contractors shall post this article, or a direct link to this article, on their Web sites and include information about it in a listserv message within one week of the availability of the provider education article. In addition, the provider education article shall be included in the contractor's next regularly scheduled bulletin. Contractors are free to supplement MLN Matters articles with localized information that would benefit their provider community in billing and administering the Medicare program correctly.</p> | X          | X |             |                            | X                     | X                               |                  |       |

#### IV. SUPPORTING INFORMATION

##### Section A: Recommendations and supporting information associated with listed requirements: N/A

"Should" denotes a recommendation.

| X-Ref Requirement Number | Recommendations or other supporting information: |
|--------------------------|--|
|                          |  |

##### Section B: All other recommendations and supporting information: N/A

#### V. CONTACTS

**Pre-Implementation Contact(s):** Fred Rooke, 404-562-7205 or fred.rooke@cms.hhs.gov

**Post-Implementation Contact(s):** Contact your Contracting Officer's Representative (COR) or Contractor Manager, as applicable.

#### VI. FUNDING

##### Section A: For Fiscal Intermediaries (FIs), Regional Home Health Intermediaries (RHHIs):

No additional funding will be provided by CMS; Contractors activities are to be carried out with their operating budgets

##### Section B: For Medicare Administrative Contractors (MACs):

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS do not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to

be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

## **60.1.4 - Coding Requirements for Specimen Collection**

**(Rev 2730, Issued: 06-20-13, Effective: 07-16-13, Implementation: 07-16-13)**

The following HCPCS codes and terminology must be used:

- **36415 – Collection of venous blood by venipuncture.**
- **P9615 – Catheterization for collection of specimen(s).**

The allowed amount for specimen collection in each of the above circumstances is included in the laboratory fee schedule distributed annually by CMS.