

MLN Matters Number: MM6304 Revised **Related Change Request (CR) #: 6304**
Related CR Release Date: December 9, 2008 **Effective Date: January 1, 2009**
Related CR Transmittal #: R1645CP **Implementation Date: January 5, 2009**

Changes to the Laboratory National Coverage Determination (NCD) Edit Software for January 2009

Note: This article was revised on April 27, 2018, to update Web addresses. All other information remains the same.

Provider Types Affected

Physicians, providers, and suppliers submitting claims to Medicare carriers, fiscal intermediaries (FIs), or Part A/B Medicare Administrative Contractors (A/B MACs) for clinical diagnostic laboratory services provided for Medicare beneficiaries.

What You Need to Know

This article is based on Change Request (CR) 6304 which announces the changes that will be included in the January 2009 release of the edit module for clinical diagnostic laboratory National Coverage Determinations (NCDs). The last quarterly release of the edit module was issued in October 2008.

Background

The National Coverage Determinations (NCDs) for clinical diagnostic laboratory services were developed by the laboratory negotiated rulemaking committee and published in a final rule on November 23, 2001. Nationally uniform software was developed and incorporated in the shared systems so that laboratory claims subject to one of the 23 NCDs were processed uniformly throughout the nation effective January 1, 2003.

In accordance with the *Medicare Claims Processing Manual*, Chapter 16, Section 120.2 (see <http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/clm104c16.pdf> on the Centers for Medicare & Medicaid Services (CMS) website), the laboratory edit module is updated quarterly (as necessary) to reflect ministerial coding updates and substantive changes to the NCDs developed through the NCD process.

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CR 6304 announces changes to the laboratory edit module, for changes in laboratory NCD code lists for January 2009 as described below. These changes become effective for services furnished on or after January 1, 2009, and are as follows:

For HIV Testing:

- Add ICD-9-CM code 482.42 to the list of ICD-9-CM codes covered by Medicare for the HIV Testing (Diagnosis) (190.14) NCD.

For Partial Thromboplastin Time (PTT):

- Add ICD-9-CM code range 249.40-249.41 to the list of ICD-9-CM codes covered by Medicare for the Partial Thromboplastin Time (PTT) (190.16) NCD.

For Prothrombin Time (PT):

- Add ICD-9-CM code range 249.40-249.41 and the ICD-9-CM codes 197.7, V15.21, V15.22, and V15.29 to the list of ICD-9-CM codes covered by Medicare for the Prothrombin Time (PT) (190.17) NCD.
- Delete ICD-9-CM code V15.2 from the list of ICD-9-CM codes covered by Medicare for the Prothrombin Time (PT) (190.17) NCD.

For Serum Iron Studies:

- Add ICD-9-CM code ranges 249.00-249.01, 249.10-249.11, 249.20-249.21, 249.30-249.31, 249.40-249.41, 249.50-249.51, 249.60-249.61, 249.70-249.71, 249.80-249.81, and 249.90-249.91, 285.22, 285.29, V15.21, V15.22, and V15.29 to the list of ICD-9-CM codes covered by Medicare for the Serum Iron Studies (190.18) NCD.

For Blood Glucose Testing:

- Add ICD-9-CM code 482.42 and the code ranges 249.00-249.01, 249.10-249.11, 249.20-249.21, 249.30-249.31, 249.40-249.41, 249.50-249.51, 249.60-249.61, 249.70-249.71, 249.80-249.81, and 249.90-249.91 to the list of ICD-9-CM codes covered by Medicare for the Blood Glucose Testing (190.20) NCD.

For Glycated Hemoglobin/Glycated Protein:

- Add ICD-9-CM code ranges 249.00-249.01, 249.10-249.11, 249.20-249.21, 249.30-249.31, 249.40-249.41, 249.50-249.51, 249.60-249.61, 249.70-249.71, 249.80-249.81, and 249.90-249.91 to the list of ICD-9-CM codes covered by Medicare for the Glycated Hemoglobin/Glycated Protein (190.21) NCD.

For Thyroid Testing:

- Add ICD-9-CM code ranges 249.00-249.01, 249.10-249.11, 249.20-249.21, 249.30-249.31, 249.40-249.41, 249.50-249.51, 249.60-249.61, 249.70-249.71, 249.80-249.81, and 249.90-249.91 to the list of ICD-9-CM codes covered by Medicare for the Thyroid Testing (190.22) NCD.

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For Lipid Testing:

- Add ICD-9-CM code ranges 249.00-249.01, 249.10-249.11, 249.20-249.21, 249.30-249.31, 249.40-249.41, 249.50-249.51, 249.60-249.61, 249.70-249.71, 249.80-249.81, and 249.90-249.91 to the list of ICD-9-CM codes covered by Medicare for the Lipids Testing (190.23) NCD.

For Gamma Glutamyl Transferase:

- Add ICD-9-CM code 275.2 to the list of ICD-9-CM codes covered by Medicare for the Gamma Glutamyl Transferase (190.32) NCD.

For Fecal Occult Blood Test (FOBT):

- Add ICD-9-CM codes 530.86 and 530.87 to the list of ICD-9-CM codes covered by Medicare for the Fecal Occult Blood Test (FOBT) (190.34) NCD.

For All 23 NCDs (190.12-190.34):

- Add ICD-9-CM codes V16.52 and V73.81 to the list of denied ICD-9-CM codes for all 23 Lab NCDs.

Additional Information

The official instruction, CR 6304, issued to your carrier, FI, or A/B MAC regarding this change may be viewed at <http://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/downloads/R1645CP.pdf>.

If you have any questions, please contact your carrier, FI, or A/B MAC at their toll-free number, which may be found at <http://www.cms.gov/Research-Statistics-Data-and-Systems/Monitoring-Programs/provider-compliance-interactive-map/index.html>.

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Document History

| Date of Change | Description |
|-------------------|---|
| April 27, 2018 | This article was revised to update Web addresses. |
| November 11, 2008 | Initial article released |

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