




**Commonwealth of Massachusetts**  
**Executive Office of Health and Human Services**  
**Office of Medicaid**  
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Boston, MA 02111  
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MassHealth  
Transmittal Letter LAB-31  
December 2007

**TO:** Independent Clinical Laboratories Participating in MassHealth  
**FROM:** Tom Dehner, Medicaid Director   
**RE:** *Independent Clinical Laboratory Manual* (Revised Service Codes and Description)

This letter transmits revisions to service codes and descriptions contained in the *Independent Clinical Laboratory Manual*. The revised Subchapter 6 is effective for dates of service on or after October 1, 2007. Claims already submitted with October 2007 dates of service do not need to be resubmitted.

### Updated Fee Schedule

The Division of Health Care Finance and Policy (DHCFP) has updated its regulations governing independent clinical laboratories, effective for dates of service on or after October 1, 2007. To obtain a fee schedule, you may download these regulations at no cost at [www.mass.gov/dhcfp](http://www.mass.gov/dhcfp). You may also purchase a paper copy of the DHCFP regulations from either the Massachusetts State Bookstore or from the Division of Health Care Finance and Policy (see addresses and telephone numbers below). You must contact them first to find out the price of the paper copy of the publication. The regulation title for laboratory services is 114.3 CMR 20.00: Clinical Laboratory Services.

Massachusetts State Bookstore  
State House, Room 116  
Boston, MA 02133  
Telephone: 617-727-2834  
[www.mass.gov/sec/spr](http://www.mass.gov/sec/spr)

Division of Health Care Finance and Policy  
Two Boylston Street  
Boston, MA 02116  
Telephone: 617-988-3100  
[www.mass.gov/dhcfp](http://www.mass.gov/dhcfp)

### Code Replacement

Among other changes, Service Code **G0001** has been deleted from Subchapter 6. Effective for dates of service on or after October 1, 2007, providers must bill for this service using the following replacement code:

P9604 Travel allowance one way in connection with medically necessary laboratory specimen collection drawn from homebound or nursing home bound patient; prorated trip charge.

Claims already paid using Service Code G0001 for dates of service on or after October 1, 2007 do not need to be resubmitted. Providers billing with Service Code P9604 should report two units signifying the trip to and from the patient's location.

### **MassHealth Web Site**

This transmittal letter and attached pages are available on the MassHealth Web site at [www.mass.gov/masshealth](http://www.mass.gov/masshealth).

### **Questions**

If you have any questions about this transmittal letter, please contact MassHealth Customer Service at 1-800-841-2900, e-mail your inquiry to [providersupport@mahealth.net](mailto:providersupport@mahealth.net), or fax your inquiry to 617-988-8974.

### **NEW MATERIAL**

(The pages listed here contain new or revised language.)

#### **Independent Clinical Laboratory Manual**

Pages 6-29 through 6-36

### **OBSOLETE MATERIAL**

(The pages listed here are no longer in effect.)

#### **Independent Clinical Laboratory Manual**

Pages 6-29 through 6-36 — transmitted by Transmittal Letter LAB-28

<b>Commonwealth of Massachusetts MassHealth Provider Manual Series</b>	<b>Subchapter Number and Title</b> 6. Service Codes and Descriptions	<b>Page</b> 6-29
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601 Laboratory Service Codes and Descriptions (cont.)

Service

Code      Service Description

87651	Streptococcus, group A, amplified probe technique
87652	Streptococcus, group A, quantification
87653	Streptococcus, group B, amplified probe technique
87660	Trichomonas vaginalis, direct probe technique
87797	Infectious agent detection by nucleic acid (DNA or RNA), not otherwise specified; direct probe technique, each organism
87798	amplified probe technique, each organism
87799	quantification, each organism
87800	Infectious agent detection by nucleic acid (DNA or RNA), multiple organisms; direct probe(s) technique
87801	amplified probe(s) technique
87802	Infectious agent antigen detection by immunoassay with direct optical observation; Streptococcus, group B
87803	Clostridium difficile toxin A
87804	Influenza
87807	respiratory syncytial virus
87808	Trichomonas vaginalis
87810	Infectious agent detection by immunoassay with direct optical observation; Chlamydia trachomatis
87850	Neisseria gonorrhoeae
87880	Streptococcus, group A
87899	not otherwise specified
87900	Infectious agent drug susceptibility phenotype prediction using regularly updated genotypic bioinformatics
87901	Infectious agent genotype analysis by nucleic acid (DNA or RNA); HIV 1, reverse transcriptase and protease
87902	Hepatitis C virus
87903	Infectious agent phenotype analysis by nucleic acid (DNA or RNA) with drug resistance tissue culture analysis, HIV 1; first through 10 drugs tested
87904	each additional drug tested (List separately in addition to code for primary procedure.) (Use 87904 in conjunction with 87903.)
87999	Unlisted microbiology procedure (I.C.) (P.A.)

