## NEWSLETTER

Volume 22 No. 01 January 2012

**TO:** Independent Clinical Laboratories, Hospital-Based Laboratories,

Physicians, Advanced Practice Nurses, Certified Nurse Specialists, Nurse Midwives, Independent Clinics and Federally Qualified

Health Centers – For Action

Health Maintenance Organizations – For Information Only

SUBJECT: Revised Coverage and Reimbursement for Drug Screening

Tests (CPT Procedure Codes 80100, 80101, 80101QW, 80102,

80104, 80104QW, G0430, G0431, G0434 and G0434QW)

**EFFECTIVE:** Laboratory claims with service dates on or after October 1, 2011

PURPOSE: Providers were notified of changes in New Jersey FamilyCare (NJFC)/Medicaid policy regarding coverage and reimbursement for drug screening tests in the DMAHS Newsletter Volume 21, No. 20, dated September 2011. This Newsletter is intended to announce a revision to NJFC/Medicaid policy regarding coverage of services billed under CPT codes 80104 and 80104QW and replaces DMAHS Newsletter Volume 21, No. 20.

**BACKGROUND:** The NJFC/Medicaid program is revising its current policy regarding coverage and reimbursement for drug screening tests. These changes are intended to reflect best practices and provide the Division of Medical Assistance and Health Services (DMAHS) the opportunity to better manage expenditures for these laboratory services.

## **ACTION:**

- (1) <u>Effective for service dates on or after October 1, 2011</u>, the following changes in coverage, reimbursement and billing procedures shall apply to laboratory claims for drug screening tests:
- CPT G0434/G0434QW are new procedure codes for billing the use of a <u>multiple-drug test</u> device, other than chromatographic, any number of drug classes, per patient encounter.

Note: Only one (1) encounter may be billed per date of service; and no more than two (2) patient encounters may be billed per month.

CPT 80104/80104QW are new procedure codes for billing the use of a <u>single-drug test</u> device, other than chromatographic, multiple drug classes, per patient encounter.

Note: <u>Up to eight (8)</u> single-drug tests may be billed per date of service <u>based on medical appropriateness</u>; and no more than two (2) patient encounters may be billed per month.

• CPT 80102 is a pre-existing CPT code that has been assigned a new utilization standard: Only five (5) confirmatory tests may be billed per date of service; and no more than two (2) patient encounters may be billed per month.

It is important to note that claims for CPT codes G0434 or G0434QW and 80104 or 80104QW shall be denied payment if billed with the same date of service.

(2) Effective for service dates on or after October 1, 2011, CPT codes 80100, 80101, 80101QW, G0430 and G0431 are deleted.

The Division is aware that the frequency of drug screen testing for certain patients may exceed these new utilization standards. If additional testing is required, providers may request payment authorization(s) from DMAHS. To request a payment authorization, please submit to the address indicated below a properly completed CMS 1500 claim form; a written order signed by the prescriber; and a brief written justification.

Please submit this documentation to:

Office of the Medical Director

New Jersey Division of Medical Assistance and Health Services
P.O. Box 712

Trenton, New Jersey 08625-0712

Attention: Drug Screen Testing

If you have any questions regarding this Newsletter, please contact Molina Medicaid Solutions Provider Services at 1-800-776-6334.

RETAIN THIS NEWSLETTER FOR FUTURE REFERENCE

CPT CODE	DESCRIPTION	MAXIMUM FEE ALLOWANCE
G0434 G0434QW	Multiple-Drug Test Device (Multiple Drug Classes per Device)	\$16.38
	Drug screen, other than chromatographic; any number of drug classes, by CLIA waived test or moderate complexity test, per patient encounter will be used to report very simple testing methods, such as dipsticks, cups, cassettes, and cards, that are interpreted visually, with the assistance of a scanner, or are read utilizing a moderately complex reader device outside the instrumented laboratory setting (i.e., non-instrumented devices), per patient encounter.	
	NOTE: No more than (2) patient encounters may be billed per month.	
80104 80104QW	Single-Drug Test Device (Single Drug Class per Device)	\$3.25 Per Test
	Drug screen, multiple drug classes, other than chromatographic, each procedure, per patient encounter.	
	The following list contains examples of drugs classes that are commonly assayed by qualitative screen, followed by confirmation with a second method: Alcohols, Amphetamines, Barbiturates, Benzodiazepines, Cocaine, Methadone, Methaqualones, Opiates, Phencyclidines, Phenothiazines, Propxphenes, Tetrahydrocannabinoids, Tricyclic antidepressants	
	NOTE: Up to eight (8) single-drug tests may be billed per date of service <u>based on medical appropriateness</u> ; and no more than (2) patient encounters may be billed per month.	
80102	NOTE: The billing of CPT codes 80104 and 80104QW shall be monitored on a continual basis by DMAHS.	
	Drug confirmation, each procedure (Quantitative)	\$15.00
	NOTE: Only five (5) confirmatory tests may be billed per date of service; and no more than two (2) patient encounters may be billed per month.	
	NOTE: Do not report G0434 or G0434QW with 80104 or 80104QW on the same day of service.	