**ANATOMIC PATHOLOGY**

**Cytopathology**

88104	Cytopathology, fluids, washings or brushings, except cervical or vaginal; smears with interpretation
88106	simple filter method with interpretation
88107	smears and simple filter preparation with interpretation
88108	Cytopathology, concentration technique, smears and interpretation (e.g., Saccomanno technique)
88112	Cytopathology, selective cellular enhancement technique with interpretation (eg, liquid based slide preparation method), except cervical or vaginal
88130	Sex chromatin identification; Barr bodies
88140	peripheral blood smear, polymorphonuclear drumsticks

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601 Laboratory Service Codes and Descriptions (cont.)

Service

Code      Service Description

Codes 88141-88155 and 88164-88167 are used to report cervical or vaginal screening by various methods and to report physician interpretation services. Use codes 88150-88154 to report Pap smears that are examined using non-Bethesda reporting. Use codes 88164-88167 to report Pap smears that are examined using the Bethesda System of reporting. Use codes 88142-88143 to report specimens collected in fluid medium with automated thin layer preparation that are examined using any system of reporting (Bethesda or non-Bethesda). Within each of these three code families choose the one code that describes the screening method(s) used. Codes 88141 and 88155 should be reported in addition to the screening code chosen when the additional services are provided.

- 88141      Cytopathology, cervical or vaginal (any reporting system); requiring interpretation by physician (List separately in addition to code for technical service.)
- 88142      Cytopathology, cervical or vaginal (any reporting system), collected in preservative fluid, automated thin layer preparation; manual screening under physician supervision
- 88143      with manual screening and rescreening under physician supervision
- 88147      Cytopathology smears, cervical or vaginal; screening by automated system under physician supervision
- 88148      screening by automated system with manual rescreening under physician supervision
- 88150      Cytopathology, slides, cervical or vaginal; manual screening under physician supervision
- 88152      with manual screening and computer-assisted rescreening under physician supervision
- 88153      with manual screening and rescreening under physician supervision
- 88154      with manual screening and computer-assisted rescreening using cell selection and review under physician supervision
- 88155      Cytopathology, slides, cervical or vaginal, definitive hormonal evaluation (e.g., maturation index, karyopyknotic index, estrogenic index) (List separately in addition to code(s) for other technical and interpretation services.)
- 88160      Cytopathology, smears, any other source; screening and interpretation
- 88161      preparation, screening, and interpretation
- 88162      extended study involving over five slides and/or multiple stains
- 88164      Cytopathology, slides, cervical or vaginal (the Bethesda System); manual screening under physician supervision
- 88165      with manual screening and rescreening under physician supervision
- 88166      with manual screening and computer-assisted rescreening under physician supervision
- 86167      with manual screening and computer-assisted rescreening using cell selection and review under physician supervision
- 88172      Cytopathology, evaluation of fine needle aspirate; immediate cytohistologic study to determine adequacy of specimen(s)
- 88173      interpretation and report
- 88174      Cytopathology, cervical or vaginal (any reporting system), collected in preservative fluid, automated thin layer preparation, screening by automated system, under physician supervision
- 88175      with screening by automated system and manual rescreening or review, under physician supervision
- 88182      Flow cytometry; cell cycle or DNA analysis

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601 Laboratory Service Codes and Descriptions (cont.)

Service

Code      Service Description

- 88184      Flow cytometry, cell surface, cytoplasmic, or nuclear marker, technical component only; first marker  
88185      Flow cytometry, cell surface, cytoplasmic, or nuclear marker, technical component only; each additional marker (list separately in addition to code for first marker) (report 88185 in conjunction with 88184)  
88187      Flow cytometry, interpretation; 2 to 8 markers  
88188      Flow cytometry, interpretation; 9 to 15 markers  
88189      Flow cytometry, interpretation; 16 or more markers  
88199      Unlisted cytopathology procedure (I.C.)

**Cytogenetic Studies**

- 88230      Tissue culture for non-neoplastic disorders; lymphocyte  
88233      skin or other solid tissue biopsy  
88235      amniotic fluid or chorionic villus cells  
88237      Tissue culture for neoplastic disorders; bone marrow, blood cells  
88239      solid tumor  
88240      Cryopreservation, freezing and storage of cells, each cell line  
88241      Thawing and expansion of frozen cells, each aliquot  
88245      Chromosome analysis for breakage syndromes; baseline Sister Chromatid Exchange (SCE), 20-25 cells  
88248      baseline breakage, score 50-100 cells, count 20 cells, 2 karyotypes, (e.g., for ataxia telangiectasia, Fanconi anemia, fragile X)  
88249      score 100 cells, clastogen stress (e.g., diepoxybutane, mitomycin C, ionizing radiation, UV radiation)  
88261      Chromosome analysis; count 5 cells, 1 karyotype, with banding  
88262      count 15-20 cells, 2 karyotypes, with banding  
88263      count 45 cells for mosaicism, 2 karyotypes, with banding  
88264      analyze 20-25 cells  
88267      Chromosome analysis, amniotic fluid or chorionic villus, count 15 cells, 1 karyotype, with banding  
88269      Chromosome analysis, in situ for amniotic fluid cells, count cells from 6-12 colonies, 1 karyotype, with banding  
88271      Molecular cytogenetics; DNA probe, each (e.g., FISH)  
88272      chromosomal in situ hybridization, analyze 3-5 cells (e.g., for derivatives and markers)  
88273      chromosomal in situ hybridization, analyze 10-30 cells (e.g., for microdeletions)  
88274      interphase in situ hybridization, analyze 25-99 cells  
88275      interphase in situ hybridization, analyze 100-300 cells  
88280      Chromosome analysis; additional karyotypes, each study  
88283      additional specialized banding technique (e.g., NOR, C-banding)  
88285      additional cells counted, each study  
88289      additional high resolution study  
88291      Cytogenetics and molecular cytogenetics, interpretation and report  
88299      Unlisted cytogenetic study (I.C.)

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601 Laboratory Service Codes and Descriptions (cont.)

Service

Code      Service Description

**SURGICAL PATHOLOGY**

Complete descriptions for codes 88300 through 88309 are listed in the American Medical Association's Current Procedural Terminology (CPT) code book.

- 88300 Level I - surgical pathology, gross examination only
- 88302 Level II - surgical pathology, gross and microscopic examination
- 88304 Level III - surgical pathology, gross and microscopic examination
- 88305 Level IV - surgical pathology, gross and microscopic examination
- 88307 Level V - surgical pathology, gross and microscopic examination
- 88309 Level VI - surgical pathology, gross and microscopic examination
- 88311 Decalcification procedure (List separately in addition to code for surgical pathology examination.)
- 88312 Special stains (List separately in addition to code for primary service); Group I for microorganisms (e.g., Gridley, acid fast, methenamine silver), each
- 88313      Group II, all other (e.g., iron, trichrome), except immunocytochemistry and immunoperoxidase stains, each
- 88314      histochemical staining with frozen section(s)
- 88318 Determinative histochemistry to identify chemical components (e.g., copper, zinc)
- 88319 Determinative histochemistry or cytochemistry to identify enzyme constituents, each
- 88342 Immunohistochemistry (including tissue immunoperoxidase), each antibody
- 88346 Immunofluorescent study, each antibody; direct method
- 88347      indirect method
- 88348 Electron microscopy; diagnostic
- 88349      scanning
- 88355 Morphometric analysis; skeletal muscle
- 88356      nerve
- 88358      tumor (eg, DNA ploidy)
- 88360 Morphometric analysis, tumor immunohistochemistry, (e.g., Her-2/neu, estrogen receptor/progesterone receptor), quantitative or semiquantitative, each antibody, manual
- 88361      using computer-assisted technology
- 88362 Nerve teasing preparations
- 88365 In situ hybridization (e.g, FISH), each probe
- 88367 Morphometric analysis, in situ hybridization (quantitative or semiquantitative), each probe, using computer-assisted technology
- 88368      manual
- 88371 Protein analysis of tissue by Western Blot, with interpretation and report
- 88372      immunological probe for band identification, each
- 88380 Microdissection (e.g., mechanical, laser capture) (I.C.)
- 88384 Array-based evaluation of multiple molecular probes; 11 through 50 probes
- 88385      51 through 250 probes
- 88386      251 through 500 probes
- 88399 Unlisted surgical pathology procedure (I.C.)

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601 Laboratory Service Codes and Descriptions (cont.)

Service

Code      Service Description

**OTHER PROCEDURES**

- 89049      Caffeine halothane contracture test (CHCT) for malignant hyperthermia susceptibility, including interpretation and report
- 89050      Cell count, miscellaneous body fluids (e.g., cerebrospinal fluid, joint fluid), except blood
- 89051      with differential count
- 89055      Leukocyte assessment, fecal, qualitative or semiquantitative
- 89060      Crystal identification by light microscopy with or without polarizing lens analysis, tissue or any body fluid (except urine)
- 89100      Duodenal intubation and aspiration; single specimen (e.g., simple bile study or afferent loop culture) plus appropriate test procedure (I.C.)
- 89105      collection of multiple fractional specimens with pancreatic or gallbladder stimulation, single or double lumen tube
- 89125      Fat stain, feces, urine, or respiratory secretions
- 89130      Gastric intubation and aspiration, diagnostic, each specimen, for chemical analyses or cytopathology
- 89132      after stimulation
- 89135      Gastric intubation, aspiration, and fractional collections (e.g., gastric secretory study); one hour
- 89136      two hours
- 89140      two hours including gastric stimulation (e.g., histalog, pentagastrin)
- 89141      three hours, including gastric stimulation
- 89160      Meat fibers, feces
- 89190      Nasal smear for eosinophils
- 89220      Sputum, obtaining specimen, aerosol induced technique (separate procedure) (I.C.)
- 89225      Starch granules, feces
- 89230      Sweat collection by iontophoresis (I.C.)
- 89235      Water load test
- 89240      Unlisted miscellaneous pathology test (I.C.)

**MEDICINE**

**CARDIOVASCULAR**

**Cardiography**

- 93000      Electrocardiogram, routine ECG with at least 12 leads; with interpretation and report
- 93005      tracing only, without interpretation and report
- 93010      interpretation and report only
- 93012      Telephonic transmission of post-symptom electrocardiogram rhythm strip(s), 24-hour attended monitoring, per 30-day period of time; tracing only
- 93014      physician review with interpretation and report only
- 93015      Cardiovascular stress test using maximal or submaximal treadmill or bicycle exercise, continuous electrocardiographic monitoring, and/or pharmacological stress; with physician supervision, with interpretation and report

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601 Laboratory Service Codes and Descriptions (cont.)

Service  
Code

Service Description

- 93016 physician supervision only, without interpretation and report only
- 93017 tracing only, without interpretation and report
- 93018 interpretation and report only
- 93024 Ergonovine provocation test
- 93040 Rhythm ECG, one to three leads; with interpretation and report
- 93041 tracing only without interpretation and report
- 93042 interpretation and report only
- 93224 Electrocardiographic monitoring for 24 hours by continuous original ECG waveform recording and storage, with visual superimposition scanning; includes recording, scanning analysis with report, physician review and interpretation
- 93225 recording (includes hook-up, recording, and disconnection)
- 93226 scanning analysis with report
- 93227 physician review and interpretation
- 93230 Electrocardiographic monitoring for 24 hours by continuous original ECG waveform recording and storage without superimposition scanning utilizing a device capable of producing a full miniaturized printout; includes recording, microprocessor-based analysis with report, physician review and interpretation
- 93231 recording (includes hook-up, recording, and disconnection)
- 93232 microprocessor-based analysis with report
- 93233 physician review and interpretation
- 93235 Electrocardiographic monitoring for 24 hours by continuous computerized monitoring and non-continuous recording, and real-time data analysis utilizing a device capable of producing intermittent full-sized waveform tracings, possibly patient activated; includes monitoring and real-time data analysis with report, physician review and interpretation
- 93236 monitoring and real-time data analysis with report
- 93237 physician review and interpretation
- 93268 Patient demand single or multiple event recording with presymptom memory loop, 24-hour attended monitoring, per 30-day period of time; includes transmission, physician review and interpretation
- 93278 Signal-averaged electrocardiography (SAECG), with or without ECG

**Other Vascular Studies**

- 93724 Electronic analysis of antitachycardia pacemaker system (includes electrocardiographic recording, programming of device, induction and termination of tachycardia via implanted pacemaker, and interpretation of recordings)
- 93731 Electronic analysis of dual-chamber pacemaker system (includes evaluation of programmable parameters at rest and during activity where applicable, using electrocardiographic recording and interpretation of recordings at rest and during exercise, analysis of event markers and device response); without reprogramming
- 93732 with reprogramming
- 93734 Electronic analysis of single-chamber pacemaker system (includes evaluation of programmable parameters at rest and during activity where applicable, using electrocardiographic recording and interpretation of recordings at rest and during exercise, analysis of event markers and device response); without reprogramming
- 93735 with reprogramming



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601 Laboratory Service Codes and Descriptions (cont.)

Service

Code      Service Description

**Other Procedures**

93799      Unlisted cardiovascular service or procedure (I.C.)

**SUPPLEMENTARY**

P9604      Travel allowance one way in connection with medically necessary laboratory specimen collection drawn from homebound or nursing-home-bound patients; prorated miles actually traveled

S3820      Complete BRCA1 and BRCA2 gene sequence analysis for susceptibility to breast and ovarian cancer

This publication contains codes that are copyrighted by the American Medical Association. Certain terms used in the service descriptions for HCPCS codes are defined in the Current Procedural Terminology (CPT) code book.

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